Nurse and Physician Perspectives on Patients With Cancer Having Online Access to Their Laboratory Results

Elizabeth S. Rodriguez, DNP, RN, OCN®, Bridgette Thom, MS, and Susan M. Schneider, PhD, RN, AOCN®, FAAN

Patient portals are Web-based applications that allow patients to communicate with their providers, pay hospital bills, view appointment information, download patient education materials, and review information from the electronic medical record (EMR) (Sorensen, Shaw, & Casey, 2009). The patient portal industry has expanded significantly since 2000 (Businger et al., 2007; Masys, Baker, Butros, & Cowles, 2002; Sorensen et al., 2009; Wald et al., 2007; Weingart, Rind, Tofias, & Sands, 2006). Growing interest exists in providing patients with online access to their EMR, specifically laboratory results, as a means for engaging patients in their health care and improving patient satisfaction (Businger et al., 2007; Ralston, Hereford, & Carrell, 2006; Wald et al., 2007; Wiljer et al., 2006).

Support exists demonstrating patient desire for online access to EMRs (Businger et al., 2007; Hassol et al., 2004; Masys et al., 2002; Ralston et al., 2006; Wald et al., 2007; Weingart et al., 2006). For those healthcare providers using patient portals, studies suggest that patient satisfaction increases along with patient empowerment to become engaged in their own health care (Businger et al., 2007; Hassol et al., 2004; Ralston et al., 2006; Ross et al., 2005; Wald et al., 2007).

In the oncology population, opportunities for empowerment can improve the quality of care. For example, Masys et al. (2002) reported that one patient in their study realized the laboratory had done the wrong test and was able to have it corrected. In addition, potential exists for improved patient-physician communication (Businger et al., 2007; Siteman et al., 2006).

Despite the interest among patients, physician concerns for causing patients anxiety, as well as increasing their own workload, remain barriers to implementing access to laboratory results on patient portals (Hassol et al., 2007; Wiljer et al., 2006).

**Background**

Support exists demonstrating patient desire for online access to EMRs (Businger et al., 2007; Hassol et al., 2004; Masys et al., 2002; Ralston et al., 2006; Wald et al., 2007; Weingart et al., 2006). For those healthcare providers using patient portals, studies suggest that patient satisfaction increases along with patient empowerment to become engaged in their own health care (Businger et al., 2007; Hassol et al., 2004; Ralston et al., 2006; Ross et al., 2005; Wald et al., 2007).

In the oncology population, opportunities for empowerment can improve the quality of care. For example, Masys et al. (2002) reported that one patient in their study realized the laboratory had done the wrong test and was able to have it corrected. In addition, potential exists for improved patient-physician communication (Businger et al., 2007; Siteman et al., 2006).

Despite the interest among patients, physician concerns for causing patients anxiety, as well as increasing their own workload, remain barriers to implementing access to laboratory results on patient portals (Hassol et al., 2007; Wiljer et al., 2006).

**Purpose/Objectives:** To compare the perspectives of oncology nurses and physicians regarding online access to laboratory results for patients with cancer pre- and postimplementation, and to evaluate the impact on workload.

**Design:** Pre- and postimplementation surveys distributed to nurses and physicians. In addition, a nursing workload study was conducted to measure the number of phone calls received from patients regarding laboratory results.

**Setting:** The outpatient department of a comprehensive cancer center in a large, urban setting in the northeastern United States with more than 500,000 patient visits each year.

**Sample:** 460 outpatient nurses and 349 attending physicians were surveyed; 10 of those nurses were invited to participate in the nursing workload study, as well.

**Methods:** A survey was sent to nurses and physicians one month prior to implementation and then repeated six months postimplementation. A nursing workload study was conducted for 16 weeks beginning one month prior to implementation and completed three months postimplementation.

**Main Research Variables:** Nurse and physician perspectives; nursing workload

**Findings:** Nurses demonstrated greater support than physicians with regard to patient access, their level of comfort with the patient access, and patients’ ability to interpret results. Statistical significance was identified in all three questions (p < 0.05). Perspectives on workload did not differ by role; nurses and physicians anticipated an increase in workload prior to implementation, but reported that workload decreased or stayed the same postimplementation (p < 0.005). The nursing workload study supported that finding because no change was observed in the average number of phone calls per day during the implementation period.

**Conclusions:** Oncology nurses and physicians have different perspectives on providing patients with cancer with online access to laboratory results. Concerns about increasing workload were not substantiated in the current study.

**Implications for Nursing:** Providing patients with online access to their laboratory results is a growing trend. Understanding the perspectives of oncology nurses can inform future directions for increasing health-record transparency for patients with cancer. Future research may explore the impact on the nurse-patient relationship.