Incorporating Rehabilitation Services into Oncology Site-specific Clinical Practice Guidelines

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Significance and Background:
The disease management initiative was formulated at Lehigh Valley Health Network in 1997 for the purpose of ensuring the delivery of quality, evidenced-based cancer care and for monitoring the outcomes of our care delivery efforts. This nurse coordinated program has evolved into seven site-specific, multidisciplinary, disease management groups charged with reviewing national guidelines and standards of care as well as researching current evidence bases to formulate our institution’s Clinical Practice Guidelines in Oncology. Following the recent National Comprehensive Cancer Network initiative, we are expanding these guidelines to include elements of care which are vital to the patient's overall outcome and quality of life. The example for presentation is Rehabilitative Services; specifically as incorporated into our Central Nervous System algorithm.

Purpose:
The purpose of integrating Rehabilitation as well as other ancillary services into Clinical Practice Guidelines is to promote a comprehensive, multidisciplinary approach to cancer care within our health network.

Interventions:
A multidisciplinary team of Rehabilitation Program professionals developed an evidence-based algorithm to identify immediate and long-term physical sequelae resulting from disease or treatment. Predisposing factors, descriptions of interventions and notation of appropriate consult targets were also included. A nurse led work-group added information to the predisposing factors, such as specific agents contributing to the late effects of chemotherapy. The information was then presented to the disease management team for review and incorporation into the Central Nervous System Guidelines. The design of this initial algorithm will serve as a template for additional ancillary care protocols such as survivorship. Our guidelines can be easily accessed by network providers on our intranet site.

Evaluation:
Disease Management Groups review and update all guidelines on an annual basis. Rehabilitation will evaluate referral patterns and patient satisfaction as initial quality measures. The Nurse Coordinator will develop outcome measurement tools to augment the quality process.

Discussion:
Expanding our Clinical Practice Guidelines from a traditional physician focus has provided an educational experience for our entire oncology team. Providers demonstrate a heightened commitment to guideline development and outcome evaluation. Nursing leadership has utilized a strong evidence-based format to enhance the delivery of cancer care at Lehigh Valley Health Network.