



Myeloma Canada
InfoGuide Series

Managing Myeloma in Rural and Remote Areas



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Table of contents

Managing myeloma in rural and remote areas: A resource guide	3
PART 1 Myeloma care in rural and remote areas of Canada	4
What's unique about managing myeloma in a rural/remote area	5
PART 2 Skills and strategies for managing myeloma in rural/remote areas	9
Advocating for yourself and others	10
Asking for a second opinion / specialist opinion	11
Keeping track of your health (and keeping records)	12
Taking care of your mental health	14
Planning for emergencies	17
Digital literacy	19
Finding information and resources	21
PART 3 Resources for rural/remote Canadians	24
Care and support resources for rural/remote Canadians affected by myeloma	25
Provincial resources	25
Territorial resources	31
Travel and accommodations resources	33

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Managing Myeloma in Rural and Remote Areas: A Resource Guide

Myeloma in rural and remote Canadians

The Canadian Cancer Society's 2022 report on cancer prevalence describes higher rates of obesity, smoking and chronic disease (e.g. diabetes, cardiovascular disease as "lifestyle factors" which can explain the higher cancer incidence in rural populations. Yet, there are other significant contributors to rural cancer rates such as social determinants of health (social economic environmental factors that influence your health), and the lack of adequate access to healthcare services which can help explain why rural Canadians are, in general, more likely to be chronically ill, develop cancer, and face difficulties accessing treatment.

Rural Canadians are also more likely to experience dangerous levels of exposure to cancer-causing chemicals like pesticides, many of which studies have shown may increase the risk of developing myeloma.

Canadians living in rural and remote areas have a higher risk of developing cancers, including myeloma, and often face worse outcomes due to limited access to healthcare resources.

Myeloma Canada has created "[Managing Myeloma in Rural and Remote Areas](#)" to help people living with myeloma and their circle of care find the right resources, skills and practices to help navigate the unique challenges of their disease, from the comfort of their home and community.

There are three parts to this document:

1. Myeloma and Care in Rural/Remote Canada
2. Skills to help manage myeloma in a rural/remote area
3. Resources to support you on your myeloma journey

We hope you find it useful!



PART 1

Myeloma care in rural & remote Canada

What's unique about managing myeloma in a rural/remote area?

It is important to note that there are significant differences between the resources and care available to people with myeloma and their caregivers, not only across the provinces and territories but also within various rural/remote areas. As a result, navigating cancer care in rural and remote regions across Canada encompasses a diverse range of experiences, many of which share common challenges and benefits.

BENEFITS

- 1. Lower Risk of Infection:** Rural and remote areas often experience lower population density, resulting in decreased exposure to infections. This can be especially beneficial for immunocompromised myeloma patients.
- 2. Comfort of Home:** One of the most significant advantages of living in a rural/remote area is the ability to remain in the comfort of one's home. Being in familiar physical and/or cultural surroundings can contribute to a sense of ease and well-being, factors that can positively impact overall cancer care experience.
- 3. Community/Cultural Support:** Rural communities often have a strong sense of solidarity. The support and encouragement from friends, neighbors, and community, can create a network of emotional and practical assistance for people with myeloma and their families.
- 4. Family Proximity:** Being in a rural or remote area often means staying closer to family. The emotional support provided by family members is invaluable during treatment and having them nearby can be a source of strength.

CHALLENGES

- 1. Distance to Services:** Longer trips and wait times to access healthcare— both in an emergency, and during regular care and treatment. This can delay patients receiving the care they need, and sometimes necessitate extensive travel to urban centers, causing logistical and emotional strain.
- 2. Isolation:** There are fewer people in rural-remote areas, which can make your support circle smaller, mean you must take on more responsibility for your care, and/or lead to feelings of isolation, especially if there are limited opportunities for interactions outside of the immediate community.
- 3. Resource Disparities:** Reliable access to resources (ex., high-speed internet access, testing/ screening capabilities, myeloma specialists, care coordinators, patient navigators, counsellors/ therapists) is often limited, impacting speed and accuracy of diagnosis and treatment planning.
- 4. Financial Strain:** Heightened financial strain due to travel and/or accommodation expenses for treatment, medical appointments, and more. Financial challenges add stress, and for some patients, may mean they are unable to access the best care/ treatment available.

Care and treatment in rural/remote Canada

There are three main locations where rural/remote patients will receive care: 1. At home 2. In their community and 3. Outside their community. Different kinds of care are often available (from different providers) at each of these locations. As there will likely be a number of healthcare providers and services supporting your care and the treatment of your myeloma across these locations, patients and caregivers may face difficulties with continuity of care, and/or feel overwhelmed by the amount of 'administrative' work needed to coordinate appointments with different specialists, for tests, treatments, etc.

Care in your home & community

Home care

- At-home / self-administered treatment and/or supportive care medications
- At-home activities contributing to your overall health & sense of wellbeing. i.e. exercise, cooking, meditation, engaging in personal hobbies.
- Your 'support circle'. This can include your caregiver, spouse, and/or any other help you may have around you. (Personal Support Workers, friends, other family members, neighbours)

Community health services

- Local outpatient community cancer clinic
- Local primary care physician or nurse practitioner.
- Local community health centre
- Community hospital
- Community paramedic/emergency medicine services

Care outside your community

Cancer centre

- Rural/remote patients will often need to travel to a major (urban) cancer centre for certain appointments, tests, and treatments. For example, to see your oncologist, hematologist, other specialists, or for specialized treatments like Autologous Stem Cell Transplantation (ASCT), Chimeric Antigen Receptor T-cell Therapy (CAR T), some bispecific antibody therapies, etc.

Your Care Team

Family Doctor / Primary Care Physician:

When you first became ill, the first person you probably saw was your family doctor. Your family doctor helped narrow down the possibilities of what might be wrong and provided referrals to specialists. Most family doctors see only a few, if any, myeloma patients in their practices.

Nurse Practitioner:

A nurse practitioner is a nurse who has undergone advanced training and has the authority, under specific circumstances, to diagnosis and treat patients. This can include prescribing certain medications. In some areas, for example, a primary care practice may be led by a nurse practitioner.

Hematologist:

Because myeloma is a cancer of the blood, you may be referred to a hematologist. A hematologist is a physician who studies, diagnoses and treats diseases and disorders of the blood. Some hematologists specialize in blood cancers, whereas others may specialize in other blood problems such as clotting disorders.

Traveling for care

Travel poses a significant challenge for myeloma patients in rural and remote communities, as care and treatment often require numerous journeys to urban cancer centers. Unfortunately, for some, travel may also be hindered by geographical constraints or environmental conditions, further complicating access to necessary treatment. The potential need to travel can also influence patient decisions regarding their course of treatment, especially if multiple follow-up visits are required.

