The Problem
It is well established in the nursing literature that patients benefit from an education visit prior to the first session of chemotherapy; it helps decrease patient anxiety, improves patient understanding, eases time constraints during their first chemotherapy, and overall increases nurse and patient satisfaction. When the BIDMC Cancer Center Needham opened in February, 2015, we were not offering these educational visits. We quickly found that the patients were exceedingly anxious and overwhelmed when they commenced treatment; patients did not have necessary pre-medications, or proper vein assessment both of which resulted in treatment delays.

Aim/Goal
The goals of the teaching visit are to (1) increase patient knowledge and thus, decrease patient anxiety; (2) identify barriers to care and set up necessary multidisciplinary services from which the patient may benefit; (3) ensure preparatory and supportive medications are authorized and obtained; (4) Confirm safe peripheral veins or venous access device in place or set up.

We initiated these visits in March, 2015 and collected data through December, 2015.

The Team
➢ Robb Friedman, MD, Medical Director, Cancer Center Needham
➢ Beth Hammerstrand, NP, Nurse Practitioner
➢ Linda Yanes, RN, BIDMC, Nurse Coordinator
➢ In collaboration with the Beth Israel Deaconess Medical Center, Cancer Center Needham infusion nurses.

The Interventions
Every new patient to the BIDMC Cancer Center Needham who commences with new chemotherapy will have a joint RN/NP teaching visit to occur at a separate time from an MD visit and prior to the first infusion visit.

The Results/Progress to Date

Lessons Learned
➢ Necessary for physician support to allow nurse schedules to accommodate the teaching visits
➢ Patients are willing to come for this appointment if the teaching visit is presented as an expected part of the treatment. Patients endorse great value in the visit
➢ It reiterates the multidisciplinary team approach for patients

Next Steps
➢ Continue to implement teaching visits with a goal of 100% of patients to receive an education session, including those patients referred from Boston
➢ Standardize scheduling templates to include teaching visit as a mandatory visit prior to chemotherapy
➢ Standardize documentation of educational visits as the Cancer Center grows and more nurses are involved in visits
➢ Implement RN alone teaching sessions as the clinic volume grows and more providers see patients in Needham
➢ Consider patient, or nurse satisfaction survey for validation

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