cerebral aqueduct, and deranged electrolytes. MRI revealed tumour in pineal region and filling the third ventricle. Biopsy and tumour markers confirmed the diagnosis of bifocal Non Germinomatous Germ Cell Tumour (NGGCT). The diagnosis was complicated with the secondary diagnosis of diabetes insipidus and profound permanent anterograde amnesia. Whilst DL is common in NGGT in pineal region, anterograde amnesia is a very rare condition in paediatrics. Thus there is paucity of literature available to the clinicians to know how to much improvement in the life of patients undergoing a baseline skin assessment, education on prophylactic skin measures and easier access to dermatology within their oncology clinic. We are also developing guidelines to consistently treat common skin related toxicities. CONCLUSION: The early involvement of the dermatology clinic and increase knowledge with the nursing and medical teams will allow families to gain confidence in managing skin related complication and reducing the need to hold targeted therapies as a result of dermatological toxicity.

NURS-06. NURSING PROFESSIONALS AND THEIR AID IN RESEARCH BIOBANKING
Lauren Hancock, and Madhuri Kambhampati; Children's National Hospital, Washington, DC, USA

Nursing teams play an integral role in the care of patients with brain tumors; however nurses do not often see themselves as essential contributors to translational research. Recent developments of nurse-researcher relationships and involvement of the multidisciplinary team have led to successful biobanking strategies. Though there are challenges associated with fostering these relationships, their vital role has significantly enhanced participant recruitment and sample collection at our biobank. Researchers at the institution have established a biobank to collect samples from pediatric brain tumor patients at diagnosis, during therapy, and postmortem using conventional methods. However, a collaborative environment between nurses and research teams greatly enhanced the growth of the biobank. We have increased patient recruitment by more than 50% in the past four years and supported different types of specimen collection. Our success entails: 1) development of nurse-researcher relationships, 2) an email consent process, 3) streamlined sample collection, and 4) hospital appreciation of the vital role of the nursing team in clinical data collection pertinent to molecular analysis. Additionally, the support of nursing is valuable during postmortem consents and provides emotional support to the family to fulfill their wish to donate. Nurses play a major role in coordination of the post-mortem donation process, and assist in the formation of partnerships within the community to promote this opportunity to families. As biobanking continues to be an important part of bench research, all institutions should recognize and support the vital role that nurses can have in enhancing this endeavor.

NURS-07. STAFF EDUCATION THROUGH NURSING AND PHARMACY COLLABORATION
Lauren Hancock1, and Whitney Pittman2; Children’s National Hospital, Washington, DC, USA, 1Children's Hospital at OU Medical Center, Oklahoma City, OK, USA

Even within the focused field of pediatric oncology, there are healthcare providers who lack education regarding the specialized population of children with brain tumors. In order to improve staff knowledge of pediatric neuro-oncology, nursing and pharmacy developed a collaborative Lunch and Learn program to provide additional education. An eight week brain tumor curriculum was developed, and informal sessions grouped by diagnosis were held over lunch between the neuro-oncology nursing team (nurse practitioners and nurse coordinator) and a clinical pharmacy resident. A nurse practitioner provided academic literature and the pharmacy resident did further research and appreciate the vital role of the nursing team in clinical data collection pertinent to molecular analysis. Additionally, the support of nursing is valuable during post mortem consents and provides emotional support to the family to fulfill their wish to donate. Nurses play a major role in coordination of the post-mortem donation process, and assist in the formation of partnerships within the community to promote this opportunity to families. As biobanking continues to be an important part of bench research, all institutions should recognize and support the vital role that nurses can have in enhancing this endeavor.

NURS-08. A CASE REPORT OF RARE AND PROFOUND ANTEROGRADE AMNESIA IN A PEDIATRIC SURVIVOR OF A BIFOCAL NON GERMINOMATOUS GERM CELL TUMOUR AND DIABETES INSIPIDUS
Elizabeth Bland; Sydney Children’s Hospital, Sydney, NSW, Australia

We present the case of a 12yo female who presented to the emergency department with increasing agitation, confusion, fluctuating GCS, hydrocephalus, and deranged electrolytes. MRI revealed tumour in pineal region and filling the third ventricle. Biopsy and tumour markers confirmed the diagnosis of bifocal Non Germinomatous Germ Cell Tumour (NGGCT). The diagnosis was complicated with the secondary diagnosis of diabetes insipidus and profound permanent anterograde amnesia. Whilst DL is common in NGGT in pineal region, anterograde amnesia is a very rare condition in paediatrics. Thus there is paucity of literature available to the clinicians to know how to much improvement in the life of patients undergoing a baseline skin assessment, education on prophylactic skin measures and easier access to dermatology within their oncology clinic. We are also developing guidelines to consistently treat common skin related toxicities. CONCLUSION: The early involvement of the dermatology clinic and increase knowledge with the nursing and medical teams will allow families to gain confidence in managing skin related complication and reducing the need to hold targeted therapies as a result of dermatological toxicity.

