Timing and Mode of Breast Care Nurse Consultation From the Patient’s Perspective

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OBJECTIVES: To understand what, if any, differences exist in the perception of a breast care nurse (BCN) consultation between women who experienced a preoperative, face-to-face counseling and education opportunity with a BCN, and those who required a telephone consultation or were unable to experience a preoperative BCN consultation.

SAMPLE & SETTING: A convenience sample of women in a private hospital in Western Australia who had breast surgery for breast cancer, BRCA gene mutation, or breast cancer risk reduction, and who experienced face-to-face contact, telephone contact, or no preoperative contact with a BCN.

METHODS & VARIABLES: A single-center, mixed-methods, descriptive study comparing timing and mode of consultation.

RESULTS: Women who experienced a timely face-to-face consultation with a BCN in the preoperative period reported that they received superior education and emotional and practical support than women who experienced a telephone consultation or postoperative consultation with a BCN.

IMPLICATIONS FOR NURSING: When a patient’s circumstances allow, a consultation with a BCN in the preoperative period should be offered. Ideally, this consultation should be conducted face-to-face to provide the education and psychosocial and practical support that patients undergoing breast surgery require. When this is not possible, a telephone consultation should be offered, as opposed to waiting until after surgery.

KEYWORDS breast care nurse; consultation; risk reduction; mastectomy; preoperative period

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