Any cancer journey is daunting, but even more so for rural/remote patients facing potential extended periods away from their home, family, support systems, and the possibility of undergoing treatment alone. This not only entails the inconvenience and hardship of long-distance travel but can also result in feelings of isolation during treatment. The lack of support from family or community during this crucial time can significantly impact the quality of care, as there may be no one present to advocate for the patient's needs.

Most provinces and territories have acknowledged these difficulties and do provide special grants or services to individuals living in rural and remote areas to help them (and often an accompanying caregiver) with the cost of travel to and accommodation during treatment.

Inuit, First Nations, and Métis Communities

Inuit, First Nations, and Métis Canadians living in their homelands confront pronounced challenges in accessing care due in part to the substantial distances required for travelling to treatment.

The impact of traveling for care on, Inuit, First Nations, and Métis individuals is exacerbated by communication/ language barriers, concerns about cultural safety and the absence of cultural supports, such as prayer, song, or traditional foods. The intertwining factors of discrimination, racism, a lack of family, community, spiritual support and culturally unsafe or inappropriate care can impose a significant burden on individuals already grappling with myeloma; leading some to forgo or prematurely leave treatment.



Care across the continuum

Care coordination and cancer patient navigation

The numerous locations where care is received and professionals who provide it make rural/remote patients' myeloma journeys particularly complex. Care coordination is thus particularly necessary to ensure continuity of care, so the right information is conveyed to the appropriate healthcare professionals at the right time, and nothing gets lost in translation, or slips through the cracks.

You and/or your caregiver will often need to play an active role in coordinating your care, but coordinating treatment visits and follow-up appointments can be overwhelming, leaving many patients still unaware of existing services. This is where the assistance of a patient navigator can play an invaluable role.

Patient navigators can enhance continuity of care for individuals with myeloma, helping to ensure care is delivered in a logical, connected and timely manner so that patients' medical and psychosocial needs are met. Patient navigators can help coordinate appointments and testing, and are positioned to identify the need for, and coordinate access to, psychological or other supports during and after treatment. Patient navigators may be specifically for rural/remote patients, cancer patients, indigenous patients, or be generally available to anyone receiving treatment within a particular hospital, health network, or province. As most rural Canadians will be expected to travel, patient navigators will help ensure you have proper access to cultural and spiritual support. Make sure you bring any comforting object with you! Refer to the *Seeking professional support* section.

Indigenous patient navigation programs

The health system in Canada has historically failed to provide First Nations, Métis and Inuit access to quality health care, and failed to deliver that care in a culturally appropriate way. As noted above, cultural safety, and access to cultural supports throughout your care and treatment process can make a vast difference to your overall wellbeing along your myeloma journey. Indigenous patient navigator programs are intended to help facilitate access to culturally appropriate care, particularly when traveling to urban hospitals for treatment.

General Practitioners in Oncology (GPO), new allies for rural/remote Canadians affected by myeloma

As per the Canadian Association of General Practitioners in Oncology (CAGPO), GPOs are physicians that work in regional cancer centres and community clinics providing both inpatient and outpatient care to patients receiving treatment with both curative and palliative intent. They oversee the administration of treatments such as chemotherapy, immunotherapy or targeted therapies; manage physical and psychosocial effects resulting from cancer treatments; provide follow-up visits after active treatment, address survivorship issues and promote overall well-being; play a vital role in palliative care and contribute to medical education.

These dedicated professionals with focused practices in oncology play a crucial role throughout the cancer care trajectory across various communities and contribute significantly to improving patients' lives. In rural and remote areas, they are often the ones who see the patients the most and who can monitor your health through treatment and beyond. Nevertheless, responsibility for the patient's treatment remains with the oncologist.

The provinces of Ontario, Manitoba, and British Columbia have been the chief pioneers in integrating GPOs into oncology teams, helping to define the role of family physicians within cancer care. Notably, the Family Practice Oncology Network of the BC Cancer Provincial Health Authority started a GPO Education Program in 2004. Since then, many patients in BC and Yukon also have a GPO as part of their healthcare team.

More information about Family Physicians and Nurse Practitioners who have completed the GPO Education Program is available by Cancer Centre/Community using this [link](#).

PART 2

Skills and strategies for managing myeloma in rural/remote areas

Advocating for yourself and others

What does ‘advocating’ mean?

1. Advocating for yourself involves listening to your body, making your own choices, engaging with your treatment process, and speaking up for yourself.

It means keeping your needs, your values, and your autonomy centre-stage, throughout your myeloma journey. It does not mean that you alone are responsible for your myeloma care. In fact, advocating for yourself frequently involves seeking the support you need from others.

2. Advocating for others is the act of being engaged with and supporting people with myeloma by working to help them through their myeloma journey.

Advocating for others is also sometimes referred to as engaged advocacy. To advocate for others is NOT to make health-related decisions for a person with myeloma unless you are legally designated to do so. Engaged advocates can be the friends, family members, caregivers, support group or patient organizations of those living with myeloma. The term applies to anyone who shares a unified goal of working to elevate the needs, and wishes, of people with myeloma. As someone with myeloma, you can also advocate for others. You are one of the few people who have truly ‘been there’. You have the experience and wisdom that can help others navigate their myeloma journey, regardless of stage, and learn to advocate for themselves.

ADVOCACY IS ALL ABOUT STAYING ENGAGED WITH YOUR HEALTH

Advocacy in practice

Self-advocacy and advocating for someone else can take many forms— asking questions during medical appointments, monitoring health and treatments at home are only a few examples. Advocacy is the principle behind each of the skills and strategies detailed below that can help support you in navigating myeloma care and treatment from a rural or remote area. An important part of self-advocacy is being open and honest when describing your symptoms, side effects, pain and general well-being, to ensure your healthcare team has the most accurate information to work with. Isolation, and limited opportunities to see your healthcare professionals can lead some to enter medical appointments with a sense of fear, and/or feel a lack of trust in their doctors. Alternatively, some may worry about offending their doctor by questioning them, or taking up too much of their time. Healthcare professionals are there to help, and you can surely make a difference in your myeloma journey by coming to your appointments prepared with questions, and engaging openly and honestly with them regarding your care and treatment.

For more information, download Myeloma Canada’s Advocacy Handbook [here](#).

Asking for a second opinion / specialist opinion

Why?

Oncologists in rural areas are unlikely to be specialists in the treatment of myeloma. Myeloma is a very complex cancer that is best assessed and treated under the guidance of a specialist. As well, oncologists (and doctors often cycle through rural areas and having a specialist on your team can help ensure continuity of care, especially if your local oncologist or family doctor changes.

How?

1. The best way to seek a second opinion is by making a request to your current specialist.

If you feel uncomfortable, it is important to keep in mind that seeking a second opinion does not imply a lack of confidence in your current doctor's capabilities, which is also something you can convey to them. You could follow your request with something like:

"I'm very grateful for the care I am receiving from you, and I have complete confidence in your skills. What I really want from a second opinion is some peace of mind. In all likelihood, they will tell me the same things you have, which would help me feel even more confident in deciding what course of treatment to pursue. These are such important decisions; I need to be sure I cover all my bases".

