The study compared certified nurses with noncertified nurses for symptom management of nausea, vomiting, and pain; patient satisfaction; and nurse satisfaction to determine the effect of certification in oncology nursing on those nursing-sensitive outcomes. A total of 93 nurses—35 (38%) of them certified in oncology nursing—and 270 patients completed surveys. Chart audits provided additional data on symptom management. Certified nurses scored higher than noncertified nurses on the Nurses’ Knowledge and Attitudes Survey Regarding Pain as well as the Nausea Management: Nurses’ Knowledge and Attitudes Survey. The chart audits showed that certified nurses followed National Comprehensive Cancer Network guidelines for chemotherapy-induced nausea and vomiting (CINV) management more often than noncertified nurses. The study demonstrated that job satisfaction is fairly high for oncology nurses and patient satisfaction is high. In general, cancer pain and CINV were managed well but improvements can be made. Nurses and physicians continuously should be educated on evidence-based guidelines for symptom management of cancer pain and CINV, and a CINV knowledge and attitude assessment tool should be developed.

Background

The Oncology Nursing Certification Corporation (ONCC) Research Committee participated in a state-of-the-knowledge conference on nursing certification in 1997. One unresolved issue was the relationship between certification and patient outcomes. The ONCC Research Committee was guided by the question, “Does certification in oncology nursing make a difference?” The committee conducted a nationwide study of Oncology Nursing Society (ONS) members to elicit opinions about the Oncology Certified Nurse (OCN®) credential, reasons the credential is obtained and retained, and the extent to which it is valued by employers. Nurses with the OCN® credential obtained and retained certification for personal achievement and professional growth, and they were more likely to work in a setting where the employer supports professional development through continuing education (ONCC Research Committee and Executive Staff, 1999). The committee then explored links among nurses’ OCN® status, work settings, workgroup