

Defining the Role of the Nurse in Population-Based Cancer Screening Programs: A Literature Review

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Nurses are pivotal in cancer prevention and early detection, but the nurse's role in cancer screening programs has been described only in very general terms without specification of activities needed to develop the role. To identify the set of activities that compose the role of the cancer screening nurse, the authors of the current article performed a critical descriptive literature review to document nursing involvement in cancer screening, covering articles published from 2000–2012. A total of 726 potentially relevant studies were identified, and 22 of those were included in the review. Nurses carry out follow-up, coordinate treatment, ensure continuity throughout the process, provide up-to-date and pertinent information to facilitate patient knowledge and choice, work to ensure coordination among the various levels of care, provide ongoing training, lead research and publications concerning daily practice, and collaborate in investigation oriented toward early detection. The literature revealed that the nurse's role in cancer screening involves case management as the main activity as well as, exceptionally, carrying out diagnostic tests.

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Screening programs are designed to carry out systematic tests or explorations to identify disease in its early stages or precursor lesions in an asymptomatic population (Wilson & Jungner, 1968). These programs aim to improve prognosis by enabling diagnosis at the earliest possible stage (Brawley & Kramer, 2005). Existing evidence from randomized, controlled trials indicates that cancer screening programs should be set up only for breast, colorectal, and cervical cancers (von Karsa et al., 2008).

Screening is advisable within the context of organized programs that can guarantee quality, accessibility, access, and information about benefits and adverse effects to the population being screened. A well-organized program entails a multidisciplinary team of professionals, a defined screening structure, a rigorous system of evaluation of the process and

its results, and feedback from evaluation of the participants and the professionals involved (Lyngé, Törnberg, von Karsa, Segnan, & van Delden, 2012). Population-based screening programs were launched following pilot programs designed to evaluate the feasibility of extending this activity to a larger scale. The pilot projects have led to the conclusion that population-based programs are feasible if progressively set up to guarantee maximum quality (von Karsa et al., 2008).

Nurses play a pivotal role in cancer prevention and early detection (Jennings-Dozier & Mahon, 2002; Lester, 2007); however, few studies have defined the nurse's role in cancer screening. Those that do were published more than 20 years ago and focused on opportunistic screening, which is a nonsystematic activity that is usually performed on request or in conjunction with a consultation for a different medical concern (Coxhead,