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[What to Expect When Having Radiation Therapy](#) [1]

This section has been reviewed and approved by the [Cancer.Net Editorial Board](#) [2], 11/2015

Your radiation therapy team

If your treatment plan includes radiation therapy, a highly trained medical team will work together to provide you with the best possible care. This health care team may include:

Radiation oncologist. A radiation oncologist is a doctor who specializes in giving radiation therapy to treat cancer. This doctor oversees your radiation therapy treatments. He or she also works closely with other team members to develop the treatment plan.

Radiation oncology nurse. A radiation oncology nurse specializes in caring for patients who are having radiation therapy. This person can answer questions about the treatments, monitor your health during treatment, and help you manage potential side effects.

Medical radiation physicist. As an expert in working with radiation equipment, a medical radiation physicist helps to design treatment plans.

Dosimetrist. A dosimetrist helps the radiation oncologist calculate the right dose of radiation.

Radiation therapist or radiation therapy technologist. A radiation therapist operates the treatment machines and gives patients their scheduled treatments.

Other health care professionals. There are other specialists who will help care for all of your physical and psychological needs during treatment. This includes social workers, nutritionists or

dietitians, physical therapists, and dentists. Learn more about [the oncology team](#) [3].

Before you start radiation therapy

Meeting with your radiation oncologist. First, you will meet with a radiation oncologist to decide whether radiation therapy is a needed part of your treatment plan. The doctor will review your records and perform a physical exam. Also, you will have tests to plan your treatment. He or she will then talk about the potential risks and benefits of radiation therapy with you. This is also your opportunity to ask questions.

Giving permission for radiation therapy. If you choose to receive radiation therapy, your team will ask you to sign an informed consent form. Signing means:

- You give written permission for treatment.
- Your team gave you information on your treatment options.
- You choose to have radiation therapy.
- You understand treatment is not guaranteed to give the intended results.

Simulation and treatment planning. Your first radiation therapy session is a simulation and does not involve an actual treatment. Your team will use imaging scans, such as a [computed tomography \(CT\) scan](#) [4], a [magnetic resonance image \(MRI\)](#) [5], or an x-ray, to direct the radiation beam to target the tumor. The tumor's location is marked on your skin with a very small, dot-like tattoo to help precisely aim the radiation beam. You may receive an immobilizer to help you stay in exactly the same position throughout each treatment. This could include tape, foam sponges, headrests, molds, or plaster casts. For people receiving radiation therapy to the head or neck, a special mesh mask, known as a thermoplastic mask, may be used. It will be molded to your face and secured to the table to gently hold your head in place. However, the radiation oncology team wants each person to be as comfortable as possible during treatment. It is important for patients to talk with the team to find a comfortable and reproducible position for treatment. Some patients, particularly with tumors around the head and neck region, feel somewhat anxious when they need to lie still in such an immobilizing device. It is important to let the members of the radiation oncology team know if this causes you anxiety. Your doctor can prescribe medication to help you relax for the treatment planning scan and the treatments.

After the simulation, your team will review your information and design a treatment plan. Sophisticated computer software helps the team develop this plan. Your doctor will then write a prescription about the course of your radiation treatment.

During treatment

External-beam radiation therapy. External-beam radiation therapy is when radiation comes from a machine located outside the body. Each session is quick and painless. Patients usually have treatment sessions five times per week, Monday through Friday, and continue for three to nine weeks. The sessions typically last about 15 minutes. The radiation beam and your body position are positioned so the radiation only targets the tumor. However, the radiation will affect some of the healthy tissue surrounding the tumor. The two-day pause in treatment each week allows your body to repair this damage.

Internal radiation therapy (brachytherapy). Both temporary and permanent placement of radioactive sources in the body may require a brief hospital stay. Also, you may need to have anesthesia, which is a medicine used to block the awareness of pain. These treatments are often repeated across a number of days or weeks. Most patients feel little to no discomfort during the treatment. However, some may experience weakness or nausea from the anesthesia. You will need to take certain precautions to protect other people from radiation exposure when you receive the implant. This is no longer needed when the permanent implant loses its radioactivity or the temporary implant is removed.

Weekly reports. Your radiation oncologist will assess how well treatment is working at least once a week and may adjust your treatment plan. In addition, your treatment team will use special x-rays, known as cone-beam computed tomography, to provide image guidance. This will ensure the radiation beam is always aimed correctly.

Personal care. Many people experience fatigue, sensitive skin at the site of radiation exposure, and emotional distress during treatment. The best way to care for yourself is to plan for extra rest, eat a healthy diet and seek emotional support. It is also helpful to treat your skin with lotions approved by your health care team and minimize your exposure to the sun. Learn more about [coping during treatment](#) [6].

After treatment

Once treatment ends, the radiation oncologist will need to see you for follow-up appointments. Your doctor will monitor your recovery and watch for any treatment side effects, which may not happen right away. Ask your doctor for a written record of your radiation treatment to use for future reference. As your body heals, you will need fewer follow-up visits.

More Information

[How Cancer is Treated](#) [7]

[ASCO Survivorship Cancer Treatment and Survivorship Care Plans](#) [8]

[Managing Stress](#) [9]

Additional Resources

RT Answers: [What to Expect](#) [10] and [Treatment Team](#) [11]

Links

- [1] <http://www.cancer.net/navigating-cancer-care/how-cancer-treated/radiation-therapy/what-expect-when-having-radiation-therapy>
- [2] <http://www.cancer.net/about-us>
- [3] <http://www.cancer.net/node/24957>
- [4] <http://www.cancer.net/node/24486>
- [5] <http://www.cancer.net/node/24578>
- [6] <http://www.cancer.net/node/21>
- [7] <http://www.cancer.net/node/25071>
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- [10] <http://www.rtanswers.org/treatmentinformation/whattoexpect/index.aspx>
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