Multidisciplinary Cancer Care Model

A positive association between oncology nurse navigation and improved outcomes for patients with cancer

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BACKGROUND: Patients with cancer often experience prominent deficiencies in cancer care in the immediate period following initial cancer diagnosis. Several publications (Ayanian et al., 2005; Wagner et al., 2014) have called attention to deficiencies in the cancer care experiences of patients. A study by Ayanian et al. (2005) involved a survey of patients with colorectal cancer and their results indicated that 28%–47% of patients reported difficulties in receiving information, accessing psychological support, and receiving care coordination throughout the course of their treatment. In addition, a randomized, controlled trial by Wagner et al. (2014) identified the following three major challenges faced by patients with cancer and their caregivers: (a) delays in and a lack of coordination of care; (b) a lack of information relevant to the patients’ diagnoses; and (c) inadequate attention to patients’ emotional and social problems. This trial reported that these challenges particularly arise in the immediate period following the cancer diagnosis.

METHODS: This retrospective study compared randomly selected patients with GI cancer with and without an ONN. Two endpoints, the time from diagnosis to treatment and the average number of missed appointments, were evaluated through a review of healthcare records using the Epic electronic health records system.

FINDINGS: Patients with an ONN had a shorter time lapse between diagnosis and treatment commencement (p < 0.001). In this group, the average time spent between initial diagnosis and the start of treatment was 15.15 days, compared to 42.93 days for patients who were not part of the multidisciplinary cancer care model.

KEYWORDS
- navigation
- nurse navigator
- care coordination
- gastrointestinal oncology

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