Nursing Fatigue: An Evidence-Based Practice Review for Oncology Nurses

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Nursing fatigue is a current and well-researched topic. Many negative outcomes and consequences exist for patients and nurses that have been linked to nursing fatigue. Medical errors are one such consequence, and these errors have become one of the top three preventable deaths in the United States. Oncology nurses are not immune to fatigue, and the consequences of their fatigue can be much more harmful to patients.

At a Glance
• Medication errors are the third leading cause of preventable death.
• Extended work hours can be associated with nursing fatigue and errors.
• Nursing fatigue can also be associated with nurse injury, such as needlestick injuries.

Summarizing the Evidence

Work Hours and Fatigue

Multiple studies have focused on nursing work hours and fatigue (Josten, Ng-A Tham, & Thierry, 2003; Stone et al., 2006; Stimpfel, Sloane, & Aiken, 2012). Barker and Nussbaum (2011) aimed at quantifying nurses’ perceived dimensions and reported states of fatigue to investigate the relationships between perceived fatigue and performance, as well as to identify differences in perceived fatigue levels and dimensions across demographic and work environment variables. The Nursing Performance Instrument (NPI) was used to measure changes in concentration, mood, and mental energy, as well as the implications of these on patient monitoring, medication administration, and documentation of tasks (Barker & Nussbaum, 2011). The researchers used four existing fatigue measurement scales, including the Swedish Occupational Fatigue Inventory (SOFI) and the Fatigue-Related Symptoms Questionnaire (F-RSQ). They determined that mental fatigue measures from SOFI (N = 881, X = 2.01, SD = 1.56) and F-RSQ (N = 854, X = 36.81, SD = 26.14) were most strongly correlated with questions in the NPI (p < 0.001), indicating that more than one-third of participating nurses reported working greater than 40 hours per week and that all nurses’ reported levels of mental fatigue were higher than physical fatigue.

For some nurses, working the night shift adds additional dimensions to fatigue and long hours. Scott, Arslanian-Engoren, and Engoren (2014) investigated the association between sleep, fatigue, and decision regret in critical care nurses (N = 605). Decision regret was defined as a negative cognitive emotion that occurs when the actual outcomes and the desired or expected outcome...