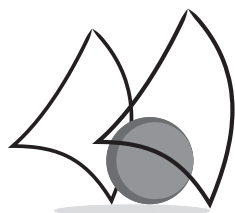


**Annals of the XX Brazilian Congress
of the Brazilian Society of Bone Marrow Transplant
August 24 – 27, 2016,
Fortaleza – Ceará – Brazil**



XX CONGRESSO
DA **SBTMO 2016**

SOCIEDADE BRASILEIRA DE
TRANSPLANTE DE MEDULA ÓSSEA

Hotel Gran Marquise . Fortaleza . Ceará
24 a 27 de agosto de 2016

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P-043**MULTIDISCIPLINARY (NURSING, PSYCHOLOGY, PHYSICAL THERAPY, OCCUPATIONAL THERAPY, PHARMACY, ORAL MEDICINE, SOCIAL SERVICES)
Aspects of nursing care for onco-hematological thrombocytopenic patients**

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<http://dx.doi.org/10.1590/1806-9282.62.suppl1.117>

Introduction: The treatment modalities for the onco-hematological patient include chemotherapy, radiation therapy and bone marrow transplantation, which have thrombocytopenia as one of the adverse effects of treatment or the underlying disease. Platelets are cells without nuclei, originating from megakaryocytes and their main function is the platelet plug formation, preventing the individual from dying of hemorrhage and their number varies from 150,000 to 450,000/mm³. Thrombocytopenia is a decrease in the absolute number of circulating platelets in peripheral blood, characterized as below 150,000/mm³. When the platelet count reaches values <50,000/mm³, it is considered that the patient has a risk of hemorrhage with invasive procedures. Upon reaching values <15,000/mm³, the patient is considered at risk of spontaneous bleeding. **Objective:** To warn about the importance of recognizing the presence of thrombocytopenia, identify the signs and symptoms and recommend the best nursing interventions to be used when treating onco-hematological thrombocytopenic patients. **Methods:** This is a descriptive study with a qualitative approach based on the review of relevant literature. **Results:** It was observed that thrombocytopenia may be accompanied by several signs and symptoms, with the most common ones being prolonged bleeding from minor cuts and scrapes or after surgeries, tooth extraction or other invasive procedures; epistaxis; bleeding from the mouth or gums; heavy menstrual bleeding; hematuria; skin petechiae of which emergence is inexplicable; extensive conjunctival bleeding and severe bleeding, such as the digestive (hematemesis, rectal bleeding or melena) and intracranial hemorrhage. Nurses must monitor laboratory tests and thoroughly evaluate the patient regarding alterations that would require interventions to be carried out by the nursing staff. The latter must be able to recognize the main signs of bleeding, as these data can assist in decision-making for the nursing care. **Conclusion:** Based on this study we conclude that the nursing staff plays an important role in the care of onco-hematologic thrombocytopenic patients because, most often, they are the first to identify early signs and symptoms that may have an impact on the treatment and also reaffirm the importance of nurses in thoroughly and systematically assess the patient to prevent or minimize damage from bleeding.

Keywords: Thrombocytopenia, Nursing, Onco-hematology, Bleeding