



## ECHO Idaho: Cancer Survivorship CASE RECOMMENDATION FORM

**ECHO Session Date:** 3/11/26

**Presenter Credential:** RN

**Presenter Name:** \_\_\_\_\_

Thank you for presenting your patient at ECHO Idaho –Cancer Survivorship.

**Summary:** 52-year-old woman with strong social support, private insurance, and healthy lifestyle factors who was diagnosed in 2026 with bilateral synchronous breast cancer—Stage IIIB on the left (ER+/PR+/HER2+) and Stage IB on the right (ER+/PR+/HER2–)—after an abnormal screening mammogram. The patient is undergoing neoadjuvant TCHP chemotherapy with plans for surgery afterward and will continue HER2-targeted therapy and endocrine therapy. Her history includes insomnia treated with hydroxyzine, bilateral hip pain, and a maternal history of breast cancer; genetic testing is pending. She receives supportive services including social work, a breast navigator, and a treatment learning class, and she aims to keep working during treatment while cold-capping with her husband’s help.

**Question:** How do we make sure we are providing the patients that require little to no "extra attention" with the support they need - before, during, and after treatment?

**After review of the case presentation and discussion of this patient’s case among the ECHO Community of Practice, the following suggestions have been made:**

### **Provide Ongoing Psychosocial and Family Support**

- Consider individual counseling for the patient.
- Encourage family or couples counseling, including support for the spouse and children.
- Encourage family or couples counseling, recognizing that partners and children may also need support during treatment.
- Continue offering access to:
  - Social work
  - Counseling services
  - Support groups
  - Rehabilitation services
- Regularly check in with patients who appear to be coping well externally.
  - Do not assume patients with strong support systems or positive coping styles are doing well internally.
  - Providers should routinely ask about emotional wellbeing and unmet needs.
- Provide anticipatory guidance for couples and relationships
  - Educate couples about potential challenges during treatment and recovery (e.g., hormonal changes, emotional stress).
  - Normalizing these experiences can help couples navigate them together.



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### Proactively Support Physical Health and Function

- Begin physical therapy early in treatment to maintain activity and function.
- Address potential issues such as:
  - Fatigue
  - Neuropathy prevention
  - Shoulder mobility after surgery
  - Lymphedema risk
  - Return to work and daily activities
- Maintaining physical activity during treatment may help reduce complications and support long-term recovery.
- Build on the patient's existing exercise habits to help manage:
  - Treatment fatigue
  - Weight changes
  - Physical functioning
  - Emotional wellbeing

### Promote Peer Connection and Community Resources

- Encourage patients to connect with fellow cancer survivors, as peer relationships often provide unique emotional support and practical insight.
- Many younger patients on curative therapy work hard to maintain normalcy and may attend treatments alone.
- Recommend peer and community resources such as:
  - Support groups for younger adults through St. Luke's Cancer Institute (contact: [Gena Hunter](#))
  - Experiential programs such as [Casting for Recovery](#), which offers free fly-fishing retreats for individuals with breast cancer
  - Patient narratives that normalize the experience, such as [This Might Surprise You: A Breast Cancer Story](#)

### Prepare Patients for the Long Survivorship Journey

- Educate patients about the phases of survivorship: Provide anticipatory guidance on what to expect during and after treatment, including physical, emotional, and social changes.
- During survivorship visits, ask patients what "closure" or completion of treatment looks like for them to help support emotional transition.
- Prepare patients for potential emotional challenges such as:
  - Post-treatment depression
  - Survivorship guilt
  - Unexpected emotional adjustment after treatment ends
- Acknowledge that the need for support often increases after active treatment ends, when structure and frequent medical contact decrease.