2. It is your right as a patient to seek out the opinion of a second medical professional.

A second opinion may provide a different perspective on your diagnosis and treatment options, and/or reassurance that you are making the right decisions going forward. The ever-changing nature of myeloma means that a second opinion can be especially valuable for people living with the disease. This is even more so for patients living in remote locations and/or not receiving care at a major cancer centre, where many doctors may have seen little to no myeloma cases throughout their career.

3. There are alternatives in case of refusal.

Most doctors are happy to direct you to a second opinion, but in some rare cases, they may refuse. At this point, depending on your comfort level, you can ask again, reminding them a second opinion is your right. You can also request a referral for a second specialist from your family physician. Alternatively, you may also wish to consult your family doctor on the best way to approach asking for a second opinion. Your family doctor may be able to help you to advocate for yourself, or advocate on your behalf.

Keeping track of your health (and keeping records)

Why?

The more information you have about your health, the better. Documenting things like your healthcare appointments, test results, side effects or any changes in your mental and physical health, can provide doctors with a more complete picture, making it easier to identify and address your issues or symptoms.

Rural and remote patients tend to make more frequent use of telemedicine services for which, keeping track of your own health between appointments is even more important. Especially for myeloma, monitoring is key. With telemedicine, your healthcare team can remotely keep an eye on your progress. If you're tracking things like blood pressure, weight, or symptoms, this information can be easily accessed and shared through telemedicine.

How?

1. Keep a dedicated 'doctor diary', or a binder with all your information.

Jot everything down in this notebook/binder, or on your phone so all your records are in one place.

2. Record your appointments.

You can do this in a number of ways and with different tools (paper & pen, voice recorders, typing notes on your phone). Keep your notebook/recording device on hand to take notes during appointments, to record any questions you may have, and to help you remember the questions you wanted to ask. Record the dates of each entry. This will help you and your healthcare team track changes to your health over time.

Tools

I. MYELOMA VIRTUAL CARE GUIDE AND APPOINTMENT PLANNER

In the last few years, 'virtual care' – also referred to as 'telemedicine' – alternative to in-person healthcare appointments have become very common. Virtual care allows you to connect with healthcare providers without an in-office appointment, through alternative means such as a video chat or phone call. Virtual care can be a great tool, especially for rural/remote Canadians with myeloma, as it offers remote access to a second opinion or a myeloma specialist, minimizes the risk of exposure to a virus or infection, and cuts down on travel time. That being said, virtual care won't be the best choice in every circumstance. Myeloma Canada's Virtual Appointment Guide provides you with the information you need to decide if a virtual care appointment is right for you and how to get the most out of these appointments. It is accompanied by a printable and fillable Virtual Appointment Planner. Topics covered include what to do before your appointment, on appointment day, during your appointment, after your appointment, and between appointments. (Tip: keep printouts in one place, i.e. your binder, notebook, in an app, or folder on your phone/computer).

Access the Virtual Appointment Planner [here](#) and the Virtual Appointment Guide [here](#).

II. SIDE EFFECT & MEDICATION TRACKER

A tool crafted by a myeloma patient provides invaluable assistance in managing your care information. This spreadsheet template provides space for you to fill in information regarding your current/upcoming treatments, monitor your mood, energy levels and keep track of any side effects/new symptoms and their severity. This resource can also be effective for swiftly conveying crucial details to healthcare professionals during emergencies. If you opt to print this tool, consider placing it in a conspicuous, visible location for easy access by emergency services (see upcoming Planning for Emergencies section). Additionally, sharing it with your family, or caregiver if you have one, ensures that the pertinent information is readily available in critical situations.

Interested in the Side Effect & Medication Tracker? Please email us at contact@myeloma.ca.

Taking care of your mental health

Why?

Building connections within and beyond your community is invaluable for rural remote myeloma patients. Establishing a supportive network within your community provides a crucial emotional anchor. Similarly, knowing you have someone nearby to call feels reassuring. Local connections can offer understanding, empathy, and practical assistance, fostering a sense of belonging during the challenging journey of managing myeloma. This can also help combat the feelings of isolation that rural-remote patients, particularly those living alone, often face.

Community is particularly important for individuals who are traveling outside their cultural comfort zone for treatment, like many First Nations, Metis and Inuit Canadians. Receiving treatment from unfamiliar doctors and institutions away from your community and outside your culture can make going through myeloma treatment all the more difficult.

How?

Online communities and forums can similarly become lifelines for rural myeloma patients. Virtual connections enable the exchange of information, emotional support, and coping strategies, overcoming geographical barriers. Establishing and nurturing these varied connections not only enriches the patient's understanding of myeloma but also creates a robust support system that enhances their overall well-being.

Moreover, reaching out beyond the immediate community is often essential, particularly to connect with others impacted by myeloma who can really understand what you are going through.



You can build these connections by joining and participating in: an *online community* designed especially for people with myeloma, a *regional or virtual myeloma support group*, offers access to a wealth of information, resources, and a sense of shared experiences. Alternatively, or in more time-sensitive situations you can connect with someone else living with myeloma through one of many peer support programs. These external connections can also help keep you up to date with newly approved treatments, clinical trials, supportive care practices and more.

Seeking professional support

- **Psychiatry:** Medical practitioners who provide specialty care to patients and are experts in the assessment of psychiatric and emotional disorders. (Can prescribe medications).
- **Psychology:** Scientist-practitioners who obtain competency in one or more of clinical psychology, health psychology, rehabilitation psychology, and neuropsychology. They are experts in the assessment, diagnosis and treatment of mental and emotional disorders and syndromes.
- **Social work:** Social workers deliver a wide range of psychosocial oncology support services to patients and families, including conducting psychosocial assessments, intervening with distress, supportive interventions for family adjustments, and providing therapy or education to patients with concerns related to cancer treatments, such as cognitive changes, fatigue, sexual health, insomnia, caregiver distress and other presenting psychosocial problems.
- **Spiritual care:** Practitioners that play a critical role supporting the spiritual health, emotional needs and well-being of patients and their families. Note that many rural communities have strong church communities. As well, care facilities will often have a dedicated space and individuals available to offer support, prayer, and spiritual counselling for people with or without religious or spiritual affiliation.

