



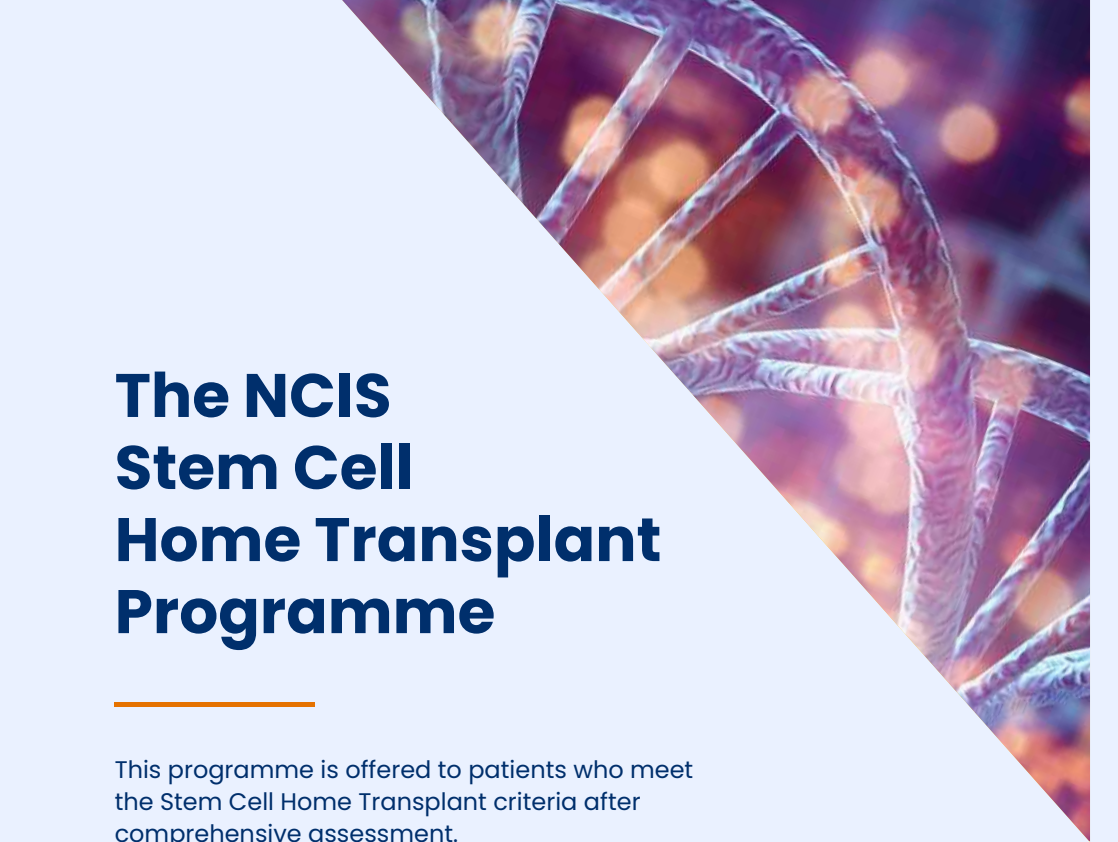
National University
Cancer Institute
Singapore

Stem Cell Home Transplant Programme

Patient and Family Information

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The NCIS Stem Cell Home Transplant Programme

This programme is offered to patients who meet the Stem Cell Home Transplant criteria after comprehensive assessment.

You will be required to make the necessary arrangements for the following:

- Have a competent and dedicated full time caregiver who is available 24 hours a day, 7 days a week
- Stay in an accommodation with an individual bathroom, cooking facilities and clean environment
- Live less than 30 minutes away from the hospital
- Have an electronic device that can make phone calls and video calls, and is connected to the internet (for instances where you may need to call your care team in case of emergencies and for video reviews on your condition) that is accessible to both you and your caregiver
- Be able to stay home for the duration of the programme

Overview of the Transplant Programme

A stem cell transplant protocol which entails all the relevant information, treatment plan and important dates to note will be given to you. Your experience may look as such:

1 During the Transplant

High-dose conditioning chemotherapy and stem cell infusion administered at the Cancer Centre, located in the National University Hospital (NUH) Medical Centre, Level 9.

