

American Society of Clinical Oncology (ASCO) Guidelines



Guidelines Covered in the [Cancer Survivorship Care Guidelines for Peripheral Neuropathy, Fertility Preservation and Osteoporosis Management](#):

- Prevention and Management of Chemotherapy-Induced Peripheral Neuropathy in Survivors of Adult Cancers
- Management of Osteoporosis in Survivors of Adult Cancers with Nonmetastatic Disease
- Fertility Preservation in Patients with Cancer

Additional ASCO Guidelines Not Covered in Our Trainings

[Palliative Care in the Global Setting Resource-Stratified Guideline](#)

Current (2018)

- Previous palliative care research and guidelines focused on high-resource settings
- This guideline outlines models of palliative care delivery for use with patients and their caregivers, stratified by resource setting
- The recommendations discuss palliative care models, workforce requirements, knowledge, and skills
- Provision of counseling and spiritual care and the health care provider's role in pain management are also covered in this guideline



[Integration of Palliative Care into Standard Oncology Practice](#)

Current (2016)



- This guideline outlines referral to palliative care teams and components of palliative care services
- The recommendations discuss providing patients with advanced cancer palliative care services early in their oncology care, concurrent with treatment
- The guideline also highlights recommendations for the timing of palliative care services, importance of addressing patients' psychosocial needs, and the role of family caregivers

Patient-Clinician Communication

Current (2017)

- Conversations in oncology care are “akin to complex interventional procedures or operations in that they require careful planning and execution, using well-developed strategies to facilitate optimal communication”
- This guideline outlines strategies for health care clinicians to improve their communication skills, discuss goals of care and prognosis, and optimize the patient-clinician relationship
- The recommendations discuss facilitating family involvement, addressing barriers to communication, and meeting the needs of underserved populations. Strategies to discuss treatment options, clinical trials, end-of-life care, and costs of care are also covered in this guideline



Management of Chronic Pain in Survivors of Adult Cancers

Current (2016)



- It is estimated that 40% of cancer survivors experience chronic pain
- This guideline outlines recommendations for adults with a cancer diagnosis and pain lasting at least three months
- The recommendations discuss screening, comprehensive assessment, and treatment and care options
- The guideline also provides guidance for risk assessment, mitigation, and universal precautions with opioid use

Prevention and Monitoring of Cardiac Dysfunction in Survivors of Adult Cancers

Current (2016)

- Cardiac dysfunction is a well-documented complication of certain cancer treatments that may affect the treatment process, quality of life, and survival
- This guideline outlines preventive strategies to minimize risk before, during, and after cardiotoxic cancer therapy in patients at increased risk for cardiac dysfunction



Interventions to Address Sexual Problems in People with Cancer

Current (2017)



- People with cancer may develop sexual problems as a result of their cancer diagnosis or treatment
- This guideline outlines recommendations for health care providers to address sexual health and dysfunction in all patients and by sex
- The recommendations discuss the importance of health care providers initiating discussions about sexual problems. Strategies to address sexual problems, including devices, pharmacologic interventions, and psychosocial counseling are also covered in this guideline

Head and Neck Cancer Survivorship Care

Current (2017)

- In 2021, cancers of the oral cavity and pharynx made up 2.8% of all new cancer cases and 1.8% of all cancer deaths and had a 5-year survival of 66.9% (2011-2017)
- This guideline outlines recommendations to manage the short- and long-term effects of head and neck cancer (HNC) and its treatment
- The recommendations discuss surveillance for HNC recurrence, screening and early detection of second primary cancers



Prostate Cancer Survivorship Care Guideline Endorsement

Current (2015)



- Although an estimated 12.5% of men will be diagnosed with prostate cancer in their lifetime, the 5-year relative survival for prostate cancer is 97.5% (2011-2017)
- This guideline outlines recommendations for surveillance for prostate cancer recurrence and screening for second primary cancers
- The recommendations discuss physical and psychosocial effects of prostate cancer, including cardiovascular and metabolic effects, psychosocial distress, and sexual symptoms. Strategies for health promotion, care coordination, and practice implications are also covered

ACS/ASCO Breast Cancer Survivorship Care Guideline

Current (2015)

- In 2021, breast cancer cases among women made up 14.8% of all new cancer cases and 7.2% of all cancer deaths and had a 5-year relative survival exceeding 90%
- This guideline outlines recommendations for surveillance for breast cancer recurrence and screening for second primary cancers
- The recommendations also cover assessment and management of physical and psychosocial long-term and late effects of breast cancer and its treatment



Breast Cancer Follow-Up and Management After Primary Treatment

Review in Progress (2012)



- This guideline outlines follow-up and management for survivors of breast cancer who have completed primary therapy with curative intent
- The recommendations discuss timing and methods of surveillance, including the use of physical examination, regular history, and mammography

This guideline was last updated in 2012 and is currently under review by ASCO. The recommendations are subject to change with additional evidence. Consult the ASCO website for the most up-to-date information.

Follow-Up Care, Surveillance Protocol, and Secondary Prevention Measures for Survivors of Colorectal Cancer Endorsement

Review in Progress (2013)

- The 5-year relative survival for colorectal cancer is 64.7% (2011-2017)
- This guideline outlines follow-up, surveillance, and secondary prevention for survivors of stage II or stage III colorectal cancer
- The recommendations discuss evaluation, imaging, colonoscopy, and overuse and underuse of follow-up testing. The guideline also covers communication strategies and secondary prevention of colorectal cancer.



This guideline was last updated in 2013 and is currently under review by ASCO. The recommendations are subject to change with additional evidence. Consult the ASCO website for the most up-to-date information.

Screening, Assessment, and Management of Fatigue in Adult Survivors of Cancer Guideline Adaptation

Review in Progress (2014)



- Nearly 30% of survivors of cancer will experience persistent fatigue for years following treatment, with significant impacts on their quality of life
- This guideline outlines screening and comprehensive focused assessment for adult survivors of cancer who are either in clinical remission and off therapy or are disease free and in maintenance or adjuvant therapy
- Treatment strategies and care options are also discussed

This guideline was last updated in 2014 and is currently under review by ASCO. The recommendations are subject to change with additional evidence. Consult the ASCO website for the most up-to-date information.

Screening, Assessment, and Care of Anxiety and Depressive Symptoms in Adults with Cancer Guideline Adaptation

Review in Progress (2014)

- This guideline outlines depression and anxiety symptoms associated with cancer diagnosis and treatment
- The recommendations discuss periodic anxiety and depressive symptom screening and treatment pathways applicable to any phase of the cancer continuum and all cancer types, stages, and treatments. The guideline also covers resource identification, follow-up, and re-assessment



This guideline was last updated in 2014 and is currently under review by ASCO. The recommendations are subject to change with additional evidence. Consult the ASCO website for the most up-to-date information.

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