

# Outcomes of Cancer Survivorship Care Provided by Advanced Practice RNs Compared to Other Models of Care: A Systematic Review

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No financial relationships to disclose.

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Submitted December 2015. Accepted for publication March 14, 2016.

Keywords: survivorship; survivorship care plan; advanced practice nurse; model of care; outcomes

ONF, 44(1), E34–E41.

doi: 10.1188/17.ONF.E34-E41

**Problem Identification:** Advanced practice RNs (APRNs) have become leaders in providing survivorship care. However, outcomes of survivorship care provided by APRNs compared to other providers remain unclear.

**Literature Search:** A systematic literature search included articles published after 2005 that described a survivorship model of care and use of a survivorship care plan (SCP), as well as reported outcomes.

**Data Evaluation:** Sixteen studies were appraised and ranked by strength. Literature was evaluated based on the model of care, which included physicians, nurses, and APRNs who provided or reviewed SCPs. Outcomes evaluated were satisfaction, quality of life (QOL), and process/cost efficiency.

**Synthesis:** Survivorship care is reimbursable when provided by APRNs secondary to the ability to bill for services. Improved patient satisfaction and QOL are demonstrated when survivorship care is provided by APRNs. Incorporation of SCPs into health records improves process/cost efficiency.

**Conclusions:** Patient satisfaction was reported in all models of care. When compared to groups who received no survivorship care, no differences were reported in QOL, but survivorship care required extensive use of resources. Survivorship care provided by APRNs demonstrated improvement in satisfaction, QOL, and process/cost efficiency.

**Implications for Nursing:** Incorporating descriptions of care models and associated outcomes into randomized, controlled trials of survivorship care would provide stronger evidence to guide practice. Studies evaluating outcomes of process/cost efficiency should be considered for future research. Outcome research is needed regarding the incorporation of SCPs into electronic health records.

Survivorship care for patients with cancer has become an essential part of the treatment process. Because of improvements in cancer treatment, about 15.5 million cancer survivors are currently living in the United States, and this is predicted to increase to an estimated 20.3 million by 2026 (American Cancer Society, 2016). This growing population will require ongoing health care because cancer treatments can produce physical and psychological late effects that may not be apparent for years. As a new standard of care in oncology, survivorship care is vital to the cancer treatment process to promote recognition and management of comorbid chronic conditions that may be caused or exacerbated by cancer treatment and to monitor for signs of recurrence. The Health and Medicine Division of the National Academies of Sciences, Engineering, and Medicine (HMD) recommends the provision of a survivorship care plan (SCP) at the completion of cancer treatment to facilitate communication between providers (Hewitt, Greenfield, & Stovall, 2006). The SCP also documents cancer treatments delivered, follow-up guidelines, and recommended screening, and it lists symptoms of late effects from treatment