BACKGROUND: Patients with cancer experience stress surrounding diagnosis and treatment. Many cancer centers employ a nurse-led education session to alleviate patient anxiety and confusion.

OBJECTIVES: The goal was to evaluate the effect of a nurse-led chemotherapy teaching session on patients’ knowledge, anxiety, and preparedness for cancer-directed therapy.

METHODS: After discussing treatment with their oncologist, participants completed a survey assessing their perceived understanding of various treatment topics. After, they underwent a teaching session with an oncology nurse. The survey was readministered when patients returned for their first and second treatment cycles.

FINDINGS: Significant increases were observed in patients’ understanding of their treatment schedule, potential adverse effects, and antiemetic medication regimen by the first cycle of therapy and a reduction in treatment-related anxiety by the second cycle of therapy.

THE INITIATION OF CHEMOTHERAPY IS ASSOCIATED WITH substantial emotional distress for many patients with cancer. A growing body of literature explores the traumatic stress caused by diagnosis and treatment of cancer and the subsequent development of post-traumatic stress disorder (Cordova, Riba, & Spiegel, 2017). Common fears include potential side effects, changes in lifestyle, loss of dignity, and death (Alifrangis et al., 2011). Research has shown the negative impact of anxiety on memory (Berggren, Curtis, & Derakshan, 2016). To help patients prepare for chemotherapy, the American Society of Clinical Oncology (ASCO) recommends that oncologists provide patients with written treatment plans that cover a variety of topics, including diagnosis, goal of therapy, treatment plan schedule, potential side effects, provider contact information, and more, to increase their knowledge regarding their chemotherapy (Neuss et al., 2017). With an understanding of potential side effects and management strategies, patients may have reduced stress and anxiety associated with chemotherapy, which in turn may lead to better treatment compliance, quality of life, and potentially better outcomes (Hartigan, 2003; Williams & Schreier, 2004). Pretreatment education is considered a practice standard and is critical to ensure that patients can provide truly informed consent for treatment. The optimal method for providing this education is unknown (Valenti, 2014). Among the options for providing education is individual teaching sessions with an oncology nurse, which represents a significant investment of resources by an oncology practice or cancer center. Some institutions have developed their own educational resources for patients with cancer (Matzo, Graham, Troup, & Ferrell, 2014). Other, less financially burdensome options include video or audio recordings of a chemotherapy educator, or written material for the patient to review.

One institution found that posting animated educational videos on oral chemotherapy to its numerous social media outlets was an effective way to educate patients (Sullivan et al., 2016).

Hospitals affiliated with the Brown University Oncology Research Group (BrUOG) typically provide a structured nurse-coordinated prechemotherapy teaching session. These teaching sessions provide an opportunity to educate patients on treatment schedules, side effects, the use of medications...