Colorectal cancer (CRC) often is curable if detected before it metastasizes, with surgical resection resulting in a cure in about 50% of patients (National Cancer Institute [NCI], 2013). However, metastatic CRC (mCRC) and recurrent CRC remain major treatment challenges. A tumor needs new blood vessels to receive the nutrients and oxygen necessary for growth. The development of new blood vessels is called angiogenesis. The class of targeted therapies known as antiangiogenic agents works by blocking angiogenesis inhibition and the potential for additional treatment-related side effects (Jitawatanarat & Wee, 2013; Saif, 2013; Sun, 2012). These newer agents have multiple targets, increasing the chance for successful angiogenesis inhibition and the potential for additional treatment-related side effects (Jitawatanarat & Wee, 2013; Saif, 2013).

When managing patients with mCRC who are being treated with any of the antiangiogenic targeted therapies, creating a nursing plan to assess for adverse events (AEs), minimize the occurrence and severity of side effects, and provide management...