Many patients diagnosed with cancer receive chemotherapy. Oncology nurses are responsible for educating patients prior to the chemotherapy experience. Studies have examined what topics should be covered for such patients and how education should be delivered, but little literature exists regarding how to help nurses organize the data and perform education. This article examines how a community oncology practice developed a checklist to assist oncology nurses in organizing and delivering chemotherapy education to patients. Principles of adult education are reviewed briefly. The principles can aid nurses in understanding how adult patients learn and how sessions can be most effective.

The American Cancer Society (2007) estimates that more than 1.4 million new cases of cancer will be diagnosed in 2007. Chemotherapy is a frequently recommended treatment for patients with cancer. Oncology nurses are aware of the issues involved when patients receive chemotherapy; however, opinions vary regarding how nurses can best prepare patients. Most oncology nurses provide chemotherapy education to their patients in some manner. Some follow formal programs, whereas others adopt more informal approaches. This article describes the educational process in a practice setting that moved from informal to formal through the creation of a chemotherapy education checklist.

Discovering a cancer diagnosis and learning that chemotherapy will be necessary can be very stressful. Patients must learn and retain highly technical and specialized information about treatments and related self-care issues. Internalizing new information under stress can be difficult. The American Cancer Society’s Web site (2006) stated that learning about cancer and its treatment can help patients regain some control and lessen the fear of the unknown.

Oncology nurses are responsible for the education of new patients. Several studies have questioned patients undergoing outpatient chemotherapy about their learning needs. In those studies, the most frequently cited needs were cancer-specific information and treatment-related information. Treatment-related information included exploring treatment options and side effects of treatment, coping strategies, drug information, and treatment procedures (Lock & Willson, 2002; Rutten, Arora, Bakos, Aziz, & Rowland, 2005). As for delivery method, patients preferred conversations with healthcare professionals and/or written materials (Lock & Willson; Smith et al., 2004).

Clearly, most patients prefer more information rather than less, and they wish to be informed. What is not clear is the best approach for teaching adult patients. The primary author decided to develop a checklist to accomplish the task of identifying the complex information that must be relayed to patients prior to chemotherapy. Learning plans sometimes are based on academic models, but adults do not always learn best under such models.

However, nurses may not be aware of certain adult-learning principles when educating their patients. Padberg and Padberg (1990) reviewed five years of clinical nursing literature and found very little mention of the use of instructional theory. They found that most journals focused only on what clinical information should be provided to patients. Although detailing clinical information that is important to patients is critical, understanding