



您的放射治疗 给患者和家属的资讯

本讲义解释了放射治疗的过程、副作用以及遇到任何问题或疑虑时可以联系的工作人员。

我们了解，对您来说这是一个充满压力的时期。我们会尽最大努力使您的治疗过程尽可能顺利。

您的第一次门诊就诊：咨询

放射肿瘤科医生是接受过癌症放射治疗特殊培训的医生。如果您还没有见到您的放射肿瘤科医生，您将在第一次就诊时与这位医生见面，讨论如何使用放射治疗方法治疗您的癌症。

会见护士

在咨询当天您可能与一位注册护士（RN）见面，或者也可能在您的计划治疗就诊的那一天与这位护士见面（参见第 2 页）。

在与护士见面时，您的护士将会：

- 询问您的健康史
- 评估在放射治疗时必须监控的有关您的任何健康需求
- 与您讨论放射治疗可能产生的副作用
- 解释如何联系放射肿瘤科的工作人员
- 回答您对治疗的任何疑问



您的放射治疗咨询和护士会面将在 UWMC -Montlake campus 华大医学蒙特湖校区的 Radiation Oncology clinic 放射肿瘤科诊所进行。

根据您的治疗情况，您还可能：

- **回答 IV 静脉注射显影剂的问卷：**如果您需要在制定治疗计划的就诊时进行 *计算机断层*(CT)扫描，您会在与护士见面时填写此表格。
- **打开您的导管端口：**如果您身体有一个可用于 CT 扫描的导管端口，例如 Power Port 高性能端口，请携带您的 ID 身份卡或患者腕带（或放置端口时收到的其他 ID 标志卡）与护士见面。**只有**当您携带了这些信息，您的护士才可以在医疗操作中打开和使用您的导管端口。

您制定治疗计划的就诊

在您制定治疗计划就诊时，我们会使用特殊的 CT 扫描机器来拍摄放射治疗目标部位的图像。这些图像将帮助您的护理团队规划您的治疗。这个程序称为模拟/规划性 CT 扫描。

模拟/规划性 CT 扫描

*模拟*可以帮助您的护理团队做到：

- 确定放射治疗时您的身体需要处于的位置
- 制作特殊的装置来帮助您固定在该位置上
- 拍摄我们需要的图像来规划为您专门定制的放射治疗方案

当您的医生和 CT/模拟 (CT/SIM) 治疗师正在确定放射线瞄准的确切位置时，他们会要求您一动不动地躺在扫描床上。

您可能会接受显影剂，以便医生更容易看到您的身体内部。这种显影剂可能是口服（吞服）的，或者您可能需要接受 IV（静脉注射）显影剂。IV 显影剂是通过您手臂上的一根静脉导管或通过身体上的中心导管/导管端口（如果您装有的话）进行传输。请与您的护士讨论您将会使用哪一种导管。

扫描时您可能被要求以特定的方式呼吸，以帮助获得最佳图像。如果需要您这样做，CT/SIM 工作人员将通过对讲机向您发出指示。

如果您的治疗是在 pelvis 骨盆区域，您可能需要排空大便或让膀胱充满。请遵循您的护理团队给您的指示。

这个精准定位过程可能需要 30 分钟到 2 小时。大多数规划性 CT 扫描会持续约 1 小时。

扫描完成后您的身体上可能留有标贴，也可能留有用永久性笔画出的标记。这些标记将在您的治疗过程中发挥作用，用以确保您处于正确的位置。请遵循 CT/模拟工作人员的指示，将这些标记保留在其位置上，直到您的治疗开始。

固定装置

在放射治疗期间，您身体的接受治疗的部位必须保持不动。在您的治疗计划就诊时，在完成 CT 扫描之前，将制作一个固定装置，以防止您在治疗期间身体部位的移动。

取决于您的治疗部位，您可能需要使用超过 1 个的固定装置。每个装置的制作时间约为 15 分钟。

如果有任何装置令您感到不舒服，请告诉您的 CT/SIM 工作人员。您的装置由我们的部门保管，直到您完成放射治疗。

以下列出的是我们可能用于您治疗的固定装置类型：

咬合块：咬合块就像牙医制作的牙齿模具。它将您的下颌保持在打开位置。咬合块通常用于头部或颈部有肿瘤的患者。如果您需要一个咬合块，您会被转介到附近的牙科诊所制作一个。

