Improving the Chemotherapy Experience through Telephone Communications

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BACKGROUND

• Cancer diagnosis is highly stressful for patients & families with many unknowns, financial concerns and the need for complex treatment.
• There is high patient anxiety about initiating chemotherapy; research shows that many have poor preparation for their treatments.
• Oncology Nursing Society guidelines recommend teaching before 1st chemotherapy treatment.
• Research findings show a pre-chemo phone call increases teaching receptivity, efficiency and decreases LOS.

Local Context:
• Coordinating care of new chemotherapy patients is complicated.
• Limited pre-chemotherapy teaching in MD offices causes delays.
• Rapid increase in patient referrals necessitated a better process for new chemotherapy patients.

PURPOSE

• Determine effectiveness of pre-chemo phone call on patient’s perceived preparedness for treatments and anxiety about chemotherapy.
• Identify additional needs not addressed in the call.
• Modify pre-chemo teaching to address deficits in needs.

REFERENCES

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METHODS

• Design: Evidence-based quality improvement project
• Setting: Outpatient Cancer Center Infusion Clinic
• Sample: 31 Adult, English-speaking, novice chemotherapy patients
• Intervention:
  • Chemo certified nurse phone call
  • Pre-survey questions asked
  • Chemotherapy teaching completed & post-survey questions asked
  • Day of chemo-compliance questions answered
• Data Collection: 6 months

RESULTS

<table>
<thead>
<tr>
<th>N = 31</th>
<th>Telephone Pre-Information Mean</th>
<th>Telephone Post-Information Mean</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have the information necessary to feel prepared for my first chemo treatment.</td>
<td>2.35</td>
<td>4.23</td>
<td>.01</td>
</tr>
<tr>
<td>I am feeling anxious about my first chemo treatment.</td>
<td>2.32</td>
<td>2.03</td>
<td>&lt; .001</td>
</tr>
</tbody>
</table>

RESULTS (continued)

• Average phone call length - 18.43 minutes.
• Mean satisfaction of the informational phone call was 4.77, with 1 being not at all satisfied and 5 being completely satisfied.
• 100% brought their medications list.
• Majority complied with taking prescribed medications before chemo treatment.

DISCUSSION

• Effectiveness of phone call supported by survey results of more preparedness (p = .01) & less anxiety (p < .001).
• Further research needs to be done due to small sample size and restriction to English language.
• In future, examine effect of phone calls on retention of information, compliance with medical advice, self-care, efficiency of chemo administration and nursing satisfaction.
• More research needs to be done on other modalities for pre-chemo education in MD offices, online or classes.

CONCLUSIONS

• Pilot data demonstrated the efficacy of pre-chemo education delivered by phone call with demonstrated benefits for patients and staff.
• Recommend pre-chemo education as standard of care, including expanding to other languages.

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