Patient-Centered Communication During Oncology Follow-Up Visits for Breast Cancer Survivors: Content and Temporal Structure

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Many breast cancer survivors attend routine oncology-related medical office follow-up visits throughout survivorship (Clayton, Dudley, & Musters, 2008; Clayton, Mishel, & Belyea, 2006). Most of these survivors successfully adapt to survivorship and resume their daily lives without significant depression or anxiety (Ganz et al., 2002; Tomich & Helgeson, 2002; Wonghongkul, Dechaprom, Phumivichuvate, & Losawatkul, 2006). In addition, most women learn to live beyond cancer and some even report finding benefit (empowerment to make lifestyle changes, personal growth, improved family relationships) in the cancer experience (Gil et al., 2006; Lechner, Carver, Antoni, Weaver, & Phillips, 2006; Tomich & Helgeson, 2004). Despite this successful adaptation to survivorship, virtually all breast cancer survivors have occasional thoughts about cancer recurrence and uncertainty about the future (Gil et al., 2004). These thoughts can be caused by unexplained physical symptoms, medical testing, and even attending a routine medical office visit (Gil et al., 2004). Although office visits can trigger thoughts of recurrence and subsequent uncertainty, survivors report that the visits are a highly valuable way to obtain information and reassurance about cancer recurrence (Clayton et al., 2008; Thomas, Glynnne-Jones, & Chait, 1997). Uncertainty theory suggests that communication with providers reduces survivor uncertainty by providing information (Mishel & Clayton, 2003). In addition, although follow-up visits are important to breast cancer survivors, little is known about the structure and content of appropriate survivor-provider interaction during routine follow-up visits.

Literature Review

Conceptual Framework

Patient-centeredness is a multifaceted concept reflecting a style of communication interaction that addresses patient needs and concerns as well as being a goal of healthcare delivery systems (Epstein et al., 2005). Each participant possesses unique attributes that can