Patients with cancer have to manage symptoms, diet, and ostomy or wound care, depending on their diagnosis and treatment. In the case of chemotherapy, the treatment setting is transitioning from hospitalization to the outpatient clinic, and the average length of stay has shortened in South Korea. Therefore, after chemotherapy, patients with cancer experience changes at home, and self-care skills such as symptom management or infection prevention have become more important. To prevent many problems, patients have to be well educated about self-care methods and have ease of access to consult with nurses or doctors.

Oncology clinical nurse specialists (CNSs) began working at one South Korean hospital in 1994. To earn national CNS certification, established in 2005, nurses have to prepare at the master’s level and pass an examination (Law of 440 of the Ministry of Health and Welfare, 2006). Most CNSs care for patients undergoing chemotherapy. Their roles differ completely from the roles of RNs. CNSs concentrate on educating or counseling as well as direct care, participate in multidisciplinary meetings to discuss or make care plans, conduct research for patients with cancer, and develop oncology nursing standards for RNs. Many hospitals plan to expand existing cancer centers or

At a Glance

- Oncology clinical nurse specialist (CNS) interventions decreased some intensity scores of pain and fatigue and increased the health-related quality of life, satisfaction with trustworthiness, and ease of access.
- Long-term effects for oncology CNS interventions need to be studied for patients with other symptoms to promote an oncology CNS policy in South Korea.
- The results can provide evidence of validity of the need for oncology CNSs.

This study compared outcomes, including pain, fatigue, anxiety, satisfaction, health-related quality of life (HRQOL), ease of access, and unexpected emergency room (ER) visits, for patients with cancer in South Korea who were cared for by an oncology clinical nurse specialist (CNS) with patients with cancer who were not. Self-report questionnaires and semistructured interviews were used to appraise the performance of oncology CNSs, and medical characteristics were obtained through chart review. CNS interventions were found to diminish some intensity scores of pain and fatigue, and to increase HRQOL, satisfaction with trustworthiness, and ease of access. No significant effects were observed on anxiety or unexpected ER visits. The current study provides evidence that oncology CNSs are effective in South Korea, which will be the basis of validating the implementation and expansion of policy for oncology nursing.

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