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ASCO Expert Corner: The Role of an Oncology Nurse

Listen to theCancer.Net Podcast: The Role of an Oncology Nurse[1], adapted from this feature

Oncology nurses are an important part of the health care team [2] and work in all areas of cancer care. Oncology nurses combine their scientific knowledge, technical skills, and caring to help people living with cancer and their families throughout the cancer journey?from diagnosis and treatment to survivorship and end-of-life care.

To learn more about the role oncology nurses play in providing high-quality cancer care, Cancer.Net spoke with a panel of oncology nursing experts from a wide variety of specialties:

- Helen Mouzon, RN?oncology staff nurse
- Kevin Schreffler, RN, MSN, OCN?oncology clinical specialist
- Colleen Lewis, NP?oncology nurse practitioner
- Deena Gilland, MSN, RN, OCN?nurse administrator
- Cindi Cantril, RN?oncology nurse navigator
- Susan Beck, PhD, APRN, FAAN?oncology nurse researcher
- Brenda Nevidjon, MSN, RN, FAAN?oncology nurse educator
- Mary Magee Gullatte, PhD, RN, ANP, BC, AOCN®, FAAN?President of the Oncology Nursing Society

Q: How would you describe the role of the oncology nurse?

Susan Beck (SB): Oncology nurses are professional nurses who focus on preventing cancer, caring for individuals with cancer and their families during diagnosis and treatment, caring for cancer survivors, and providing care at the end of life. The roles of oncology nurses are diverse; they can work in many settings and have roles as practitioners, educators, managers, or scientists.

Deena Gilland (DG): The oncology nurse is truly the patient?s care planner, the driver of his or her overall care, and helps coordinate the various members of the health care team.

Colleen Lewis (CL): Oncology nurses are highly skilled and are passionate about making the experience of patients and their families as positive as possible before, during, and after cancer treatment.

Q: What are some of the most important jobs or tasks that oncology nurses do?

CL: An oncology nurse is a patient advocate, educator, source of patient and family support, and an integral part of health care delivery. Oncology nurses provide direct patient care at the bedside and chairside, as well as serve as educators, researchers, administrators, and advanced practice clinicians (nurses who manage treatment-related side effects and work with doctors to manage patient care).

Helen Mouzon (HM): The oncology nurse manages patients? symptoms, gives support to patients and their families, and coordinates care within a multidisciplinary care team. The oncology nurse continually assesses patients? knowledge and understanding of their disease and treatment plan. The oncology nurse will monitor patients? lab results and make sure they understand what they mean. The oncology nurse?s role in cancer treatment is to advocate for the patient and their families and to treat the whole person, not just the cancer.

SB: Nurses focus less on the disease and more on you and how you respond to the illness and the treatment. They are prepared to treat you in a holistic way (caring for the whole patient) and can suggest a variety of strategies to help you cope with cancer and cancer treatment. They can also advise you on ways to prepare for survivorship and provide coaching on living a healthy lifestyle.

Kevin Schreffler (KS): I am always humbled by the kind and compassionate care exhibited by the oncology nurse. I have always said that nurses do not go into the field of oncology just for the job or paycheck. It is truly a calling, which is evident by the relationships built between the patient, family, and caregivers and the oncology nurse.

Q: What are the requirements to become an oncology nurse?

Mary Magee Gullatte (MMG): Oncology nurses must have a passion for oncology nursing and be licensed as a Registered Nurse (RN) in the state where they practice. For Advanced Practice Nurses (APN), they must be licensed or state-sanctioned to practice as an APN in the state where they work and be certified as an APN or clinical nurse specialist (CNS). It is also essential to be mentored by an experienced oncology nurse as you begin your practice.

Q: How has the role of the oncology nurse changed over the past few decades?

Brenda Nevidjon (BN): The foundation of oncology nursing?the relationship with patients and families?has not changed. The critical combination of the art and science of nursing has not changed. But, the healthcare environment has changed, and the diversity of roles for oncology nurses has grown considerably.

HM: Over the years I have seen the focus of oncology nurses change from treatment to prevention. The more we educate people about the warning signs of cancer and promote health, hopefully the fewer patients we?ll see with advanced cancer (cancer that has spread to other parts of the body). I have also seen the focus of oncology nurses shift from patient-focused to family-centered care. We incorporate the psychosocial, physical, sexual, and spiritual health of the family into the care patients receive.

Q: Do you have any tips to help patients and their caregivers better communicate with nurses?

BN: Oncology nurses are the best resource to translate complex medical information and jargon. Just ask. No question is insignificant. It helps to write your questions down and to have a family member or friend at your appointments so there are two sets of ears.

MMG: Our goal is to have open and transparent communication between our patients and their families and the entire cancer care team. There is no question that is ?dumb,? too large, or too small to ask.

KS: Understand that the oncology nurse is your advocate through all of your care. Trust your nurse and the communication will come openly.

DG: I think it is helpful for patients to write down their questions as they think of them so they can discuss them at their next visit. I also believe keeping a journal of symptoms, food intake, exercise, etc. helps the nurse better care for the patient.

Cindi Cantril: I counsel my patients and their family members to tape their visits with the health care team, to organize their care with copies of all reports and treatment recommendations, to create a personal support team, and to ask for or create a survivorship care plan [3].

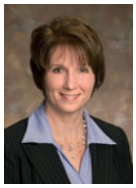
HM: Oncology nurses really want to know everything about their patients, the good and the bad. We can work together on the best plan of care. So please do not hesitate to call your nurse.

About the Contributors

Helen Mouzon, RN, is a Shift Nurse Manager at the Winship Cancer Institute of Emory University and is the membership chairperson for the Southern Crescent Oncology Nursing Society, of which she was one of the founding members.

Kevin Schreffler, RN, MSN, OCN, is a Clinical Nurse Specialist at the Winship Cancer Institute of Emory University.

Colleen Lewis, NP, is a nurse practitioner for the Phase I Clinical Trial Program at the Winship Cancer Institute of Emory University.



Deena Gilland, MSN, RN, OCN, is the Director of Nursing for the Winship Cancer Institute of Emory University.

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Susan Beck, PhD, APRN, FAAN, is a professor at the University of Utah?s College of Nursing where she also conducts research focused on pain and symptom management in people living with cancer.

Brenda Nevidjon, MSN, RN, FAAN, is a professor of Nursing and Healthcare Leadership at Duke University School of Nursing.

Mary Magee Gullatte, PhD, RN, ANP, BC, AOCN®, FAAN,is the current president of the Oncology Nursing Society and the Vice President of Patient Services and Chief Nursing Officer for Emory University Hospital Midtown of Emory Healthcare.

More Information

Managing Your Care [4]

Managing Side Effects [5]

Talking With the Doctors and Nurses [6]

Additional Resources

Oncology Nursing Society [7]

Links:
[1] http://www.cancer.net/sites/cancer.net/files/oncology_nursing_discussion.mp3
[2] http://www.cancer.net/node/24957
[3] http://www.cancer.net/node/25394
[4] http://www.cancer.net/node/25015
[5] http://www.cancer.net/node/25238
[6] http://www.cancer.net/node/25150
[7] http://www.ons.org