Tools

I. MYELOMA CANADA SUPPORT GROUPS AND PEER SUPPORT PROGRAM

Myeloma Canada has a growing network of support groups across the country and six virtual support groups on Facebook that you can join, no matter where you live, and a Myeloma Peer Support Program, run in collaboration with Wellspring that can be accessed by phone if you don't have a reliable internet connection. Joining a support group is a wonderful way to advocate for yourself and others, as someone living with myeloma or as a caregiver. A support group is a safe place where you can meet others and be part of a myeloma community, where you can share your experiences, fears, and questions with people who understand and have been, or are going through the same things you are. The support of other people living with myeloma can at once empower you to take charge of your own myeloma journey, give you a better understanding of what you might face along the way, and provide you with a source of comfort and empathy from your peers. [Find a local support group](#) near you OR join a virtual support group:

- [Virtual Support Group for Caregivers](#)
- [Virtual Support Group for Young Patients and Caregivers](#)
- [Virtual Support Group for Patients and Caregivers of All Ages](#)
- [Virtual Support Group for Francophones](#)
- [Virtual Support Group Myeloma & AL Amyloidosis Patients](#)
- [Virtual Support Group for Canadian veterans/ex-military and caregivers impacted by myeloma](#)
- [IMF Living Solo & Strong with Myeloma Support Group](#)

II. MYELOMA CANADA ONLINE COMMUNITY (MC LOUNGE)

MC Lounge is a secure online community designed specifically for myeloma for patients and caregivers. It is a dedicated space to connect, share, and support one another across Canada. Connecting with others will never have been so easy for myeloma patients in rural and remote communities!

Join the community [here](#).

III. MENTAL WELL-BEING AND RELAPSE: A RESOURCE GUIDE FOR PEOPLE LIVING WITH MYELOMA

Experiencing a relapse in your multiple myeloma can be very stressful, and while you may have lived with multiple myeloma for some time, relapse and disease progression can be a devastating emotional blow. You may experience feelings of distress or fear, mixed with hope, as you navigate this stage of the disease, while also exploring options for new treatments and planning for the future.

Myeloma Canada has created “Mental Well-being and Relapse: A resource guide for people living with myeloma” for you and your loved ones as a support to your mental health and to help you determine how wellness strategies fit into your overall cancer treatment plan.

Access the Mental Well-Being and Relapse guide [here](#).



Planning for emergencies

Why?

Preparing for possible emergencies is a crucial step, especially in rural/remote areas. It is important particularly to ensure a timely and appropriate response from emergency services and healthcare professionals: In emergencies, time is of the essence. Having a plan in place so that you have access to what you need, and anyone helping you can easily locate the most important information about your health, ensures a swift response from healthcare providers, emergency services, and even your support network.

Planning for a medical emergency

This could be related or unrelated to myeloma, i.e. a side effect from treatment, a fall, etc., and can happen anywhere. In the case of a medical emergency, you will either be **requiring emergency services** or **seeking emergency care**, and it is critical that you plan a way for the most important information about your health to be conveyed to, or located by emergency services, *with as little participation from you as possible*.

How?

1. First talk to your healthcare team.

Ask them, in case of an emergency, what is the most important information for other medical professionals to know? What (if any) phone number can you provide a healthcare professional to contact your doctor in case of an emergency?

2. Gather the important information

Contact Information: Keep a list of emergency contacts readily available. Include your primary healthcare provider, oncologist, local emergency services, and key contacts like family or friends who can assist in case of an emergency.

Medical Information: Have a summary of your medical history, current medications, and any allergies. This information is crucial for healthcare providers who may not be familiar with your case.

Current Treatment Plan Overview: Summarize your current treatment plan. Include information about ongoing medications, chemotherapy schedules, and any specific instructions from your healthcare team.

Insurance Details: Keep a copy of your health card/insurance card and any relevant documents. It ensures a smoother process if you need medical assistance during an emergency.

Transportation Plan: Make sure you know if there is someone else around you who can get you to a hospital. Regardless of your usual mode of transport, figure out how you would get to a hospital or your doctor's office in case of an emergency (at home, and if you're facing an emergency out of the house). Discuss this with a trusted neighbour or local transport services in advance so if an emergency arises you know who to call.

3. Make a plan ... or three!

Key components of a plan

The right information

Identify the top three (or more if needed) considerations about your health, that you think are most crucial for emergency services to know before they begin to address an emergency. For example, if you have balance and/or frailty issues, these are key considerations that first responders must take into account when deciding how to proceed with helping you.

If you live with someone else, or have caregiver(s) frequently in your home, be sure to communicate your plan with them, and ensure they also know the top considerations. Similarly, if someone else is around when the emergency occurs immediately share with them the top considerations, and where/how the first responders can access your medical information.

In the right place

In your home, make sure all the key information is in one, easily accessible place, and there is appropriate signage to direct first responders to the information (see Vial/File of Life below)

In case of emergencies occurring outside your home, you will want to find a way to keep the same information on your person at all times, for example in your wallet, purse, etc.

Tools

VIAL OF LIFE / FILE OF LIFE

The Vial of Life is a system designed to speak for you when you can't speak for yourself.

Step 1: Record the key information about your health and medications on a medical information form.

Step 2: Place on Refrigerator, and Securely tape the form at a visible height on the front of your refrigerator. (Recommended to store in a resealable plastic bag).

Step 3: Stick on the decals on, one decal on your refrigerator and a second decal on your front door at eye level.

The “vial” or file will contain a paper with all your important medical information to assist emergency personnel in ensuring you receive the proper care and treatment. There are a number of different templates online you can use to store your information.

You can also use the Side Effect & Medication Tracker mentioned above or adapt any other health tracking systems you currently use.

Your local public health/emergency services may have their own program providing free vial of life kits/ window/ door decals, and custom medical information sheet templates. Search your municipality and ‘vial of life’ to confirm if there is such a program in your area.

- [Vial of Life](#)
- [File of Life](#)

TIP

Always call 911 from a landline if possible so that emergency services can easily locate your address without your help in case you lose consciousness or cannot speak.

Digital literacy

Why?

Digital literacy means having the confidence, skills, and knowledge, to use and adapt to changes in technology. As someone with myeloma, digital literacy can help you:

- Stay in touch with your support circle, by video chat, text message, email etc., and/or make new connections using social media.
- Participate actively in your care and manage your myeloma with more autonomy. (e.x. by viewing your test results online, attending more frequent virtual appointments)
- Stay informed about new innovations in myeloma treatment and changes to the healthcare system that could impact you.
- Make daily activities easier and improve your quality of life. For example, booking appointments, ordering medication refills, groceries, or downloading library books from home,

Digital Health (Virtual care, telehealth, telemedicine)

- Digital health services can be especially great tools for rural/remote Canadians living or caring for someone with myeloma. Health applications, and platforms through which care providers share your medical information with you directly Telehealth/telemedicine offers remote access to second opinions, myeloma specialists, psychosocial supports, minimizes the risk of exposure to a virus or infection, and without the time and expense of travel. Having said that, virtual care is of course not the best choice for every circumstance.

How?