面罩：如果您的头部或颈部接受放射治疗，您将需要佩戴一个面罩。每次接受放射时，面罩都会使您的头部保持在完全相同的位置上。为了制作面罩，需要将一个塑料透明网在温水中加热并软化，然后盖在脸上模压成型。起初，它感觉就像一块温暖、湿润的毛巾。面膜冷却和干燥后会变硬。面罩成型后，将其取下，并在您的眼睛、鼻子和嘴巴对应位置剪孔。

真空凹模：真空凹模就像一个豆袋。它会按照您的躯干、手臂或腿部的形状而形成一个凹模，以确保您每次接受治疗时都处于相同的位置。

为了制作凹模，您需要躺下或将有关联的身体部位放在袋子上。当空气从袋子中被抽出时，袋子会因抽真空而硬化形成你的身体或四肢的形状，形成一个凹模。

治疗时间表

在您完成模拟/规划性 CT 扫描后，我们将为您安排日常治疗的时间表。每次治疗通常安排在某日的同一时间进行。

如果您的预约时间不适合您，请告诉治疗设备旁的放射治疗师。在 1 或 2 周之后有可能把您调整到不同的治疗时间。

有时，您的治疗时间可能需要改变。如果发生这种情况，我们会尽快通知您。

计划您的治疗

在您的治疗计划就诊后，您的医生和剂量师（放射计划专家）将共同为您制定一个治疗计划。该计划是在计算机上完成，通常需要 7 至 10 个工作日，或 1.5 至 2 周。如果您的医生想立即开始放射治疗，计划会更快完成。

验证模拟日（VSIM）

在这次就诊期间，放射治疗师将带您快速“浏览”部门的流程。他们会向您展示：

- 更衣室
- 治疗接待区

接下来，您将前往治疗室（*拱形放射机器*）。治疗师将帮助您置身于治疗位置。我们会进行一个称为“*锥形束 CT 扫描*(CBCTs)”或“*拍摄*”的低能量扫描，以确保治疗部位与计算机规划的区域完全吻合。

治疗师还可能在您的皮肤上留下永久性的“标点”（纹身）。这些标记帮助他们在每次的治疗中都以完全相同的方式安排放射束。他们可能会用半永久性的笔在纹身上画一个“X”标记。**除非经您的放射治疗师允许，否则请勿除去这些标记。**

在您的治疗期间，我们将每天进行 CBCTs 或经常进行拍摄，以确保您的身体处于正确的位置。这些扫描仅用于帮助检查您的位置，并不能非常清楚地显示身体组织的细节。我们很少能在这些类型的扫描成像中看出癌症或查看放射治疗的效果。

治疗当日

到达诊所

为了保护患者的隐私，治疗接待区仅供患者使用。但是，如果您需要人帮助穿衣或行走，您可以有一名照顾人员陪伴您。

当您到来接受治疗时：

- 请到前台办理报到手续。
- 请留意候诊室的监视器是否有任何治疗延误的消息。
- 在预定治疗时间提前 15 分钟前往后面的等候区。
- 按照您在“验证模拟日”期间收到的说明进行操作（请参阅第 4 页）。

置身于拱形放射机器中

当您置身于拱形放射机器中，放射治疗师会随时监视着您。当他们在机器旁边与您在一起时，他们也能够在闭路电视上看到您。您能够通过对讲机与他们交谈。

您将在放射机器中停留 15 到 30 分钟。大部分操作时间是用于将您定位并调整机器的位置。实际的放射治疗时间仅持续几分钟。

关于您的治疗时间表

- 按计划接受所有治疗对您来说很重要。请计划好您的日程安排，以便您可以每次都来治疗，不错过任何的治疗。
- 如果您迟到或无法预约，请立即致电诊所。
- 如果您知道无法避免一个时间冲突，请尽快告诉您的放射治疗师。他们会尽力在当天为您安排一个不同的治疗时间。
- 如果您觉得自己病得太重而无法前来接受治疗，请致电您的护士。重要的是您不要错过任何治疗。
- 我们每隔 15 至 30 分钟安排一次患者放射治疗。为了帮助我们按时进行治疗，请每天按照您的预定时间到达放射治疗区。
- 请确保我们记下了您最可靠的电话号码。如果出现以下情况，我们可能需要给您打电话并推迟您的治疗：