2 Post Stem Cell Infusion

Your care would be continued by the NUHS@Home team, a team of doctors and nurses, specialised in managing patients at home. The team would arrange scheduled visits to your home and video consultations.

The NUHS@Home team will work together with your primary transplant physician and the stem cell transplant team to deliver seamless care.

3 Post Stem Cell Infusion Care and Monitoring

This is performed at your home/accommodation and will include: health assessments, blood tests, and medication review.

You will need to come back to the hospital if any of the following occur:

1. You require a blood transfusion
2. You develop a fever
3. You experience complications that the medical team deems necessary to be managed in the hospital

Before Your Transplant

Checklist of Items to Prepare for the Home Transplant

HOME MONITORING	HYGIENE
<ul style="list-style-type: none"> <input type="checkbox"/> Oral or axillary thermometer <input type="checkbox"/> Pulse Oximeter* <input type="checkbox"/> Blood pressure machine* <input type="checkbox"/> Heart Rate Monitoring System (selected patients only)* <input type="checkbox"/> Drinking water jug, approximately 2 L capacity <input type="checkbox"/> Pen and notebook for documentation <input type="checkbox"/> Stool container for standby (issued by Hospital) 	<ul style="list-style-type: none"> <input type="checkbox"/> Micropore tape <input type="checkbox"/> Plastic sheet to cover central line dressing during shower <input type="checkbox"/> Alcohol hand-rub <input type="checkbox"/> Handwashing gel <input type="checkbox"/> Disposable 3-ply surgical masks <input type="checkbox"/> Electric shaver (for men)
CRYOTHERAPY	HOMEMADE SALTWATER GURGLE
<ul style="list-style-type: none"> <input type="checkbox"/> Ice-cube maker (to make small ice cubes to suck on) <input type="checkbox"/> Ice box 	<ul style="list-style-type: none"> <input type="checkbox"/> Kitchen salt <input type="checkbox"/> Water bottle for 8 ounces/ 240 mL of water

*These items will be provided by the NUHS@Home team.

Note: Items for personal hygiene will not be supplied by your transplant team or NUHS@Home team.

Please do make the necessary arrangements to obtain them for your use.

Preparing Your Home Environment for the Transplant



Cleaning Your Home

- Do not conduct renovation during the transplant period. Any paintwork should be done more than 3 months prior.
 - Ensure your home environment is reviewed to minimise the risk for falls (e.g. clutter-free, toilet is hazard-free).
 - Arrange for cleaning and servicing of your air conditioning unit prior to your home transplant.
 - Remove any carpets and clean the floor regularly.
 - Clean any drapes, blinds, and furniture in the house at least once prior to transplant.
-



Preparing Your Kitchen

- Clean all your cooking facilities thoroughly at least once prior to transplant.
- Ensure your fridge has different compartments to store the raw, uncooked, and frozen products separately from other foods.



Lighting Your Home

- Ensure good lightings around the house, including the walkway from the bedroom to the toilet.
- Prepare a night lamp for your bedroom to ensure sufficient lighting if needed at night.



Caring for Your Personal Hygiene and Others

- Use a separate toilet from other family members if possible. Do wash and keep the toilets clean after use, especially if you are sharing the toilet with other family members.



Caring for Your Environment

- Relocate your pets during the transplant period.
- Do not place any potted plants or flowers in the house as they can potentially harbour pathogens that may increase your risk of infection.

Sample of Home Stem Cell Transplant Protocol for Myeloma Patients

Below is a sample of the stem cell transplant protocol. For details specific to your unique protocol, please refer to the transplant protocol provided by your physician. Please note that this plan may be adjusted during the course of treatment, depending on your condition throughout the transplant.

