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Evaluation of a risk-adapted visit for post-treatment cancer survivors

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Background: The Living in the Future (LIFE) Cancer Survivorship Program at NorthShore University HealthSystem provides a risk adapted visit (RAV) directed by a physician and facilitated by an oncology nurse during which an electronic medical record documented LIFE survivorship care plan (SCP) is provided and discussed. We evaluated the degree to which a RAV promotes individualized healthcare and self-management as survivors transition from active treatment to follow-up care. Methods: Patients anonymously complete a post-RAV evaluation on the day of their RAV and then another at least one year after their RAV. Results: 1,713 RAVS, the majority for breast cancer, occurred from 1/2007 to 3/2014. There are 1,615 complete "day of" post- RAV evaluative data with a median time from completion of last therapy of < 6 months. Respondents scaled statements as strongly agree/ agree/disagree/ strongly disagree. Combined strongly agree/agree ratings are: 94%felt more confident in their ability to communicate information about their cancer treatments to other members of their healthcare team; 90% felt more comfortable recognizing signs and symptoms to report to their healthcare provider; 98% had a better appreciation for potentially helpful community programs and services. Of the 488 respondents (RAV between 1/2007 and 12/2012 n=1,366) to a questionnaire at least one year after the RAV, nearly 100%/97%/93%/91%/85% found the SCP useful in at least 1/2/3/4/5 ways: to summarize medical information, to reinforce follow up care, to recognize symptoms to report, to identify lifestyle practices that promote health, and for assistance in identifying local resources for support. 72% discussed their SCP with their PCP or another healthcare provider, 97% stated they made at least one positive lifestyle change, 89% attended at least one LIFE health promotion seminar, and 80% continue to work on wellness goals. Conclusions: Participation in a LIFE RAV following oncology treatment helps survivors construct a useful understanding of their cancer experience to guide self-care behavior. Data demonstrate that benefits persist one year after the visit and support the feasibility of a nurse-led RAV to establish a SCP in post-treatment cancer survivors.

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