Nurse educators (NEs) are responsible for providing continuing education (CE) to nursing staff as a part of their regular job function. In addition to providing education in a specialty area, they also may provide patient care. Within a defined specialty practice area, nurses provide care to patients with a variety of diagnoses and yet are required to remain up-to-date on testing, treatment, and side-effect management (de Raad et al., 2010). Patient education is an important component of care and can lead to improved patient outcomes (Koelling, Johnson, Cody, & Aaronson, 2005; Oliver, Kravitz, Kaplan, & Meyers, 2001). Although nurses are responsible for providing such education, they may not have adequate time and resources to remain current on the latest management strategies (Kav et al., 2008).

The first Multiple Myeloma Mentorship Program (MMMP) was developed in 2009 as a two-fold effort to (a) construct a bridge between self-directed learning, didactic training, and clinical practice; and (b) gain valuable insights into the educational needs of NEs and nurses in the community who care for patients with multiple myeloma (MM). Based on feedback and experiences from NEs who participated in the inaugural program, the second phase of the MMMP was developed and completed in January 2011. An update of participation, perceptions among nurses, and knowledge gained as a result of the program will be reported.

Purpose of the Survey

The mentorship program was sponsored by an unrestricted educational grant from Millennium: The Takeda Oncology Company. The funding allowed the Institute for Medical Education and Research the resources to oversee the e-mentorship program, which were integral to the structure, format, and coordination of the 2010 MMMP activities. The MMMP was comprised of mentors and mentees. An MM mentor is conceptually