Day -6	Day -5	Day -2
<p>You will be scheduled for a peripherally inserted central catheter (PICC) line insertion procedure at NUH Medical Centre, Cancer Centre, Level 9.</p>	<p>You will have a PICC line review and undergo some blood tests at NUH Medical Centre, Cancer Centre, Level 9.</p>	<p>Registration at Cancer Centre, NUH Medical Centre, Level 9, at 8am.</p> <p>Your transplant team will review your condition again before proceeding with conditioning chemotherapy.</p> <p>IV conditioning chemotherapy will be administered.</p>
Day -1	Day 0	
<p>Rest Day</p> <p>Video or phone consultation with your transplant team.</p> <p>You may be instructed to take anti-emetics if required.</p>	<p>Stem Cell Infusion Day</p> <p>Registration at Cancer Centre, NUH Medical Centre, Level 9, at 8am.</p> <p>Your transplant team will review your condition before stem cell infusion.</p> <p>After stem cell infusion, your condition will be reviewed. If your condition is favourable, you will then be admitted to NUHS@Home.</p>	

From this point on, you will be required to take your vital signs and submit the information to your care team **three times a day**, even on days where home visits are conducted. You can refer to the **“Taking Your Vital Signs”** section for more details.

Day +1	Day +2	Day +3
<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Home visit by a NUHS@Home nurse to assess your condition. Your nurse will also conduct Central Venous Access Device (CVAD) flushing, blood taking and dressing.</p> <p>Afternoon video consult with NUHS@Home team.</p>	<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Afternoon phone consult with NUHS@Home team.</p>	<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Home visit by a NUHS@Home nurse to assess your condition. Your nurse will also conduct CVAD flushing, blood taking and dressing.</p> <p>You will also be administered SC GCSF to aid in neutrophil recovery.</p>
Day +4	Day +5	Day +6
<p>Morning video consult with your transplant and NUHS@Home team.</p>	<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Home visit by a NUHS@Home nurse to assess your condition. Your nurse will also conduct CVAD flushing, blood taking and dressing.</p> <p>Your blood counts may begin to drop during this period, making you more vulnerable to experiencing side effects.</p> <p>Afternoon phone consult with NUHS@Home team.</p>	<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Afternoon phone consult with NUHS@Home team.</p>

Day +7	Day +8	Day +9
<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Home visit by a NUHS@Home nurse to assess your condition. Your nurse will also conduct CVAD flushing, blood taking and dressing.</p> <p>Afternoon phone consult with NUHS@Home team.</p>	<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Afternoon phone consult with NUHS@Home team.</p>	<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Home visit by a NUHS@Home nurse to assess your condition. Your nurse will also conduct CVAD flushing, blood taking and dressing.</p> <p>Afternoon phone consult with NUHS@Home team.</p>
Day +10	Day +11	Day +12
<p>Morning video consult with your transplant and NUHS@Home team.</p>	<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Home visit by a NUHS@Home nurse to assess your condition. Your nurse will also conduct CVAD flushing, blood taking and dressing.</p> <p>Afternoon phone consult with NUHS@Home team.</p>	<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>More SC GCSF may be administered if required.</p> <p>Afternoon phone consult with NUHS@Home team.</p>

Day +13	Day +14
<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Afternoon phone consult with NUHS@Home team.</p>	<p>Morning video consult with your transplant and NUHS@Home team.</p> <p>Home visit by a NUHS@Home nurse to assess your condition. Your nurse will also conduct CVAD flushing, blood taking and dressing.</p> <p>If your condition is favourable, you may be discharged from NUHS@Home. Your post stem cell transplant care will be discussed with your transplant team. After discharge, you will need to return to the hospital for PICC flushing twice a week via the outpatient clinic.</p>

Apart from the chemotherapy drugs, you will be prescribed with prophylactic medications e.g. oral antimicrobials, anti-emetics and diuretics. Please continue your regular medications unless otherwise directed by your transplant physician. A detailed explanation on the medications will be provided by your transplant team. Please ask questions to clarify any confusion or doubts you may have.

If you are feeling unwell and require hospital treatment immediately during your transplant period, a direct readmission will be conducted. Do refer to the Annex for instructions to get to Ward 58HD.

