



### Background

- After a diagnosis of cancer, patients are given an overwhelming amount of information
  - Treatment options- Medical vs. surgical vs. radiation
  - Side effects of treatments
  - Prognosis and what to expect
  - Options for resources if necessary
- Receiving this diagnosis can be stressful and shocking, which also impairs the ability to understand and retain the information about treatment options<sup>1</sup>
- Cancer patients typically recall less than 50% of medical information given to them in a patient doctor encounter, and less for older patients<sup>2</sup>
- Radiation therapy is a critical part of treatment for many cancer patients including SRS and SBRT which can have unique side-effects.
- The goals and complicated process of radiation treatment can be confusing for patients in the vulnerable state of recent cancer diagnosis.
- At our academic affiliated, community-based, radiation oncology clinic, our providers have noted a need for assessment of SRS and SBRT patient education.
- Prior to this study, we did not have data on SRS and SBRT patient education effectiveness.

# **Innovation Objectives**

- To fully investigate the patient experience of SRS and SBRT from the time of diagnosis to post-radiation follow up by creating a process map.
- To identify key process steps or concepts of SRS and SBRT that patients commonly misunderstand or find challenging.

## Methods

- We worked with our radiation oncologists to understand and create a process map of the full treatment and education process of SRS and SBRT.
- Patients who received either SRS or SBRT therapy which began from October 2018-December 2018 from our providers, were called by phone and asked survey questions inquiring about:
  - Treatment side effects, whether the patient received information about their radiation treatment plan, return precautions, and overall satisfaction with education.

# **Analyzing Patient Education Effectiveness for Stereotactic Radiosurgery (SRS) and Stereotactic Body Radiation Therapy (SBRT)**

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# Patient Experience Process Map

specialists

Patient is Diagnosed with Malignancy and recognized to be a Candidate for SRS or SBRT

**Consult Visit**  Patient speaks with Radiation **Oncologist about potential** treatment, most of treatment education is done Education handout is given to patient Educational video is shown Patient speaks with social work/nurse navigators about available social, and financial resources

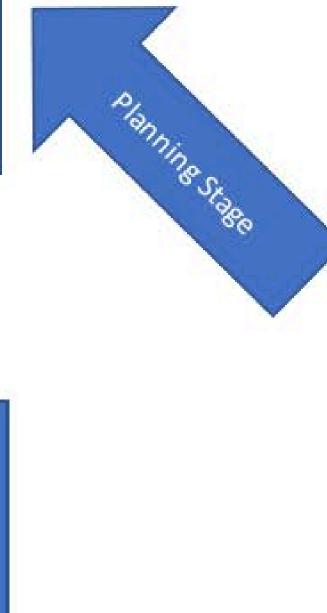
Actual treatments Patient interacts with Radiation Therapists while receiving treatments Patient will have visit with

**Radiation Oncologist at least** once during treatment Anywhere from 1-5 treatment visits

> Follow up appointments Patient checks in with **Radiation Oncologist** Occur every 2 or 3 months depending on specific treatment

> > Radiation

Oncologist





Radiation

Therapist

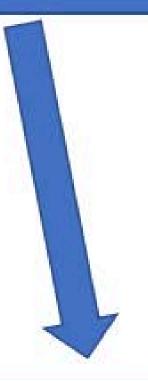




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Surveillance Recommended: Continued simultaneous follow up with Medical Oncologist and other possible



### Simulation Visit

- Patient has education with nursing staff. Patient is able to ask questions to Radiation
- therapists
- Patient is set up in
  - treatment position and CT
- is acquired for planning.



Patient Survey	Re
Patients remembering going over educational handout	
8% 23% 69%	
<ul><li>Remembered going over handout</li><li>Did not remember</li></ul>	
Did not receive handout Were you warned about under what circumstances to call the office or go to the ER?	<u>S</u>
8% 15% 77%	
not warned were warned don't remember	

# **Discussion and Next Steps**

- Although most patients were very satisfied with their education, our study suggests patient education improvement is needed in the areas of:
  - Side effects, driving and return to work precautions, and under what circumstance to go to the ER or call the office.
- Future Directions would include using the information obtained by this study to put forth various standardized provider/patient educational sessions and check-points during the radiation process.
- As an example, we are currently creating a FAQ sheet for providers to review with their patients on simulation day detailing the areas listed above and potentially stimulating more conversation about these areas of typical patient confusion.
- Hopefully with a more standardized educational interventions, patient comprehension about SRS and SBRT will improve with the overall outcome of improving our patient's holistic radiation experience.

## References

Jansen, J., Butow, P. N., van Weert, J. C., van Dulmen, S., Devine, R. J., Heeren, T. J., ... & Tattersall, M. H. (2008). Does age really matter? Recall of information presented to newly referred patients with cancer. Journal of Clinical Oncology, 26(33) 5450-5457. Kessels, R. P. (2003). Patients' memory for medical information. Journal of the Royal Society of Medicine, 96(5), 219-222.

