Screening for and managing distress in patients with metastatic lung cancer

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Patients with metastatic lung cancer experience high levels of distress due to their disease trajectory and treatment. Oncology nurses are experts in patient care and symptom management giving them the opportunity to screen and treat patients' distress. Screening patients for distress and managing their symptoms can have a substantial impact on quality of life, treatment adherence, clinical outcomes, and healthcare costs, and therefore, is recommended by the Commission on Cancer, National Comprehensive Cancer Network, Institute of Medicine, and Oncology Nursing Society. This quality improvement project was conducted to pilot distress screening using the National Comprehensive Cancer Network's Distress Thermometer into thoracic oncology patient care and to evaluate the effect of a multifaceted intervention consisting of a patient education pamphlet and a nurse coaching call on distress levels. Screening identified 41/92 patients with distress levels > 4. This group had a mean distress score of 6.7436, (SD =1.37109), with severe distress (score >7) reported in 69.2% of patients. The number of symptoms reported ranged from 4 to 24. The most commonly reported symptoms that caused distress were fatigue, worry, pain and nervousness. A paired samples t-test revealed a significant decrease in distress scores following administration of a patient education pamphlet and a nurse coaching call. The results showed that management of distress through the use of this intervention can make a significant impact on reducing patient's distress levels.

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Implementation science and fidelity measures in radiology

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Regular basis. While many are versed in the tools of process improvement including Lean, Six Sigma, Kaizen, few radiologists know how to use fidelity measures to ensure sustained changes in their action plans for quality safety or efficiency. Likewise not many radiologists know the basics of implementation science. The presentation will outline the principles of implementation science and the use of fidelity measures for radiologists with specific anecdotes. The lecture uses a dynamic didactic style with heuristic tools.

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