While you are being cared for by the NUHS@Home team post infusion, you will have access to a 24-hour hotline (**8939 5794**) operated by the clinical team.

During Your Transplant

Taking Your Vital Signs

You will need to take your vital signs and submit the information to your care team **three times a day**. This will include:

- Temperature
- Blood Pressure
- Heart Rate
- Oxygen Levels
- Sugar levels (for some diabetic patients)
- How much you eat, drink, your frequency of passing urine and passing motion

You may wish to make use of the **Patient Monitoring Post-Infusion tables** attached in the Annex to record these vital signs.

How Can I Protect Myself During the Transplant Period?



Personal Hygiene

- Practice good handwashing habits, always using soap and water.
 - Practice good oral hygiene to reduce risk of mucositis. Use a soft bristle toothbrush, the mouthwash as prescribed and the saltwater mixture.
 - Chemotherapy medication is released from the body through urine, stool, vomit, and blood for 48 hours post-administration. After using the toilet, close the lid and flush twice. Men should urinate sitting down to avoid splashing.
-



Take Action

- Take the prescribed medications as directed. If in doubt, check back and clarify with your physician.
- Seek help and report any unusual signs and symptoms promptly. Avoid delay.
- If you notice any unusual rash or blister formations on any part of your body, please inform the medical team immediately.
- Upon arrival at the hospital, please kindly inform the registration counter as temporary isolation may be required in the event it is a contagious condition such as chicken pox, herpes zoster.
- Should you be aware that you have come into contact with someone who has contracted a contagious condition, do practice temporary isolation and consult your physician immediately.

Common Side-Effects of Chemotherapy Treatment and Stem Cell Infusion

You may experience the following side effects. Medication will be provided to you to relieve the symptoms. Please let your medical team know of any symptoms you may be experiencing, especially if in doubt or if not responding to medication. Examples of potential symptoms include (but are not limited to):

Fever of 38°C
or higher with or without
chills and rigours

Bleeding from gums
during passing urine
or motion

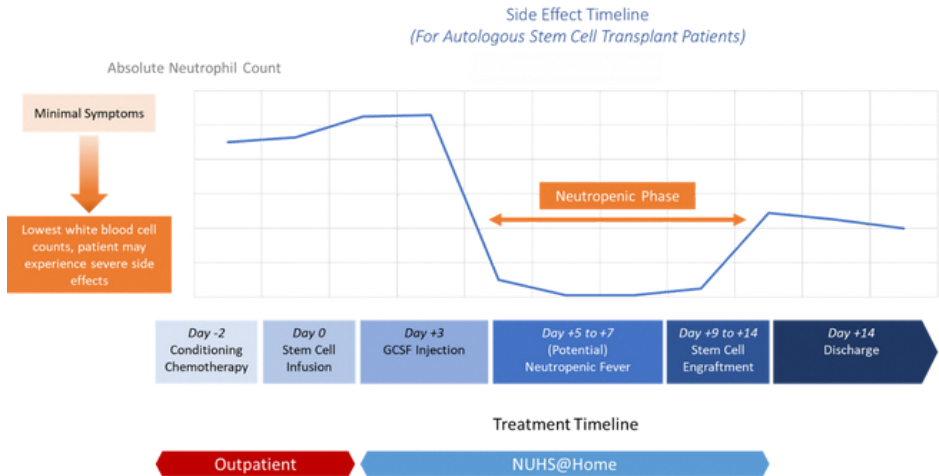
Chest pain or
tightness

Severe headache
with or without
blurring of vision

Other side-effects:

- Shortness of breath
- Nausea / vomiting
- Diarrhoea
- Mouth ulcers
- Flu-like symptoms
- Stomach, indigestion or heartburn
- Pain during urination
- Feeling tired or weak
- Loss of appetite / loss of taste

Patient Journey and Prediction of Side Effects for Myeloma Autologous Stem Cell Transplant



Managing the Side-Effects



Body
Temperature

- Monitor body temperature every 4 hours when you are awake.
- Report to your physician immediately when temperature reaches 38°C or higher.