In order to develop a Digital Literacy Program for the myeloma community, Myeloma Canada has partnered with Connected Canadians, also a non-profit organization, whose mandate is to foster digital literacy skills amongst Canadian adults. The below InfoSheets are meant to enable people to be empowered to use technology safely and actively, to engage with loved ones and enhance quality of life.

Tools

I. GETTING HELP WITH TECHNOLOGY

Understanding all the different digital tools, whether it is a computer, tablet or phone can be overwhelming. Technology keeps changing and sometimes we can benefit from a little help to understand things clearly. This Infosheet will help you know where/who to ask when faced with a technological question or problem.

Download the Infosheet [here](#).

II. INTRODUCTION TO ZOOM

Zoom is a video, audio and chat service software used for teleconferencing, and can be used on desktops, laptops, tablets and smartphones. It is useful for work meetings, conferences, distance education and social events. Using Zoom is easy and convenient because it enables you to join meetings without having to create an account. The software is downloaded from the web and you can choose a free or paid option. This Infosheet will help you understand the basics of using zoom.

Download the Infosheet [here](#).

III. PHISHING SCAMS

Phishing is when someone attempts to extract private information from you online. Personal information may include passwords, credit card or bank account information, drivers license number, etc. Usually, the goal is to steal your identity or money. That's why it's important not to click on any link that seems suspicious and to never download a program attached to the email or message you received. This Infosheet will help you learn to recognize and avoid phishing scams.

Download the Infosheet [here](#).

IV. OTHER DIGITAL LITERACY PROGRAMS / ORGANIZATIONS

- *Connected Canadians* – [here](#)
- *Let's Connect Digital Literacy* by HelpAge Canada - [here](#)
- *ABC Connect for Learning* by ABC Life Literacy Canada - [here](#)

What is 'Digital Health'?

1. Digital health:

An umbrella term which encompasses 'eHealth' as well as areas such as the use of advanced computing sciences in healthcare.

2. Virtual care:

Any interaction between patients and/or members of their 'circle of care' that occurs remotely, using any forms of communication or information technology (ICT: radio, TV, cell phones, computers), with the aim of facilitating or maximizing the quality and effectiveness of patient care

3. Telehealth:

The use of digital technologies to deliver *medical care, health education and public health services* by connecting multiple users in separate locations.

4. Telemedicine:

A practice of medicine involving the use of ICT by a health care provider to administer health care to patients.

- *Canadian Institutes for Health Information, 2023.*



Finding information and resources

Why?

Amongst the whirlwind of emotions and questions accompanying a myeloma diagnosis, it is quite common to feel fear and uncertainty. These feelings are often amplified by having very little knowledge of myeloma.

Where our health is concerned, it is always safer to face an enemy you know: listening to your body, understanding your diagnosis, your various treatment options, and asking questions are some of the best ways you can prepare yourself to confidently navigate your myeloma journey.

The better informed you are, the more uncertainties you can minimize, and by actively seeking the information you need, the more you will feel in charge of navigating your personal journey.

How?

Professionals to ask for health-related information:

- Your oncologist and any members of your treatment team
- Your family doctor, nurse practitioner or other specialists
- Other healthcare professionals (e.g. your pharmacist, physiotherapist etc..)
- Representatives of Myeloma Canada and other patient organizations or health charities

Places to look for health-related information and local resources:

- Your local public library
- Community health service centres and public health professionals such as nurses or dieticians who are familiar with myeloma or cancer in general
- The internet. For many, the internet is the most convenient place to find health-related information

Not Sure You Can Trust this Information?

It is important to note that it can sometimes be difficult to distinguish verified fact from false information, or from someone's opinion online. When you seek out information for yourself, it is important to determine if the information is from an up-to-date, credible source, is independent from financial conflicts of interest, and unbiased.

Asking the following list of questions can help you assess the source of your information to decide if it is trustworthy:

1. *What website did you find the information on? What is the purpose of the website? • Is it trying to sell you a product? • Is it a social media platform? • Who owns the website? • Are there any other organizations who fund the page or website? • Do they require you to input personal information before allowing you to read their content? • What kind of companies advertise on the site? • What other companies or organizations does the organization partner with?*
2. *How current is the information? When was it published and/or last updated? • Does the site offer the titles of, or links to, other resources so you can read more about the subject? (and verify your information) • Is it easy to check their references? • If the site presents information which is not the author or organization's original work, does the site provide references for the source of the information? (You can evaluate this reference material as well to provide an extra layer of verification).*
3. *Are the author's name, qualifications, and credentials presented? • Who is the author, what else have they written, what is their educational background, what kinds of organizations are they associated with? When viewing US based websites, keep in mind that the healthcare system in the US is substantially different from the healthcare system in Canada, and some of the information is not relevant to Canadians.*

Important to remember

Just as there are many ways to self-advocate, there is no universal way to approach information gathering. If delving into the internet for information is uncomfortable, or not possible for you, advocating for yourself through seeking information may instead involve building strong relationships with your treatment team, trusting them to give you the information you need and answer your questions. It can also look like asking for a second opinion, or a specialist's opinion, both of which can help you gather more information about your diagnosis and treatment options. The goal is to help you make a confident decision.

Tools

I. MYELOMA CANADA EDUCATIONAL RESOURCES

Lack of resources is a huge issue to rural Canadians and many people are disheartened when trying to access support because it feels too hard or overwhelming to either spend a lot of time online going through all the information or trying to get information over the phone. To help palliate this situation, Myeloma Canada has put in place a Resources Sheet offering an array of different publications, online educational materials, programs, online helpful tools, different support options and the educational and community events, on various topics that impact Canadians living with myeloma.

Access the Resources Sheet [here](#).

Printed copies of all educational materials can also be ordered by phone and mailed to you (shipping is free!). To place an order you can email to contact@myeloma.ca, call (514) 421-2242 or toll-free: 1-888-798-5771, or even use our online order form [here](#).

In addition, Myeloma Canada's YouTube channel has an extensive library of informative [videos](#) to help you understand the complexities of living with the disease, what you can expect from various treatment options, and commonly asked questions, in addition to inspirational videos from others living with myeloma.

II. MYELOMA DRUG ACCESS NAVIGATOR

Over the last 15 years, treatment options for people living with myeloma have increased significantly with the addition of novel, targeted drugs. However, the availability of these treatments and drug coverage varies across Canada. Trying to find which drugs are available and covered in your province and territory can be confusing, overwhelming, and even discouraging for some. To simplify the process of uncovering provincial and territorial drug coverage information, Myeloma Canada has designed the Myeloma Drug Access Navigator. This online tool allows you to quickly see the drugs that are available and covered in each province and territory, so you can remain aware of the options available to you and stay actively involved in your treatment journey.

Access the Myeloma Drug Access Navigator tool [here](#).

