

Nursing Process in Care for Cancer Patients

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Nurses play a central role in the diagnosis, education, and treatment and management of cancer. Various cancers remain a major health problem affecting many Americans and cancer, in general, is a leading cause of death. The significance of this health condition calls for the implementation of the nursing process to provide adequate care and facilitate health management for a good quality of life. Nurses working with cancer patients participate in diagnosis and staging, providing treatment and managing complications, and educating them and their families while working with interdisciplinary research and professionals.

Purpose Statement: The purpose of this paper is to define the diagnosis tests and staging for cancer, identify its complications and side effects, factors affecting incidence and mortality, the role of the American Cancer Society, and the nursing process as used to care for cancer patients.

Thesis Statement: The nursing process is essential in caring for people diagnosed with cancer as it provides a systematic and holistic approach to addressing their diverse needs and promoting a good quality of life.



Diagnosis and Staging

There are many diagnostic tests for different cancers and one of the fundamental approaches is imaging tests. When cancer is first suspected, some form of imaging test is carried out to confirm the location, size, and presence of any abnormal mass but cannot be used to determine that a person has cancer (De Rubies et al., 2019). Examples include x-rays, ultrasonography, computed tomography (CT), and endoscopy. A person with persistent cough accompanied by weight loss, for instance, may undergo a chest x-ray and a person with

persistent headaches and vision changes may be subjected to brain imaging. This usually is the first diagnostic test to determine the presence of an abnormality, its location, and size.

Biopsy and tumor markers are needed to confirm the presence of cancer and perform staging. Biopsy is the process of obtaining tissue samples and examining them in a lab. This is the standard for diagnosing cancer (De Rubies et al., 2019). Tumor markers often found in blood or biopsies may also be used to detect cancer. The diagnosis process seeks to establish the location, size, and stage of the cancer for appropriate treatment. Consultation among oncologists for appropriate diagnosis and proper staging is always necessary to ensure accuracy of the diagnosis.

Staging is also crucial because it determines the evidence-based approach to treatment and management. It is the process of determining the size of the cancer tumor and whether it has spread to other parts of the body. A numeric system from Stage 0 to Stage 4 can be used to stage cancer after diagnosis. Stage 0 indicates abnormal cells but no cancer, showing high risk of developing cancer. Stages 1 through 3 shows that cancer is present with the larger the number the larger the tumor has spread to nearby tissue. Stage 4, however, indicates that cancer has spread to distant parts of the body and usually is the last stage (Kalli et al., 2018). This numeric system can be used to determine the appropriate interventions depending on size and location of the cancerous tissues.

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The TNM staging method is a more detailed approach describing the tumor (T), regional lymph nodes (N), and metastasis (M). When defining the tumor, the notations TX, T0, and T1-

T4 are used. TX denotes a tumor that cannot be measured and T0 indicates a tumor that cannot be found with the higher the number after T denoting the larger the tumor (Kalli et al., 2018). When describing effect on lymph nodes, NX, N0, N1 - N3 are used and similar to the tumor, the numbers denote the presence and number of lymph nodes that contain cancer. Metastasis is denoted as MX, M0, and M1 with MX denoting metastasis that cannot be measures, M0 indicating no metastasis, and M1 indicating metastasis to other parts of the body (Kalli et al., 2018). Using a combination of these staging notations, the full TNM notation can be written and used for determining the most appropriate approaches to treatment and management.

Complications and Side Effects

Cancer can cause several complications which the nurse should address to enhance the quality of life for the patient. Cancer recurrence is one of the common complications because people who are treated and even declared cancer-free are at a high risk of resurgence (Mahvi et al., 2018). Additionally, brain and nervous system problems may also be experienced due to tumor growth pressing on some nerves and causing pain and loss of function of some parts of the body. Weight loss and pain are common complications caused by the cancer itself. These significantly affect the patient's mental health, self-esteem, and comfort. Treatment for cancer also causes side effects which must be accounted for in the treatment process. Fatigue, weight loss, nausea, diarrhea, hair loss, and difficulty breathing are some of the common side effects (Thong et al., 2020). These side effects may reduce the patient's physical function and activity as well as cause mental health issues such as anxiety and depression.



Nurses have a responsibility to address the complications to reduce physical and psychological effects. First, nurses provide holistic care to promote the patient's physical function and reduce pain to the best possible and tolerable level. Additionally, collaborative work with mental health and support resources is needed. For instance, cancer support groups, cognitive behavioral therapy (CBT), and family support systems are evidence-based approaches (Lyman et al., 2018). Nurses should work collaboratively with these resources to provide appropriate care and support to facilitate the best quality of life achievable. Addressing cancer and cancer treatment psychosocial and physical effects is a crucial aspect of oncology nursing.