Diet

- Consume only well-cooked, cleanly prepared food. You should consume the food within 2 hours of preparation.
- Eat small meals frequently. Choose food that is easy to digest.
- Supplement nutritional needs with nutritional formula drinks recommended by the dietician. These are available at the pharmacy.
- Drink plenty of fluids; eat more fruits (if no dietary restrictions) and vegetables to reduce constipation. If constipated, speak with your doctor about suitable laxatives.



Nausea and Diarrhoea

- Take anti-vomiting medications half an hour before food (at least for the first few days after chemotherapy) to minimise nausea and vomiting.
- If you experience diarrhoea, collect stool on the second occurrence as instructed and seek medical attention.
- Do view the “**Managing Your Potential Diet-Related Side-Effects**” portion of this document for other diet-related side-effects and how to manage them.



Physical Activity

- Light exercise is encouraged. Do avoid activities that may cause injury. No vigorous or strenuous exercises e.g. aerobics, weightlifting.
- Avoid swimming to reduce your risk of infection from the pool water.
- To manage low energy levels, plan activities of daily living and take naps / breaks in between. A physiotherapist referral will be arranged prior to transplant and if needed, continuous follow-up can be arranged.

When Should I Consult My Doctor or Nurse?

Please contact the 24-hour NUHS@Home hotline (8939 5794) if you experience any of the symptoms below or if in doubt:

- Rash, hives, itching, wheezing, chest tightness or swelling on mouth / lips / tongue / face
- Fever of 38°C or higher
- Chills and shivering
- Abdominal pain and unable to pass motion for more than three to four days
- Increased vomiting and unable to retain fluids / food
- Bleeding from any site(s)
- Red, swollen / painful skin wounds or sores
- Cough
- Severe sore throat / mouth ulcers
- Pain when passing urine
- Diarrhoea

Who Should I Contact During an Emergency?

CancerLine

9722 0569

When – During office hours, before admission to NUHS@Home (i.e. Day 0 before 12 noon)

NUHS@Home Hotline

8939 5794

When – This is a 24-hour hotline.

Emergencies

995

When – For emergencies eg. severe breathlessness, fainting.

Lifestyle Tips

Caring for Your Diet

- Food Safety and Hygiene Guidelines

While undergoing chemotherapy and haematopoietic stem cell transplant (HSCT), you are at a higher risk of infection with a weakened immune system. As food and drinks can be a major source of bacteria, it is important for you to follow food safety and hygiene guidelines to minimize your risk of food-borne illnesses.



Avoid undercooked or raw food, such as half-boiled eggs, sushi, sashimi and salad.



Cooked food left at room temperature should be consumed within 2 hours after preparation. Do avoid overnight food.



Use a separate knife and chopping board for cooked food and raw food, a separate set for fruits.



Cook meat until well done.



Peel off skin from fruits before eating. Avoid thin-skinned fruits where you are unable to remove the skin, for example, berries and grapes.



Choose individually packaged food and beverages.



Defrost your food in the microwave or in the refrigerator. Avoid leaving it outside at room temperature.



Do not consume food past its expiry date.



Avoid probiotics like yoghurt, raw honey and shellfishes.

- **Food and Drug Interactions**

Certain food may cause possible interaction with the drugs given by doctor. This may alter the efficacy of the treatment. You should avoid the following food during chemotherapy:

- Grapefruit, pomegranate, pomelo, starfruit and their products.
- Herbal products such as ginseng, cordyceps, lingzhi, jamu etc.
- High doses of antioxidants such as multivitamins or others supplements not prescribed by your physician.

- **Eating Well During Your Transplant**

Eating well by maintaining a balanced diet during your transplant is important in your recovery. These are some of the ways that eating well will benefit you:



Follow your dietitian's advice closely and maintain a nutritious and well-balanced diet. You should have an adequate intake of calories, proteins, vitamins, and minerals to help with your recovery. You are encouraged to include a variety of foods in your diet, namely carbohydrates, fats, and proteins. Do refer to the diagram below for more explanations and examples of these food groups.