III. MULTIPLE MYELOMA CLINICAL TRIAL FINDER

Staying aware of your options is key to self-advocacy. Based on the specifics of your myeloma diagnosis, a clinical trial may be an option to consider for your treatment. Clinical trials may provide you with access to drugs or combinations of treatments that are not yet approved by Health Canada and are otherwise unavailable to patients, or that have been approved by Health Canada but are not yet covered by provincial insurance plans. Though there certainly are clinical trials for people with myeloma at all different phases of the disease, each trial will have its own specific requirements for participation. Sifting through all the prerequisites and requirements for each trial can be a laborious process, which is why Myeloma Canada created the Personal Clinical Trial Finder tool. The Personal Clinical Trial Finder presents only those clinical trials open to people living with myeloma. It allows you to filter results by location, study phase, and myeloma stage. You can also sign up to receive alerts for when new clinical trials matching your search criteria are added!

Access the Clinical Trial Finder [here](#).

IV. FINANCIAL IMPLICATIONS GUIDE

If you or your loved one has been diagnosed with myeloma, you know how challenging it can be to find information that can help you manage your finances. Rural and remote patients may face an increased financial burden, often due to the additional costs of travel and accommodation. *Financial Implications of Living with Myeloma* is intended to help you better understand your financial situation and help you optimize your finances to get the most out of what's available to you. Given the nature of how quickly information related to the topics covered in this guide change, we've created a web-based document only. You may of course print out any sections you'd like.

Access the Financial Implications of Living with Myeloma guide [here](#).

PART 3

Resources for rural/remote Canadians

Care and support resources for rural and remote Canadians with myeloma

PROVINCIAL RESOURCES

The following is a list of oncology navigation and support services provided by each province and includes the full list of the main cancer centres. Please note that this is not an exhaustive list of resources, and your closest cancer centre may not offer the breadth of supports listed. Since each province manages their healthcare system differently, each have their own unique services which offer varying levels and kinds of support. Certain roles, like the patient navigator are not available in all provinces, click on the program names for more information.

Alberta

Provincial Cancer Care Organization

[Alberta Health Services \(AHS\)](#), Alberta

11 Community Cancer Centres

Click [here](#) to access the full list of community cancer centres in Alberta

3 Major Cancer Centres

- [Tom Baker Cancer Centre](#), Calgary, AB
- [Holy Cross Centre](#), Calgary, AB
- [Cross Cancer Institute](#), Edmonton, AB

4 Regional Cancer Centres

- [Grand Prairie Cancer Centre](#), Grand Prairie, AB
- [Jack Ady Cancer Centre](#), Lethbridge, AB
- [Margery E. Yuill Cancer Centre](#), Medicine Hat, AB
- [Central Alberta Cancer Centre](#), Red Deer, AB

Provincial Patient Navigation Program

2 Indigenous Patient Navigators

- Edmonton: 780-432-8747
- Calgary: 403-476-2763

15 Rural Patient Navigators locations

- Barrhead Community Cancer Centre, Barrhead, AB • 780-674-2221 Ext.2036
- Bonnyville Community Cancer Centre, Bonnyville, AB • 780-826-3311 Ext. 3162
- Bow Valley Community Cancer Centre, Canmore, AB • 403-493-4867
- Camrose Community Cancer Centre, Camrose, AB • 780-679-2837
- Central Alberta Cancer Centre, Red Deer, AB • 403-343-4526
- Drayton Valley Community Cancer Centre, Drayton Valley, AB • 780-621-8087
- Drumheller Community Cancer Centre, Drumheller, AB • 403-820-6011
- Fort McMurray Community Cancer Centre, Fort McMurray, AB • 780-788-1751
- Grande Prairie Cancer Centre, Grande Prairie, AB • 780-538-7588
- High River Community Cancer Centre, High River, AB • 403-652-0131
- Hinton Community Cancer Centre, Hinton, AB • 780-817-5009
- Jack Ady Cancer Centre, Lethbridge, AB • 403-388-6800
- Lloydminster Community Cancer Centre, Lloydminster, AB • 306-820-6144
- Margery E. Yuill Cancer Centre, Medicine Hat, AB • 403-502-8648 Ext.1022
- Peace River Community Cancer Centre. Please contact Grande Prairie Cancer Centre

British Columbia

Provincial Cancer Care Organization

BC Cancer, British Columbia

[BC Cancer - Emotional Support](#)

[BC Cancer - Cancer Care Support Resources](#)

6 Cancer Centres

- BC Cancer - Abbotsford, Abbotsford, BC
- BC Cancer - Kelowna (Sindi Ahluwalia Hawkins Centre), Kelowna, BC
- BC Cancer - Prince George (Centre for the North), Prince George, BC
- BC Cancer - Surrey, Surrey, BC
- BC Cancer - Vancouver, Vancouver, BC
- BC Cancer - Victoria, Victoria, BC

Provincial Patient Navigation Program

6 Indigenous Patient Navigators

- BC Cancer – Abbotsford • 604-851-4733 ext. 645225 • Cell: 604-845-1750
- BC Cancer – Kelowna • 250-718-4234 • 250-826-4360
- BC Cancer - Prince George • 250-640-2360
- BC Cancer - Surrey • 604-992-4298
- BC Cancer - Vancouver • 604-612-5489
- BC Cancer - Victoria • 250-889-5145

For more information and resources for indigenous patients, click [here](#).

General Practitioners in Oncology Program

More information about Family Physicians and Nurse Practitioners in British Columbia who have completed the GPO Education Program is available by Cancer Centre/Community using this [link](#).

Manitoba

Provincial Cancer Care Organization

[CancerCare Manitoba \(CCMB\)](#), Manitoba

[CCMB Support Programs and Groups](#)

Community Cancer Programs Network (CCPN) for patients who live outside of Winnipeg.

Click [here](#) for a full list of CCPN regional and community cancer programs.

Click [here](#) to access CCPN's Information for the Rural Patient Brochure.

Provincial Patient Navigation Program

Indigenous Patient Navigation Services

Follow the [link](#) to access a comprehensive list of patient navigation supports for indigenous Manitobans.

5 Cancer Patient Navigators

- Interlake Eastern • Toll free: 1-855-557-2273 or fax 1-204-785-9242
- Northern • Toll free: 1-855-740-9322 or fax 1-204-677-5387
- Prairie Mountain • Toll free: 1-855-346-3710 or fax 1-204-578-2833
- Southern • Toll free: 1-855-623-1533 or fax 1-204-331-8899
- Winnipeg • Toll free: 1-855-837-5400 or fax 1-204-235-0690

New Brunswick

Provincial Cancer Care Organization

New Brunswick Cancer Network (NBCN), New Brunswick
New Brunswick Support Centres

2 Cancer Centres (corresponding with New Brunswick's two Health Networks)

- [Vitalité Health Network](#), Dr. Léon-Richard Oncology Centre, Moncton, NB
- [Horizon Health Network](#), Saint John Regional Hospital, Saint John, NB

Provincial Patient Navigation Program

Cancer Patient Navigators

Visit the [website](#) for more information.