Factors Affecting Yearly Incidence and Mortality Rates

The incidence and mortality rates from various types of cancer vary annually and numerous factors contribute to these variations including access to and quality of healthcare. Early diagnosis and treatment for cancer are essential in promoting possibility for successful treatment while reducing risk for mortality. Access to screening and treatment options as well as the quality of care provided determine outcomes and cancer mortality risks (Goding et al., 2019). Early screening can help in diagnosing cancer early and providing appropriate interventions to reduce risk of mortality. Access to healthcare resources also determines cancer outcomes and management.

Although there are many risk factors for cancer, several common aspects have been associated with the incidence and prevalence of cancers. 1.7 million people are diagnosed with cancer each year and around 600,000 die each year (Goding et al., 2019). Overweight and obesity, cigarette smoking, exposure to the sun and tanning beds, excessive alcohol use, and rates of infectious diseases are the most common risk factors (Goding et al., 2019). Addressing these risk factors in addition to providing healthcare services is essential in reducing cancer incidence

and mortality. A preventative as well as treatment and management approach must be deployed to reduce the burden of cancer in the American society.

American Cancer Society (ACS) Education and Support

The ACS can provide numerous sources of education and support for patients with cancer to enhance their care and health outcomes. The society provides updated information on cancer on its website and people can also make calls any time of the day to get information. This is especially important because access to information can promote a sense of hope and control over one's condition (ACS, n.d.). This information can relate to expected body changes, access to healthcare services, more knowledge on cancer management, and coping with cancer. Access to this free information from the society, therefore, can enhance access to care and the quality of life that people with cancer experience.

The nurse can recommend various support and information sources from the ACS. They can recommend access to healthcare information and publications available freely on the society website. This is crucial in self-management and coping with cancer. Additionally, the ACS provides referral to many services including but not limited to support groups, financial programs, social services, and wigs and prosthetics (ACS, n.d.). All these resources and materials are important for various cancer patients and can be used to promote self-management, knowledge, and a high quality of life while ensuring dignity for patients. The ACS can serve as a supportive resource and partner in cancer treatment and management.

The Nursing Process

The five phases of the nursing process are used to provide safe and effective care to cancer patients starting with timely assessment and diagnosis. Assessment refers to data collection and using critical thinking skills to identify needs and potential problems (Brook et al.,

2021). This includes conducting appropriate screening especially targeting the most at-risk populations for specific cancers. This is closely followed by a diagnosis which may be related to the medical diagnosis. Nurses can use the North American Nursing Diagnosis Association (NANDA) to formulate a nursing diagnosis such as fatigue (Thong et al., 2020). These diagnoses should focus on disease-related issues such as pain and fatigue as well as psychosocial issues such as anticipatory grief and anxiety. Assessment and diagnosis start the nursing process and set the foundation for the nursing process and care.



The nursing process then advances to planning, implementation, and evaluation. In the planning phase, goals are set and resources needed for the nursing process identified. For instance, SMART goals of managing acute pain may be to reduce pain level from 7/10 pain scale to 4/10 tolerable by the patient in one week. Resources such as medications, alternative treatments, and therapies may then be identified (Brook et al., 2021). In the implementation stage, the nurse uses the resources, collaborations, and standards to disseminate care. The nurse might collaborate with a physical therapist, for instance, to provide medications and therapy for pain management. The last stage of evaluation refers to determining the effectiveness of the implementation. This includes reassessing the patient and determining whether goals have been achieved and the need for new goals (Brook et al., 2021). In patients with cancer, this may involve continuous monitoring of symptoms, remission, and overall patient outcomes such as changes in fatigue. Cancer treatment often includes long-term care and this nursing process is an ongoing cycle implemented throughout the treatment period.

Interdisciplinary Research Approach

An interdisciplinary research approach is shaping the future of healthcare including cancer screening, treatment, and management. Mathematics forms the foundation for understanding the increasingly available data and statistics while skills from physical sciences help in enhancing conventional trials for cancer treatments (Smye & Frangi, 2021). Social sciences and liberal arts help in understanding the problems that people experience on a daily basis and how they can be tackled to improve care and interventions for people with cancer. Overall, an interdisciplinary approach presents a holistic and more informed approach to addressing the multidimensional health condition. Using this research approach is an effective means of promoting research outcomes that enhance the nursing process to address the needs of cancer patients.

Conclusion

The nursing process can be effectively deployed in addressing the needs of people with cancer. Diagnostic methods and staging have been developed to ensure precision and accuracy in interventions. Nurses also increasingly identify the diverse needs of people diagnosed with cancer including the complications and side effects of cancer treatment and factors disposing people to diagnoses and mortality. These are applied in educating the population and also creating care plans that meet the diverse needs of the population. An interdisciplinary approach to research and care is necessary for cancer management.

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