Carbohydrate

Main source of energy for your body to function properly

For example: rice, noodles, bread, biscuits, pasta, chappati, oats and starchy vegetables such as potatoes and corn.



Protein

Building blocks of your muscle

For example: eggs, chicken, pork, beef, seafood (prawns, squid, fish) and dairy products such as milk, cheese, lentils, tofu and tempeh.



Fat

Most concentrated source of calories to help with weight gain or maintenance

For example: margarine, oils, nuts, seeds, fats from oily fish and avocado.

• Managing Potential Diet-Related Side-Effects



Nausea and Vomiting

- Go for smaller and frequent meals.
 - Choose dry foods to avoid strong aroma, e.g. bread, hard-boiled eggs.
-



Diarrhoea or Constipation

- Hydration is key for both. Aim to drink at least 8 glasses of fluids a day, unless advised otherwise by your physician.
 - Diarrhoea
 - Choose non-carbonated, isotonic drinks to replace electrolytes in your body.
 - Avoid oily, greasy and spicy food.
 - Constipation
 - Drink small amount of prune juice.
 - Consume 2 servings of fruits and vegetables daily.
-



Change in Taste

- Flavour your food with herbs and spices, e.g. add garlic, ginger, onion, pepper, sauces and ketchup.
 - Try a variety of food including new foods that you do not normally eat.
-



Sore Mouth or Mouth Ulcers

- Avoid sour, spicy and rough textured food.
 - Take soft and moist foods with gravy and sauces.
 - Inform your physician if it's hindering you from eating or drinking.
-



Difficulty in Swallowing

- Inform your physician. If your swallowing is severely affected, you may be referred to a speech therapist. You would be required to come into the hospital to be assessed by them.
- Eat slowly and chew well.
- Try softer foods like porridge, kuey teow soup, oats, tofu, fish, eggs, ice cream, soy pudding, etc.

- Nutritional Supplements

If food does not appeal to you, or if you feel too tired or nauseated to eat, or unable to eat at all, your physician or dietitian may prescribe nutritional supplements to help you reach your nutritional targets. Consult your physician or your dietitian about which nutritional supplement is suitable for you.

Please speak to your physician or dietitian if you are concerned about any nutrition related issues.

Disclaimer: It is important to consult with your dietitian for a personalised nutrition plan before your transplant. If you have not already done so, please speak to your physician to ensure you are fully prepared and supported in your transplant journey.

Content reviewed and revised by Dietitian Hoe Zhi Qi on March 2025.

Caring for Your Physical Health

Maintaining a healthy weight and muscle strength is important in aiding your recovery. This can be maintained through regular exercise. Exercise can also make your body stronger if you do not overdo it. Do try to stay active during your treatment and recovery process, even walking around your room can be beneficial. Do consult your physician and physiotherapist on the kind of exercise and intensity that is best for you.

These are some of the exercises that are beneficial for you during your treatment and recovery process:

Bed Exercises

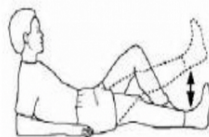
Shoulder Flexion

- Lie with your arms straight at your sides.
- Breathe in as you slowly raise your arms over your head.
- Breathe out as you slowly return to the starting position.



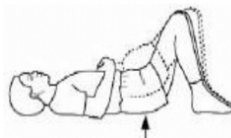
Straight Leg Raise

- Bend one knee, placing your foot flat on the bed.
- Slowly raise the other leg up to about 30° while keeping your knee straight and toes pointed up.
- Hold before slowly lowering your leg down.



Bridging

- Lie on your back with both knees bent and your feet flat.
- Tighten your tummy and buttocks. Push through your feet and lift up your buttocks.
- Hold before slowly lowering down to the starting position.



Hip Abduction

- Lie flat on your back.
- Open both legs apart while keeping them on the bed.
- Progress by performing this on your side when your physiotherapist tells you to do so.