NURS-09. INTRODUCTION OF A WELLNESS PROGRAM FOR PEDIATRIC NEURO-ONCOLOGY PROVIDERS
Kaaani Waters1, Helene Montgomery2, Kasey Rangan3, Tom Davidson4, and Whitney Pittman2, Rebecca Kim1, Andrea Rang1, Kasey Rangan1, Kim Bira1, Kasey Rangan1, and Whitney Pittman2; Cincinnati Children’s Hospital, Cincinnati, OH, USA, 2Children’s Hospital Los Angeles, Los Angeles, CA, USA, 3Office of Academic Affairs, Children’s Hospital Los Angeles, Los Angeles, CA, USA, 1Kempe Center for the Family, University of Southern California, Los Angeles, CA, USA

INTRODUCTION: Pediatric oncology providers have unique and rewarding careers. The medical and psychosocial complexity of caring for pediatric oncology patients and their families is simultaneously inspiring and challenging. In addition, the complex demands of the healthcare system can lead to chronic stress, burnout, and disruption to the healthcare team’s well-being. Through recruitment and education for providers in our personal lives as well as their medical practice. METHODS: An interdisciplinary team of nurse practitioners and physicians in a large pediatric neuro-oncology program at an academic institution completed anonymized wellness self-assessments regarding knowledge of multidisciplinary teams and their roles in supporting educational needs. Surveys and interviews highlighted barriers to wellness and identified gaps gaps in educational needs. Tailored and regularly scheduled wellness interventions were implemented. All participants completed post-intervention wellness self-assessments to evaluate the effectiveness of the program. CONCLUSION: The introduction of a provider wellness program exemplifies a feasible approach to identify barriers and evaluate efficacy of wellness interventions in achieving multi-factorial provider wellness. Secondary aims include determination of findings, with the intention of cultivating improvement in provider quality of life throughout the healthcare profession, and the ultimate goal of improving care to patients and families.

NURS-10. IMPROVEMENTS IN A BEHAVIORALTRAINING AND PHARMACOLOGICAL ANXIOLYSIS ALGORITHM FOR INCREASED COMPLIANCE IN PEDIATRIC PATIENTS IN PHARMACOTHERAPY FOR RADIATION THERAPY: A RETROSPECTIVE ANALYSIS
Judy Tran1, Jennifer Holt1, Danielle Crump2, Anita Shea3, Lin Whetzel1, Andrea Lattimore4, Rebecca Carson1, and Roberta Anderson2; Sibley Memorial Hospital, Washington, DC, USA, 1Johns Hopkins Medical Institute, Baltimore, MD, USA, 2Children’s National Hospital System, Washington, DC, USA, 4Cincinnati Children’s Hospital, Cincinnati, OH, USA

BACKGROUND: In the pediatric population, the probability of compliance with radiation involves multifactorial elements. Younger pediatric patients often require anesthesia to ensure accurate delivery of radiotherapy. The purpose of this analysis was to refine our algorithm in pediatric patients to better identify children who would benefit from behavioral training and/or anxiolysis interventions with the goal of minimizing anesthesia use. METHOD: Retrospective data was collected from electronic medical records regarding anxiolysis and sedation practices at one large urban Children’s Hospital. RESULTS: Six categories demonstrated statistical significance (p<0.05) in their influence on behavioral compliance during radiotherapy: age category (specifically age <7: Odds ratio [OR] 3.0, 95% Confidence Interval [CI] 1.0, 9.1), need for sedation with prior imaging studies (p<0.001), parent’s perception of requiring anesthesia for successful treatment (p<0.001), duration of treatment, primary language (p<0.001), and use of total body irradiation (OR 3.1, 95% CI 1.1, 9.3). CONCLUSION: Identification of pre-radiation risk factors allowed for better recognition of patients at risk for treatment non-compliance and for requiring daily sedation. Future studies should focus on implementing the algorithm prospectively in an effort to identify...