

Survivorship Care Plans for Women with Invasive Breast Cancer Patricia Buchsel, DNPc. MSN, OCN, RN, FAAN • Mary Heffernan, ARNP, AONC • Seattle University College of Nursing • Seattle, Washington



Abstract	Problem Statement	Study Instruments		Data Analysis	Recommendations for Future
be diagnosed in 2016. Women diagnosed with invasive cancer are treated with one or a combination of surgery, chemotherapy, radiation, and hormonal agents. Long term treatment complications cause early and late psychological and physiological sequlea that can endure for years. The Institute of Medicine (IOM) and the Society of Clinical Oncologists (ASCO) recommended that women receive a Survivorship Care Plan (SCP) that includes a written treatment summary and follow up plan. Research Questions. What is the percentage of women treated for invasive breast cancer at a Breast Cancer Center who received a SCP at discharge from January 1, 2014 to and December 31, 2014? Do the SCPs provided meet the quality indicators as outlined by ASCO? Results. Study data were collected from electronic health records of patients treated for invasive breast cancer and found to be fully in compliance with ASCO recommendations for	Only 10% of cancer centers surveyed complied with recommendations placing women treated for invasive breast cancer at risk for the long term problems of cancer treatment. Purpose of Study Evaluate the quantity and quality of SCP issued to women treated for invasive breast cancer in an accredited northwest breast cancer center. Research questions: 1. What is the percentage of women treated for invasive breast cancer at a northwest breast cancer center who received a SCP from January 1, 2014 to and December 31, 2014?	The ASCO Treatment Summary and Follow Up Plan for Breast Cancer Survivors The quality of SCPs Examining individual medical records for the presence or absence of key elements. Reviewing narrative medical reports in study sites		(EXCEL 2010) •Stage of breast cancer •Patient age •Length of follow up	Studies Future studies will examine: Percentage of patients who followed ASCO recommendations. Roles on the breast cancer team. Surgeon, oncologists, nurse practitioners, nurse navigators.
		Presst Concer survivors may experience issues areas, please speak with your doctors or norm Libraticity or depression Functioning Dimetronal and mental health Difetigue	reast Cancer Survivors Whith the areas listed lielow. If you have any concerns in these or other to find out how you can get help with them. Lifewurine Lifewurine Mamory or concentration loss If Mamory or concentration loss If Managet If Areasting If A	in breast cancer clinic •Complications at 1st •exam •Treatment •Referrals Study Results	 Ability to reduce long term effects, complications, patient satisfaction, quality assurance, risk management. Randomized clinical trials must be examined to determine if SCPs to traditional discharge plans determine proven efficacy. Nursing research is limited. Clinical/ bedside research is needed
		changes Clearchity Clearchit		•Research question #1 (Percentage of women who received a two-part SCP: 100% (n=38) •Research question #2 (Percentage of the SCPs meeting the quality indicators as	Summary SCPs can be successfully implemented for women treated for invasive breast cancer in an organized health care system. Evidence based metrics as outlined in the ASCO breast cancer template can provide a guide for oncology health care providers to assure that patients receive the quality
	Methods Design: Descriptive study based on EPIC EHR chart review. Subjects: Women treated for invasive breast cancer at accredited northwest breast cancer treatment site from January 1, 2014 through December 31, 2014. Inclusion criteria Women treated for invasive breast cancer (stage 1-3). Exclusion criteria women treated for metastatic disease (stage 4) or non-invasive breast cancer.	Drhe comments Presend by Data Collection EHRs of patients who met inclusion criteria were examined for evidence of an SCP metric. ASCO Follow Up Plan for Breast Cancer Survivors. Forty records were retrieved. Two patients were excluded who did not meet inclusion criteria. N=38	ASCO): 100% (n= Constraints of the second s	4 and December 31, er Stages I-IV owed up on ASCO f SCPs diminished long	of care they deserve. Research is needed to document that the implementation of follow up recommendations in concert with patient compliance will prevent or decrease long term complications. Barriers to address economic issues, time constraints, and patient satisfaction require system wide solutions. Advance nurse practitioners can play a simificant role in raising the utilization and