Seated Exercises

Shoulder Abduction

- Breathe in slowly and deeply as you raise your arms out and up towards the ceiling.
- Exhale through pursed lips as you slowly lower your arms to the starting position.



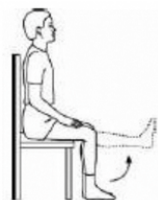
Hip Flexion (Marching)

- Lift your knee up towards your chest while leaning against the backrest of the chair.
- Alternate between left and right leg in a marching fashion.



Knee Extension

- Keeping your thigh on the chair, fully straighten your knee.
- Hold for 2-3 seconds before slowly lowering your leg.
- Progress to using a TheraBand when your physiotherapist tells you to do so.



Standing Exercises

*(Do ensure to hold on to a firm, stable support, e.g. weighted chair, while conducting exercises **under your caregiver's supervision**)*

Sit-To-Stand

- Sit on a chair which is not too low.
- Ensure your feet are positioned behind your knees.
- Lean your body forwards over your knees and stand up.
- Slowly lower yourself back down onto the chair.



Marching on the Spot

- Hold on to a firm support and march on the spot.
- Try to lift your knees up to your hip level.



Heel Raise

- Hold on to a firm support.
- With your feet shoulder width apart, tip toe and lift your heels off the floor.
- Control your descent slowly.
- Progress to single leg heel raises when your physiotherapist tells you to do so.



Caring for Your Emotional Health

Your emotional well-being is just as important as your physical health during the stem cell transplant process. Prior to your transplant, you will be referred to a medical social worker for pre-transplant counselling. This session will help prepare you emotionally for the journey ahead.

Remember, your emotional needs may change throughout your treatment and recovery. Don't hesitate to reach out to your medical social worker for additional support. You may also inform the NUHS@Home Team about any need for further social work assistance.

Your mental health is a crucial part of your overall recovery, and support is available when you need it.

After Your Transplant and Discharge

Immunisations

Your immune system will take time to recover from the transplant. In many cases, the immunity gained from childhood vaccinations and previous infections may not recover on its own.

Vaccination remains one of the safest and most effective ways of preventing infections. Certain vaccine-preventable infections can be more dangerous in stem cell transplant recipients. A scheduled course of vaccinations has been arranged to help rebuild your immunity to these infections.

For transplant patients whose household contacts have received live vaccines:

- Live intranasal influenza vaccine: avoiding contact with patient for 1 week is advised (as far as possible, live intranasal influenza vaccine should not be given to household contacts).
- Rotavirus: avoid changing diapers for 4 weeks.
- Oral polio: avoiding contact with patient for 4-6 weeks is advised (as far as possible, live oral polio vaccines should not be given to household contacts).
- MMR/Varicella/Zoster: no need to avoid, unless skin lesions develop.

It may seem like you are being prescribed a lot of vaccines (and injections) concurrently, but this helps to improve the immune system's response to potential infections, ensuring that your body is well protected against them.

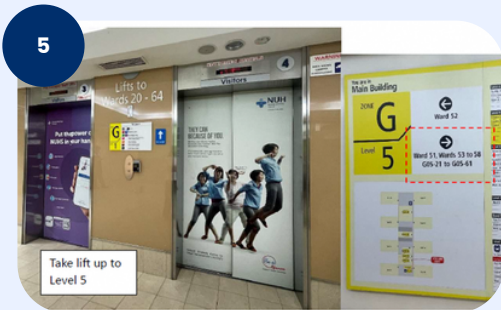
Your revaccination schedule will start around 6 months post-transplant. Your transplant team will communicate to you when your vaccination schedule is to begin.

It is also important for your household contacts to be vaccinated against Influenza (inactivated), mumps, measles and rubella (MMR), and Varicella, to prevent inadvertent exposure to the transplant patient.

Getting to Ward 58 via Private Transport



Getting to Ward 58



Once you've reached Ward 58, please find one of the staff for assistance.