Indigenous Patient Services

[Cultural support for indigenous patients](#)

2 Indigenous Patient Navigators

- Shayne Tatton
Based out of Dr. Everett Chalmers Regional Hospital (DECRH) in Fredericton, and supports Indigenous clients' needs at Horizon's Oromocto Public Hospital, Upper River Valley Hospital in Waterville, and Hotel-Dieu of St. Joseph in Perth-Andover.
- Wanda Ward
Based out of Horizon's Miramichi Regional Hospital, Wanda supports Indigenous clients' needs in the Miramichi area.

Newfoundland and Labrador

Provincial Cancer Care Organization

[Eastern Health Provincial Cancer Care Program](#)
[Newfoundland & Labrador Support Centres](#)

1 Major Cancer Centre

- [Dr. H Bliss Murphy Cancer Centre](#), St. John's, NL

Provincial Patient Navigation Program

3 Indigenous Patient Navigators

Located on the main floor of the Health Sciences Centre, Room 2764 (across from the Concord Parking booth).
For more information, click [here](#).

- Ashley Dicker • 709-777-2199 • (c) 709-725-6546 • ashley@firstlightnl.ca / ashley.dicker@easternhealth.ca
- Solomon Semigak • 709-777-2110 • (c) 709-725-6547 • solomon@firstlightnl.ca / solomon.semigak@easternhealth.ca
- Mary Angela Rich • 709-777-8462 • (c) 709-685-5934 • maryangela@firstlightnl.ca / mary.rich@easternhealth.ca

Nova Scotia

Provincial Cancer Care Organization

Nova Scotia Health Authority (NSHA) Cancer Care Program, Nova Scotia
Patient and Family Comfort Rooms
Psychosocial Oncology
Emotional and Practical Support
Support Groups

2 Cancer Centres

- [QEII Cancer Centre](#), Halifax, NS
- [Cape Breton Cancer Centre](#), Sydney, NS

Provincial Patient Navigation Program

8 Cancer Patient Navigators

You can contact a Cancer Patient Navigator by calling toll free 1-866-524-1234 or one of the following local contact numbers.

- Chantal Boudreau, Lunenburg and Queen's Counties • 902-541-0044 • Fax: 902-527-5821
- Dianna Hutt, Annapolis and Kings Counties • 902-690-3700 • Fax: 902-678-0376
- Darolyn Walker, Yarmouth and Shelburne Counties • 902-749-1523 • Fax: 902-749-5450
- Kathleen Clark, Colchester County • 902-898-2376 • Fax: 902-896-5800
- Susan Lawrence, Cumberland Regional Hospital • 902-667-6424 • Fax: 902-667-5684
- Alice Fortune, Pictou County • 902-752-7600 ext 4922 • Fax: 902-752-7920
- Heather Brander, Antigonish, Guysborough, Richmond Counties • 902-867-4500 ext. 4707
Fax: 902-867-4242
- Patricia Burke, Sydney, Victoria and Inverness County • 902-567-6122 • Fax: 902-567-7911

Ontario

Provincial Cancer Care Organization

[Cancer Care Ontario \(CCO\)](#), Ontario
[Psychosocial Oncology Support Program](#)

14 Regional Cancer Centres

- [Kingston Health Sciences Centre](#), Kingston, ON
- [Carlo Fidani Regional Cancer Centre](#), Mississauga, ON
- [Grand River Cancer Centre](#), Kitchener, ON
- [Juravinski Cancer Centre](#), Hamilton, ON
- [London Regional Cancer Program](#), London, ON
- [Northeast Cancer Centre](#), Sudbury, ON
[Supportive Care Program](#)
- [Princess Margaret Cancer Centre](#), Toronto, ON
- [Regional Cancer Care Northwest](#), Thunder Bay, ON
[Patient and Family Handbook](#)
[CARE Grant Projects](#)
- [R.S. McLaughlin Durham Regional Cancer Centre](#) (Lakeridge Health), Oshawa, ON
- [Simcoe Muskoka Regional Cancer Centre](#) (Royal Victoria Regional Health Centre), Barrie, ON
[Patient and Family Support and Resources](#)
- [Stronach Regional Cancer Centre](#) at Southlake, Newmarket, ON
[Patient education booklet](#)
- [Sunnybrook Odette Cancer Centre](#), Toronto, ON
[Patient & Family Support Program](#)
- [The Ottawa Hospital Cancer Centre](#), Ottawa, ON
[Programs and Clinics](#)
[Patient & Family Support Program](#)
- [Windsor Regional Cancer Centre](#), Windsor, ON
[Patients, Families, and Caregivers Program](#)

Provincial Patient Navigation Program

10 Indigenous Patient Navigators

- Jeannie Simon, North West • 807-684-7200 ext. 4324
- Miranda Carey, North East • 705-522-6237 ext. 2626
- Louise Cervini, Erie St. Clair • 519-254-5577 ext. 58615
- Rachel Sutherland, South West • 519-685-8500 ext. 54043
- Emily Dampier, Simcoe Muskoka • 249-535-3472
- Kathy MacLeod-Beaver, Central East • 905-576-8711 ext. 32554
- Dionne Nolan, South East • 613-549-6666 ext. 3851
- Carolyn Roberts, Champlain • 613-737-7700 ext. 70522
- Deena Klodt, Hamilton Niagara Haldimand Brant • 905-387-9711 ext. 63312
- Leonard Benoit, Toronto Central • 647-309-1794

Prince Edward Island

Provincial Cancer Care Organization

[PEI Cancer Treatment Centre](#), Prince Edward Island

[PEI Cancer Care Support & Resources](#)

Provincial Patient Navigation Program

Cancer Patient Navigator

Visit the cancer patient navigator [website](#).

Telephone: 902-894-2552 or 1-877-511-5177 (toll-free) Email: cancerpatientnavigator@ihis.org

2 Indigenous Patient Navigators

- Mi'kmaq Health Systems Navigator (West)
Shelby Arsenault, R.N., BScN • 902-831-2711 • shelby.arsenault@lennoxisland.com
- Mi'kmaq Health Systems Navigator (East)
Crissy Riley, LPN • 902-676-3007 • criley@abegweithealth.ca

Quebec

Provincial Cancer Care Organization

[Integrated Health and Social Services Centres \(CISSS\) and Integrated University Health and Social Services Centres \(CIUSSS\)](#), Quebec

[Local Community Services Centres \(CLSCS\)](#)

[Community psychosocial services](#)

Beyond these integrated centres, Quebec has 4 university hospital centres and 3 university institutes that provide specialized and highly specialized services beyond their health region border. Moreover, Quebec's cancer centres run under 22 integrated health and social service centres that manage numerous healthcare establishments within its 16 regions.

