

■ CNE Article

Foundations for Lung Nodule Management for Nurse Navigators

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Lung cancer remains the most deadly cancer, with more than half of patients dying within one year of diagnosis. However, mortality rates improve with early detection. Until recently, attempts at improving early detection of lung cancer have not been shown to be beneficial, but when results from the National Lung Screening Trial showed a survivor benefit for high-risk patients who had a computed tomography scan, interest grew rapidly in creating guidelines and programs that restructure lung nodule management and screening. Oncology nurse navigators will play a crucial role in the development and administration of tracking methods, data analysis, and program development that will contribute to the multidisciplinary team in screening, tracking, and diagnosing early-stage lung cancer.

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Digital Object Identifier:10.1188/13.CJON.525-531

Lung cancer accounts for 28% of all cancer deaths, which is more than breast, prostate, and colon cancer combined (American Lung Association, 2012a). The American Cancer Society (2013) estimated 228,190 new lung cancer cases for 2013, with 159,480 deaths. Fifty-six percent of patients with lung cancer are estimated to die within one year of diagnosis (American Cancer Society, 2013). The five-year survival rate for lung cancer (16%) is significantly lower than colon (65%), breast (90%), and prostate (99%) cancers (American Lung Association, 2012a). The five-year survival rate (53%) improves when patients are diagnosed with early-stage disease, but only 15% of lung cancer cases are diagnosed at an early stage (American Cancer Society, 2013). The five-year survival rate decreases to 4% for patients with cancer that has spread to distant organs (American Lung Association, 2012a).

Nurse Navigation

Nurse navigators play a crucial role in the screening and identification of early-stage lung cancers and are essential to the cancer care coordination process. Freeman (2013) stated, “The oncology nurse navigator serves as a continuous point of contact for patients and their families throughout their entire

cancer care experience” (p. 1). Responsibilities of a nurse navigator also may entail collaborating on the design and use of tracking software, ensuring management of lung nodules, coordinating and participating in multidisciplinary pulmonary tumor boards, identifying suspicious lung nodules, and eliminating barriers to receiving timely care. Fundamentally, nurse navigators facilitate patient-centered care by serving as a key contact beginning with the evaluation for cancer, providing patient education, identifying and resolving unmet needs of the patient, removing barriers to care, and offering emotional support (Hunnibell et al., 2012; Seek & Hogle, 2007).

Nurse navigators require specialized knowledge of the management and treatment of lung nodules to administer an effective tracking and surveillance program. An awareness of the science of lung nodule management could be helpful to all nurses, not just nurse navigators, in addressing patient questions and concerns with the increase in lung cancer screening. Patient-centered care may involve targeting high-risk populations, such as heavy smokers; therefore, identifying those patients that may be considered at high risk for lung cancer is an important ability for nurses. Heavy smokers are considered at high risk for lung cancer and could be approached about participating in a screening program to detect early-stage lung cancer. Nurses can refer individuals to the