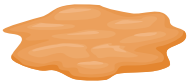
Patient Monitoring Post Infusion

Mine 我的			Hospital / NUH	
My Cup 杯		mls	Cup with colour trim 杯	150 mls
My Cup		mls	Cup without colour trim	200 mls
My Soup Bowl 汤碗		mls	Soup bowl (small) 小碗	200 mls
My Soup Bowl		mls	Soup bowl (big) 大碗	500 mls

Intake-Output Monitoring Chart

Date 日期	Time 时间	Water / Drinks 饮料	Food 饮食	Urine 尿	Bowel 粪便	Vomit 呕吐	Medication / Gargle 药

Bristol Stool Chart

Type 1:		Separate hard lumps, like nuts (hard to pass)
Type 2:		Sausage-shaped but lumpy.
Type 3:		Like a sausage but with cracks on the surface.
Type 4:		Like a sausage or snake, smooth and soft.
Type 5:		Soft blobs with clear-cut edges.
Type 6:		Fluffy pieces with ragged edges, a mushy stool.
Type 7:		Water, no solid pieces. Entirely liquid.

Educational Resources

- [National University Cancer Institute, Singapore | NCIS](#)
- [Brochures | NCIS](#)
- [MIC@Home – MOH Office for Healthcare Transformation \(moht.com.sg\)](#)
- [NUHS@Home | National University Health System](#)

Glossary

Absolute Neutrophil Count (ANC)

- A measure of the number of neutrophils (a type of white blood cell that fights infection) in your blood.

Anti-emetics

- Medications given to prevent or reduce nausea and vomiting.

Antimicrobials

- Medications that fight infections caused by various microorganisms (including antibiotics, antifungals, and antivirals).

Autologous Stem Cell Transplant

- A procedure where your own stem cells are collected, stored, and then returned to your body after high-dose chemotherapy.

Central Venous Access Device (CVAD)

- A tube inserted into a large vein to give medications and take blood samples. This includes PICC lines.

Conditioning Chemotherapy

- High-dose chemotherapy given before stem cell transplantation to destroy cancer cells and prepare your body for the transplant.

Cryotherapy

- The use of ice or cold temperatures as a treatment, such as sucking on ice cubes during chemotherapy to prevent mouth sores.

Diuretics

- Medications that help control fluid balance by increasing urination.

GCSF (Granulocyte Colony-Stimulating Factor)

- A medication that helps your body produce more white blood cells after chemotherapy.

Haematopoietic Stem Cell Transplant (HSCT)

- The medical term for stem cell transplant, where blood-forming stem cells are used to restore the body's ability to produce blood cells.

Haemoglobin (Hb)





- A protein in red blood cells that carries oxygen throughout your body.

Mucositis	<ul style="list-style-type: none"> • Inflammation and ulceration of the mucous membranes lining the digestive tract, often causing mouth sores.
Neutrophils	<ul style="list-style-type: none"> • A type of white blood cell that helps fight infection.
NUHS@Home	<ul style="list-style-type: none"> • A home care service provided by the National University Health System that delivers medical care to patients in their homes.
Pathogens	<ul style="list-style-type: none"> • Microorganisms (such as bacteria, viruses, or fungi) that can cause disease.
PICC (Peripherally Inserted Central Catheter)	<ul style="list-style-type: none"> • Peripherally Inserted Central Catheter - a type of CVAD inserted through a vein in your arm to give medications and take blood samples.
Platelets	<ul style="list-style-type: none"> • Blood cells that help with blood clotting and prevent bleeding.
Probiotics	<ul style="list-style-type: none"> • Live bacteria and yeasts that are usually good for digestive health but should be avoided during transplant due to infection risk.
Prophylactic Medications	<ul style="list-style-type: none"> • Preventive medicines given to stop infections or other complications from occurring.
Stem Cells	<ul style="list-style-type: none"> • Special cells in the bone marrow that can develop into different types of blood cells.
Vital Signs	<ul style="list-style-type: none"> • Important measurements of your body's basic functions, including temperature, blood pressure, heart rate, and oxygen levels.
White Blood Cells (WBC)	<ul style="list-style-type: none"> • Cells of the immune system that help fight infection.

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