10 Major Cancer Centres

- [Hôpital Maisonneuve-Rosemont - Cancérologie](#), Montreal, QC
- [Cedars Cancer Centre \(McGill University Health Centre\)](#), Montreal, QC
- [Centre intégré de cancérologie – CHUM](#), Montreal, QC
- [St. Mary's Hospital Center](#), Montreal, QC
- [Segal Cancer Centre \(Jewish General Hospital\)](#), Montreal, QC
- [Hôtel-Dieu de Québec \(CHUQ\)](#), Québec City, QC
- [Centre intégré de cancérologie de Laval \(CICL\)](#), Laval, QC
- [CIUSSS de l'Estrie – CHUS](#), Sherbrooke, QC
- [Hôpital Charles-Le Moyne](#), Greenfield Park, QC
- [CISSS du Bas-Saint-Laurent](#), Rimouski, QC

Provincial Patient Navigation Program

Oncology Pivot Nurse

Similar to Patient Navigator roles in other provinces. If not automatically assigned one, you can ask your doctor to speak with an oncology pivot nurse.

More Information [here](#).

Patient Navigator (Anglophones)

- Steve Guimond, Quebec City
Community Health and Social Services Foundation, Jeffery Hale Pavilion, 1270 Chemin Ste-Foy, suite 2106, Québec, QC G1S 2M4 • 418-684-2289 ext. 227 / Toll Free : 1-855-684-2289 (c) 418-932-0095 • navigator@qchfoundation.org

Saskatchewan

Provincial Cancer Care Organization

[Saskatchewan Cancer Agency](#), Saskatchewan

[The Community Oncology Program of Saskatchewan \(COPS\)](#)

2 Cancer Centres

- [Allan Blair Cancer Centre](#), Regina, SK
- [Saskatoon Cancer Centre](#), Saskatoon, SK

Provincial Patient Navigation Program

6 First Nations and Métis Support Services (Including patient navigation, cultural support services and more.)

- Regina General Hospital
1400, 14th Avenue • 306-766-4155 • Monday to Friday 8:00 a.m. – 4:30 p.m.
- Pasqua Hospital (Regina)
4101 Dewdney Avenue • 306-766-2232 • Monday to Friday 8:00 a.m. – 4:30 p.m.
- St. Pauls Hospital (Saskatoon)
1702 20th Street West • 306-655-0518 • Monday to Friday 8:00 a.m. – 4:30 p.m.
- Royal University Hospital (Saskatoon)
103 Hospital Dr., 5th floor (next to elevators) • 306-655-0166 • Monday to Friday 8:00 a.m. – 4:30 p.m.
- Jim Pattison Children’s Hospital (Saskatoon)
103 Hospital Dr. • 306-655-0166 • Monday to Friday 8:00 a.m. – 4:30 p.m.
- Victoria Hospital (Prince Albert)
1200, 24th Street West • 306-940-9002

TERRITORIAL RESOURCES



Northwest Territories

Territorial Patient Navigation Program

[Cancer Navigation Program](#) through the Northwest Territories Health and Social Services Authority (NTHSSA)

4 Indigenous Patient Navigator Centres

- Stanton Territorial Hospital
- Inuvik Regional Hospital
- Hay River Health Centre
- Fort Smith Health Centre

More information [here](#).

Yukon

1 Cancer Care Centre

- Whitehorse General Hospital
Cancer Care Coordinator located on main level in Outpatient Services/Specialist Clinic area.
Phone: 867-393-8853 • cancercare@wgh.yk.ca

Territorial Patient Navigation Program

1 Indigenous Patient Navigation Centre

- WGH First Nations Health Cultural Programs • 867-393-8891 • Hours: Monday-Friday: 8 am to 4 pm

General Practitioners in Oncology Program

More information about Family Physicians and Nurse Practitioners in Yukon who have completed the GPO Education Program is available by Cancer Centre/Community using this [link](#).

Nunavut

Affiliated Cancer Centre

For Inuit patients travelling to The Ottawa Hospital for cancer treatment, support can be found with the Indigenous Cancer Program services. Visit their [website](#) for more information.

1 Indigenous Patient Coordinator

- Mackenzie Daybutch • 613-737-7700 ext. 73607 • mdaybutch@toh.ca

Travel & Accommodation Resources

Hope Air

Available across Canada

If you live around a 4+ hour drive from your cancer centre and you need/want to travel by air, you can access free travel support from Hope Air. The Hope Air team will make flight arrangements on your behalf and cover all costs. To learn more about Hope Air's services:

- visit hopeair.ca
- email info@hopeair.ca
- call 1-877-346-HOPE (4673).

Canadian Cancer Society Travel Treatment Fund

Available in AB, BC, MB, SK, ON, NB, PEI, NS, QC

The Travel Treatment Fund offers short-term financial assistance to cover some costs of travelling to cancer treatments. This includes expenses like fuel and taxi or public transit fares. It is available to people with a household income is less than \$150,000 per year who are currently receiving cancer treatment.

- Visit their [website](#)
- Call 1-888-939-3333.
- Access the application form [here](#)

Airlines

Airlines frequently offer services tailored to individuals with specific travel requirements, including those who require a companion during their journey. Reach out to the airline directly to obtain detailed information about the available assistance and support options.

Lodges

Cancer lodges are accommodation for patients traveling for cancer care and treatment, they exist in most cities with a major cancer centre.

- [Canadian Cancer Society Lodges](#) (BC, NL, NS, QC)
- Fondation québécoise du cancer, [accommodation centres](#), QC
- Saskatchewan Cancer Agency, [Regina and Saskatoon Cancer Patient Lodges](#), SK

For additional help locating accommodations or travel resources, use the Canadian Cancer Society's [Community Services Locator](#).

Medical Travel Programs

Government funded and operated, these programs provide subsidies to cover travel and accommodation expenses for patients required to travel for medical care.

Northwest Territories

[Medical Travel Program](#)

Yukon

[Medical Travel program](#)

Nunavut

[Inuit Medical Travel](#) and [Non-Inuit Medical Travel Programs](#)

Métis Nation-Saskatchewan
[Medical Travel Assistance Program](#)

Métis Nation-Alberta
[Medical Travel Program](#)

Manitoba
[Northern Patient Transportation Program](#)

Ontario
[Northern Health Travel Grant Program](#)

Quebec
[Medical Transportation](#)
[Travel4Health Information Guide](#)

Newfoundland and Labrador
[Medical Transportation Programs](#)

British Columbia
[Travel Assistance Program](#)
[Travel and Accommodation Resources](#)

Nova Scotia
[Boarding, Transportation and Ostomy Program](#)
[Out-of-Province Travel and Accommodation Assistance](#)

Prince Edward Island
[Financial Assistance for Out-of-Province Medical Travel](#) • 902-368-5918 • ooptravelsupport@gov.pe.ca
[Medical Travel Assistance for People with Cancer](#)

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