- 放射机器需要维修或保养
- 其他患者出现了紧急情况

您的放射护理团队成员

医生和执业护士

- 您在癌症中心/放射肿瘤科的**主治医生**是放射肿瘤科医生（专于用放射疗法治疗癌症患者的医生），也是华盛顿大学医学院的教职人员。
- 您的**住院医生**是正在接受放射治疗高级培训的医生。该医生每 3 个月轮换一次新的服务，因此您在治疗期间可能会见到新的住院医生，也可能不会见到住院医生。
- **执业护士**、高级执业护士也可能在您接受治疗时参与您的日常护理。

您的主治医生是： _____

您的住院医生是： _____

您的执业护士是： _____

您在治疗就诊期间每周会见一次主治医生和您的护理团队，这称为“医生日”。在每周一次的见面当中，医疗助理将测量您的生命体征并记录您的体重。您的医生将检查您的治疗进展情况并回答您可能有的任何问题。这是您已经预定了的就诊时间，但如果需要改变，您可以要求在其他时间见医生。

放射科护士

放射科护士是您和您的护理团队之间的一个联系人。如果您的感觉有任何情况变化以及您有任何疑问或问题，请告诉您的放射科护士。

您的放射科护士是： _____

放射治疗师

我们的取得专业委员会认证的放射治疗师是以团队合作方式来操作放射治疗机器。在您的医生批准了您的治疗计划后，他们执行实际治疗操作。

您在治疗期间可能会见到不同的放射治疗师。我们的放射治疗师实行轮班制，以便他们能够保持操作我们所有的 5 台放射治疗机器的熟练技能。

医疗助理

在治疗期间您至少每周一次的就诊（“医生日”）当中，我们的医疗助理将测量您的生命体征和体重。如果您有任何疑问或问题，他们还将帮助您与您的护理团队联系。

患者服务专职人员

在诊所，患者服务专职人员会迎接您，为您办理报到手续、帮助更改日程安排、帮助您与您的护理团队联系、在您离开诊所时办理结束手续、确保您获取合适的停车优惠票，并根据需要安排后续访问或其他服务。

您可能见不到的幕后护理团队成员

还有其他的幕后工作人员，帮助您规划治疗并确保治疗安全而且质量最高。他们包括：

- **护士长。**该护士负责确保您获得最优质的护理服务。如果您觉得您的问题或疑虑没有得到解决，您可以致电前台 206.598.4100 联系护士长，要求转接至护士长。
- **放射物理学家。**这些专家确保您的放射治疗计划是安全的，并且放射设备是安全和正常工作。
- **剂量师。**这些专家根据放射肿瘤科医生规定的放射剂量来计划治疗。
- **患者护理协调员。**这些工作人员在您的放射治疗开始之前帮助安排咨询和实行规划性扫描。

其他癌症中心/放射肿瘤科工作人员

- **临床营养师**可以帮助您评估您的饮食情况，并帮助您找到解决可能出现的任何饮食问题的方法。这位营养师是 Harborview Medical Center (HMC) 港景医疗中心(HMC)或 Fred Hutchinson Cancer Center (FHCC) 福瑞德·哈金森癌症中心的营养师的后备人员。我们的工作人员会根据需要帮助您与我们部门的临床营养师联系。
- **社会工作者**可以帮助您解决可能出现的情绪问题，并帮助您找到可能需要的资源，以便您的治疗尽可能顺利进行。该社工是 HMC 或

FHCC 社工的后备人员。我们的工作人员将根据需要帮助您联系我们部门的社会工作者。

副作用

大多数情况下，放射的副作用仅限于接受治疗的部位。在您第一次就诊时，您的放射肿瘤科医生会与您讨论可能出现的副作用。您的护士会给您一份讲义，描述您治疗部位出现的一般副作用。如果您有任何副作用，请告诉您的放射科护士或医生。

感染

如果您有任何以下感染迹象，请致电您的放射科护士：

- 流鼻涕、打喷嚏或咳嗽
- 发烧高于 100.5° F (38.1° C)
- 发冷
- 身体酸痛
- 皮疹或带状疱疹
- 腹泻

隔离或预防措施

如果 HMC 或 FHCC 的工作人员已将您置于保护性隔离/预防措施中，或者如果您曾接触过 chickenpox 水痘、shingles 带状疱疹或 tuberculosis 肺结核 (TB) 病毒，请在前往癌症中心之前致电您的放射科护士。UWMC 的隔离指南与 HMC 和 FHCC 的隔离指南相同。

