

Interprofessional Lung Cancer Tumor Board

The role of the oncology nurse navigator in improving adherence to national guidelines and streamlining patient care

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BACKGROUND: Lung cancer traditionally has a high morbidity and mortality rate because of late diagnosis. Use of a tumor board has been noted as one way to improve patient care and quality of life.

OBJECTIVES: This article aimed to determine the contributions of an oncology nurse navigator (ONN) related to physician adherence to guidelines and streamlined patient care in an interprofessional lung cancer tumor board.

METHODS: Retrospective chart review was performed for 18 months prior to and following implementation of the lung cancer tumor board.

FINDINGS: After implementation of the lung cancer tumor board and the creation of clinical pathways by the ONN, diagnosis of early-stage non-small cell lung cancer and the use of diagnostic workups increased.

KEYWORDS

lung cancer; interprofessional tumor board; oncology nurse navigator

DIGITAL OBJECT IDENTIFIER

10.1188/18.CJON.656-662

MORE PEOPLE DIE EACH YEAR FROM LUNG CANCER than from colon, breast, and prostate cancers combined (American Cancer Society [ACS], 2018). Among smokers, the risk for developing lung cancer is higher than for nonsmokers, but the lifetime lung cancer risk for a man is about 1 in 15 and about 1 in 17 for a woman (ACS, 2018). Black men have a 20% higher chance of developing lung cancer than White men, whereas the rate of lung cancer development is about 10% lower in Black women than in White women. The average age of lung cancer diagnosis is 70 years, and very few individuals are diagnosed aged younger than 45 years (ACS, 2018). When lung cancer is diagnosed and treated in its early stages, survival outcomes improve significantly. For example, the five-year survival rate for individuals with stage IA1 non-small cell lung cancer is 92%, compared to less than 1% for stage IVB disease (ACS, 2017). This study aimed to determine if the use of interprofessional tumor boards, national guidelines, and an oncology nurse navigator could help to improve patient outcomes and quality of care.

Interprofessional Tumor Boards

The primary purposes of a tumor board, which involves experts from various specialties, are to assist with the diagnostic workup of patients, discuss treatment options, and guide patient care (Taddei, 2013). Such interprofessional tumor boards have the potential to improve patient outcomes and quality of life (Fischel & Dillman, 2009), and they often provide input that results in improved treatment plans (Ung, Campbell, Duplan, Ball, & David, 2016).

In particular, many challenges exist in the diagnosis and treatment of lung cancer. The diagnosis of lung cancer is often delayed, with the lack of uniform treatment guidelines among specialties being a significant contributing factor (Vinas, Ben Hassan, Jabot, Monnet, & Chouaid, 2016). The literature shows that monitoring pulmonary nodules or suspicious lung findings leads to diagnosis at an earlier stage. Radiologic monitoring can assist