

Reference (include title, author, journal title, year of publication, volume and issue, pages)	Evidence level (I-VII)	Key findings, outcomes or recommendations
Caliskan Yilmaz, M. & Ozsoy, S., 2010. Effectiveness of a discharge-planning program and home visits for meeting the physical care needs of children with cancer. <i>Supportive Care in Cancer</i> , 18(2), pp.243–253.	II	<ul style="list-style-type: none"> • A discharge-planning program and a hospital based home care model had a very significant effect on the care needs of children with cancer and their caregivers.
Hansson et al., 2011. Hospital-Based Home Care for Children with Cancer. <i>European Journal of Oncology Nursing</i> , 15(3), pp.276–277.	IV	<ul style="list-style-type: none"> • Although Hospital Based Home Care for children with cancer is widely used, there is limited valid data on its psychosocial, clinical, and economic effects. • Limited evidence suggests that HBHC for children with cancer is feasible and associated with no crucial negative effects.
Phillips, B. et al., 2011. A Home-based Maintenance Therapy Program for Acute Lymphoblastic Leukemia—Practical and Safe? <i>Journal of Pediatric Hematology/Oncology</i> , 33(6), pp.433–436.	VI	<ul style="list-style-type: none"> • The importance of evaluation when there is a change to the model of care. • The safety of home base care was the same • Overall the patient/family had high satisfaction of home based care
Theodoros Deborah et al., 2007. Investigating the cost-effectiveness of videotelephone based support for newly diagnosed paediatric oncology patients and their families: design of a randomised controlled trial. <i>BMC Health Services Research</i> , 7(1), p.38.	I	<ul style="list-style-type: none"> • The improved support provided by videotelephony has the potential to reduce the need for parents and patients to access local health care services • Reduced financial burden for families and convenience
Tsimicalis, A. et al., 2011. Tele-practice guidelines for the symptom management of children undergoing cancer treatment. <i>Pediatric blood & cancer</i> , 57(4), pp.541–8.	V	<ul style="list-style-type: none"> • The development of Tele practice guidelines provides consistent information for the symptom management of Children Undergoing Cancer Treatment • Assists in triaging which issues can be managed at home, requires a follow up/ review and if a patients should come into hospital immediately.

<p>Zelcer, S. et al., 2008. The Memorial Sloan Kettering Cancer Center experience with outpatient administration of high dose methotrexate with leucovorin rescue. <i>Pediatric blood & cancer</i>, 50(6), pp.1176–80.</p>	<p>IV</p>	<ul style="list-style-type: none">• The study demonstrated that High dose methotrexate (HDMTX) was safely and effectively administered in the institution’s paediatric day hospital setting.• The majority of HDMTX courses (82%) were successfully completed as an outpatient. The rates of renal toxicity were minimal.
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