The combination of outpatient high-dose chemotherapy and autologous stem cell transplantation (ASCT) is a feasible treatment approach for motivated patients and their caregivers. Treatment-related toxicity and clinical outcome data for outpatient ASCT of patients with non-Hodgkin lymphoma, Hodgkin disease, breast cancer, and multiple myeloma are similar to inpatient data (Dix & Geller, 2000; Kyle, 2001; Schwartzberg et al., 1998; Seropian et al., 1999; Summers, Dawe, & Stewart, 2000). Although several researchers have purported that outpatient ASCT has psychosocial and economic advantages when compared to referral to a transplant center for inpatient treatment (Meisenberg et al., 1998; Weaver, West, Schwartzberg, Birch, & Buckner, 1998), scant research has been conducted in this area. In addition, little is known about patients’ perceptions about the quality