有问题吗？

我们重视您提出的问题。如果你有问题或疑虑，请致电您的医生或医疗保健提供者：

平日：从上午 8 点至下午 5 点，致电 206.598.4100，然后按 1。

下班时间以及周末和节假日：请致电 206.598.6190 要求呼叫放射肿瘤科值班住院医师。

紧急情况 and 紧迫问题

- 如果您生病或遇到紧急情况，请前往 UWMC 急诊部或拨打 911。
- 如果您有紧迫的顾虑或问题：
 - 工作日上午 8 点至下午 5 点之间，请致电我们的前台 **206.598.4100**，然后按 1。您的电话将被转接到患者服务专员。
 - 下班时间以及周末和节假日，请致电 **206.598.6190** 并要求呼叫 **Radiation Oncology resident on call 放射肿瘤科值班住院医师**。

Your Radiation Treatment

Information for patients and families

This handout describes what to expect during your radiation treatments, side effects, and who to call with any questions or concerns.

We know that this is a stressful time for you. We will do our best to make your treatment process go as smoothly as possible.

Your First Clinic Visit: Consult

A *radiation oncologist* is a doctor who has special training in treating cancer with radiation. If you have not already met with your radiation oncologist, you will meet with this doctor at your first visit to talk about using radiation to treat your cancer.

Nurse Visit

You may meet with a registered nurse (RN) on the day of your consult. Or, your nurse visit may take place on the same day as your treatment planning visit (see page 2).

At the nurse visit, your nurse will:

- Ask you about your health history
- Assess any of your health needs that must be monitored while you are having radiation therapy
- Talk with you about possible side effects of your radiation therapy
- Explain how to contact staff in Radiology Oncology
- Answer any questions you may have about your treatment



Your radiation consult and nurse visit will be in the Radiation Oncology clinic at UWMC - Montlake campus.

Depending on your treatment, you may also:

- **Answer an IV contrast questionnaire:** If you need *contrast* for the *computed tomography* (CT) scan that will be done during your treatment planning visit, you will fill out this form at the nurse visit.
- **Access your port-a-cath:** If you have a CT-capable port-a-cath such as a Power Port, bring your ID card or band (or other ID that you received when your port was placed) to the nurse visit. Your nurse can access your port-a-cath for use during the procedure **only** if you bring this information.

Your Treatment Planning Visit

At your treatment planning visit, a special CT scanner will be used to take images of the area or areas where your radiation therapy will be aimed. These images will help your care team plan your treatment. This is called a simulation/planning CT scan.

Simulation/Planning CT Scan

Simulation is the process that helps your care team:

- Determine the position your body needs to be in during your daily radiation treatments
- Make special devices to help you stay in that position
- Take the images we need to plan your customized radiation therapy

You will be asked to lie very still on a table while your doctor and CT/simulation (CT/SIM) therapists locate the exact place to aim the radiation. This “simulates” (is the same as) the position you will be in for your radiation therapy.

You may receive *contrast* to make it easier for the doctor to see inside your body. This contrast may be oral (swallowed), or you may need to receive IV (*intravenous*) contrast. The IV contrast will be delivered through a line in your arm or through a *central line/port-a-cath*, if you have one. Please talk with your nurse about which one will be used for you.

You may be asked to breathe in a specific way to help create the best images. If you need to do this, CT/SIM staff will give you instructions over an intercom.

If your treatment is in the pelvis area, you may need to either empty your bowels OR have a full bladder. Please follow the instructions your care team gave you.

This precise process may take from 30 minutes to 2 hours. Most planning CT scan visits usually last about 1 hour.

You may leave this scan with stickers on your body, as well as marks drawn with permanent pen. These will be used during your treatment to make sure you are in the right position. Please follow the directions of the CT/Simulation staff about keeping these in place until your treatment begins.

Immobilization Devices

The part or parts of your body that will be treated must stay very still during your radiation treatments. At your treatment planning visit, before the CT scan is done, an *immobilization device* will be made to help keep parts of your body from moving during treatment.

Depending on the area of your treatment, you may need more than 1 device. Each device takes about 15 minutes to make.

Please tell your CT/SIM staff if any device is uncomfortable. We will keep your devices in our department until your radiation treatment is complete.

