Benefits of a Multidisciplinary Survivor Clinic in Addressing Quality of Life After Cancer Treatment

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Benefits of a Multidisciplinary Survivor Clinic in Addressing Quality of Life After Cancer Treatment

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“Care of the cancer survivor should include prevention, surveillance, assessment of late effects and intervention for consequences of cancer and treatments.”
Survivor PLACE (People Living After the Cancer Experience) was created as a multidisciplinary clinic using the Yale model to evaluate and provide recommendations to those who have completed cancer treatment.

All staff are oncology trained/certified.
Each patient receives a treatment summary and survivor care plan which includes individualized recommendations.
Our aim is to utilize the Quality of Life (QOL) Assessment for optimal patient interaction and to provide individualized interventions along with determining the appropriate multidisciplinary team and resources.
Each team member meets individually with the patient to evaluate, educate and make appropriate referrals/recommendations for ongoing support.
At the first Survivor PLACE visit, patients are evaluated by each team member.
At annual Survivor PLACE visits, providers are determined by patient request and navigator input from the QOL assessment.
Lehigh Valley Health Network has resources for physical therapy, occupational therapy, genetics, nutrition, weight control, fitness, emotional support and financial counselors.

Based on the results of this study, the Survivor PLACE team will incorporate resources such as sex therapist, pelvic floor therapist, pelvic floor therapist and cognitive rehabilitation.

REFERENCES

PATIENT CENTERED MULTIDISCIPLINARY SURVIVOR VISIT
Survivor PLACE focuses on wellness, quality of life and health promotion. Patients receive a comprehensive evaluation by a CRNP, dietitian, social worker/counselor, nurse navigator and rehabilitation specialist. Genetic counselors review each case and financial counselors are available.

Our results indicate that overall QOL scores improved at 3 months for patients who have had a multidisciplinary survivorship visit. Lower score represents an increase in QOL.