More than 1.5 million people in the United States were diagnosed with cancer in 2010 (American Cancer Society, 2010). No other disease state evokes such a life-threatening reaction to immediately hinder quality of life. Receiving effective information regarding diagnosis and treatment during this stressful time period is very beneficial in reducing anxiety, regaining a sense of control, and creating realistic expectations (Hinds, Streater, & Mood, 1995; Ream & Richardson, 1996; Wells, McQuellon, Hinke, & Cruz, 1995). Appropriate educational interventions also have been noted to support patients in coping with a newly diagnosed cancer (Mueller & Glennon, 2007). Oncology nurses frequently shoulder the responsibility of educating patients about their disease and the recommended therapy, potential side effects, and other vital information (Brant & Wickman, 2004; Luker et al., 1995). Oncology nurses also should be aware of the importance of providing timely, individualized instruction to patients newly diagnosed with cancer after assessing each patient’s needs and preferences (McPherson, Higginson, & Hearn, 2001; Stephens, Osowski, Fidale, & Spagnoli, 2008). Consequently, an educational presentation tailored to each individual and delivered prior to chemotherapy may help ensure better patient satisfaction and positive outcomes.

The purpose of this quality improvement project was to enhance the current system of providing information to patients newly diagnosed with cancer and their families. The delivery of individualized content prior to chemotherapy was evaluated in a controlled learning environment to accomplish this task.

Background

At an outpatient oncology clinic in northern Alabama, the protocol for patients newly diagnosed with cancer was to give all information concerning treatment and side effects on the first day of chemotherapy without any assessment of individual needs or preferences.