Here are the kinds of immobilization devices that we may use for your treatment:

- **Bite block:** A bite block is like a mold of your teeth that a dentist may make. It holds your jaw in an open position. Bite blocks are often used for patients with tumors in their head or neck. If you need a bite block, you will be referred to a nearby dental clinic to have it made.
- **Mask:** You will need a mask if you are having radiation to your head or neck. The mask will keep your head in exactly the same position each time you receive radiation.

To make your mask, a plastic see-through mesh is heated and softened in warm water, then molded over your face. At first, it will feel like a warm, wet washcloth. The mask will harden as it cools and dries. After the mask is formed, it is removed and holes are cut out for your eyes, nose, and mouth.

- **Vacu cradle:** A vacu cradle is like a beanbag. It forms a mold in the shape of your torso, arms, or legs to ensure that you are in the same position every time you have a treatment.

To make the cradle, you will lie down or place your affected body part on the bag. As the air is removed from the bag, it hardens to the shape of your body or limb, forming a mold.

Treatment Scheduling

After you are finished with the Simulation/Planning CT Scan, we will give you an appointment time for your daily treatment. Treatment is usually at the same time every visit.

If your appointment time does not work well for you, please tell the radiation therapist at the treatment machine. Different treatment times may be open or become open in 1 or 2 weeks.

At times, your treatment time may need to be changed. If this occurs, we will let you know as soon as we can.

Planning Your Treatment

After your treatment planning visit, your doctors and *dosimetrists* (radiation planning specialists) will work together to create a treatment plan for you. This planning is done on a computer. It usually takes 7 to 10 business days, or 1½ to 2 weeks. If your doctor wants to start your radiation treatment right away, the planning will be done more quickly.

Verification Simulation Day (VSIM)

During this visit, radiation therapists will give you a quick “tour” of the process in the department. They will show you:

- The changing room
- The treatment reception area

Next, you will go to the treatment room (*radiation vault*). Therapists will help place you in your treatment position. We will take low-energy scans called *cone beam CT scans* (CBCTs) or films to make sure the treatment area exactly matches the area that was planned by computer.

The therapists may also mark your skin with permanent “dots” (tattoos). These marks help them line up the radiation beams exactly the same way for each treatment. You may have an “X” drawn over the tattoo with a semi-permanent pen. **Please do not remove these marks unless your radiation therapist tells you to.**

During your treatment, we will take CBCTs daily or films often to make sure your body is in the correct position. These scans only help check your position and do not show the details of body tissues very clearly. It is very rare that we can see the cancer or the results of radiation treatment in these types of imaging.

Treatment Day

Arriving at the Clinic

To protect the privacy of our patients, the treatment reception area is for patients only. But, if you need help getting dressed or walking, one of your caregivers may come with you.

When you arrive for your treatment:

- Check in at the front desk.
- Please check the monitor in the waiting room for any treatment delays.
- Go to the back waiting room area 15 minutes before your scheduled treatment time.
- Follow the instructions you received during your Verification Simulation (see page 4).

In the Radiation Vault

While you are in the radiation vault, the radiation therapists will monitor you at all times. When they are not in the vault with you, they will be able to see you on a closed-circuit TV. You will be able to talk with them through an intercom.

You will be in the radiation vault for 15 to 30 minutes. Much of this time is used to position you and to adjust the position of the machine. The actual radiation treatment lasts only a few minutes.

About Your Treatment Schedule

- It is important for you to receive all of your treatments as prescribed. Please plan your schedule so you can come every day and not miss any treatments.
- If you are going to be late or cannot keep an appointment, please call the clinic right away.
- If you know of a time conflict that you cannot avoid, please tell your radiation therapists as soon as you can. They will try to give you a different treatment time for that day.
- If you feel you are too sick to come for treatment, please call your nurse. It is important that you not miss any treatments.
- Radiation patients are scheduled every 15 to 30 minutes. To help us stay on schedule, please be in the radiation treatment area by your scheduled time every day.

- Please make sure we have your most reliable phone number. We may need to call you and postpone your treatment if:
 - A radiation machine needs repair or service
 - We have an emergency situation with another patient

Members of Your Radiation Care Team

Doctors and Nurse Practitioners

- Your **attending doctor** in the Cancer Center/Radiation Oncology is a *radiation oncologist* (a doctor who specializes in treating cancer patients with radiation therapy) and a faculty member of the University of Washington School of Medicine.
- Your **resident doctor** is receiving advanced training in radiation therapy. This doctor rotates to a new service every 3 months, so you may see a new resident or not have one during your treatment.
- **Nurse practitioners**, advanced practice nurses, may also be involved in your day-to-day care while you are receiving treatment.

Your attending doctor is: _____

Your resident doctor is: _____

Your nurse practitioner is: _____

You will see an attending doctor and your care team once a week at your on-treatment visit, called “doctor day.” At this weekly visit, a medical assistant will take your vital signs and record your weight. Your doctor will check how your treatment is going and answer any questions you may have. This is your scheduled visit, but you may ask to see your doctor at other times if needed.

Radiation Nurse

The radiation nurse is a link between you and the rest of your care team. Please tell your radiation nurse if there are any changes in how you feel and if you have any concerns or questions.

Your radiation nurse is: _____

Radiation Therapists

Board-certified *radiation therapists* work in teams to run our radiation treatment machines. They provide the actual treatments after your doctor has approved your treatment plan.

You may see different radiation therapists during your treatment. Our radiation therapists are on a rotating schedule so that they keep their skills current on all 5 of our radiation treatment machines.

Medical Assistants

Our medical assistants will take your vital signs and weight at least once a week during your on-treatment visit (“doctor day”). They will also help you connect with your care team if you have any questions or problems.

Patient Services Specialists

Patient Services Specialists will greet you, check you in, help with scheduling changes, connect you to your care team, check you out as you leave, make sure you have the right parking validation, and set up follow-up visits or other services as needed.

Care Team Members You May Not See

Other people work behind the scenes to help plan your treatment and make sure it is safe and of the highest quality. They include:

- **Nurse manager.** This nurse is responsible for making sure you receive the best quality care. If you feel that your questions or concerns are not being addressed, you may reach the nurse manager by calling the front desk at 206.598.4100. Ask to be transferred to the nurse manager.
- **Radiation physicists.** These specialists confirm that your radiation treatment plan is safe and the radiation equipment is safe and working correctly.
- **Dosimetrists.** These specialists plan the treatment based on the radiation oncologist’s prescribed radiation dose.
- **Patient care coordinators.** These staff members help arrange the consults and planning scans before your radiation therapy starts.

Other Cancer Center/Radiation Oncology Staff

- A **clinical dietitian** can help you assess your eating and help you find ways to deal with any eating problems that may arise. This dietitian is a backup to your dietitian at Harborview Medical Center (HMC) or Seattle Cancer Care Alliance (SCCA). Our staff will help you connect with our department clinical dietitian as needed.

- A **social worker** can help you with emotional issues that may arise and help find the resources you may need to help make your treatment go as smoothly as possible. This social worker is a backup to your social worker at HMC or SCCA. Our staff will help you reach our department social worker as needed.

Side Effects

Most times, radiation side effects are limited to the area being treated. At your first visit, your radiation oncologist will talk with you about the side effects that you may have. Your nurse will give you a handout that describes the general side effects for your treatment area. If you have any side effects, please tell your radiation nurse or doctor.

Infections

Call your radiation nurse if you have any of these signs of infection:

- Runny nose, sneezing, or coughing
- Fever higher than 100.5°F (38.1°C)
- Chills
- Body aches
- Rash or shingles
- Diarrhea

Isolation or Precautions

Please call your radiation nurse before you come to the Cancer Center if the staff at HMC or SCCA has placed you in *protective isolation/precautions* or if you have been exposed to chickenpox, shingles, or tuberculosis (TB). The guidelines for isolation at UWMC are the same as the ones at HMC and SCCA.

Emergencies and Urgent Concerns

- If you become ill or have an emergency, come to the UWMC Emergency Department or call 911.
- If you have an urgent concern or question:
 - Weekdays between 8 a.m. and 5 p.m., call our front desk at **206.598.4100** and press **1**. Your call will be forwarded to a Patient Services Specialist.
 - After hours and on weekends and holidays, call **206.598.6190** and ask to page the **Radiation Oncology resident on call**.

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

Weekdays from 8 a.m. to 5 p.m., call 206.598.4100 and press 1.

After hours and on weekends and holidays, call 206.598.6190 and ask to page the Radiation Oncology resident on call.