Light in the Darkness: The Role of the Patient Navigator

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With a word, “business as usual”, is turned upside down and inside out. A cancer diagnosis can stop us in our tracks and life as we know it is suddenly altered, looking strange and uncertain. It is at this difficult time of crisis that the role of the patient navigator becomes a beacon of light to offer guidance on a path that is not always clear.

A patient navigator is typically a licensed trained medical professional, such as an oncology nurse or social worker, who possesses a thorough, in-depth understanding of the oncology health care system. The purpose of patient navigation is meant to optimize and streamline survivor care by coordinating therapies, helping individuals and families to understand the information they are given, as well as helping those they serve make sense of a complex medical system that often involves multiple disciplines. (Wilcox, B. 2009. “What Can A Patient Navigator Do For You?” Coping Magazine, September 2009.)

Navigators provide information and education not only to those with a cancer diagnosis, but also to families and caregivers in order to assist them in understanding how best to offer support to their loved one. Navigators take whatever time is needed to spend with individuals who have received a cancer diagnosis, ensuring that their questions are answered and concerns addressed. With such a fast flood of information, processing and digestion can become extremely difficult, especially in time of crisis. Patients can experience a “virtual deafness” that couples with an inability to cope. The navigator is there to help tease through the information given to patients by their physicians and other members of the health care team.

Navigators are never meant to intrude, but only to augment and reinforce the physician-driven plan of care that can become blurred to patients as they travel the road of survivorship. Empowering those diagnosed with knowledge and understanding helps to reduce anxiety as well as assists in maintaining control in a seemingly out of control situation. Serving as liaison and advocate, navigators enhance communication between members of the patient’s health care team, (such as nurses, physicians, social workers, spiritual counselors, dieticians); in order to better provide optimal continuity of care. With just a phone call, the navigator is available to come along side those in need to offer support, guidance, and a listening ear throughout the entire cancer journey.
Once a cancer diagnosis has been made, the diagnosing physician contacts the patient navigator with the referral. The navigator then contacts the patient within twenty four hours and explains that she will be available to act as a “go to” resource for any and all questions and concerns that they may have throughout the course of treatment. She then goes on to say that she will coordinate the planned oncology appointments and will meet them each time they come to the clinic. Navigator contact information is given, as well as a soft word of encouragement along with a pledge of the navigator’s availability and support. Thus begins the timely relationship of navigator and survivor.

The following scenario illustrates utilization of the patient navigator. Ms. Smith has just been diagnosed with a small cell lung cancer by her pulmonologist. The physician explains to Ms. Smith that the next best step in caring for her is to see a medical oncologist, and also explains that she will receive a call from a patient navigator who will coordinate her cancer care and make her necessary appointments. The physician contacts the navigator, who in turn, phones Ms. Smith to coordinate and offer support.

As the patient’s records are obtained, the navigator checks to be sure that all needed diagnostic studies have been done prior to Mrs. Smith’s first visit. Upon review, all studies have been done except for a brain scan which the navigator knows is necessary for Ms. Smith to have in order to rule out any evidence that the cancer from her lung has spread to her brain, as can be characteristic of the disease. After the medical oncologist’s review of Ms. Smith’s records, he orders a brain scan prior to her first visit. The navigator then phones Ms. Smith to explain the reason for the needed scan, reassuring her that although her physician does not suspect that the cancer has traveled to the brain, it is important to be sure, as the findings help drive the plan of care that her oncologist would recommend. She then coordinates the scan appointment with Ms. Smith’s permission, and explains that the scan lasts about an hour, is quite noisy, (ear phones and music are used to help offset the noise), and that the area over the head is somewhat enclosed. The navigator also reassures her that if she is claustrophobic, sedation can be offered to help.

Upon Ms. Smith’s first visit to the cancer center, she and her family are greeted by the navigator who gives them her contact information as well as a navigator brochure, and encourages the patient and her family to phone with any questions they might have after the visit. The navigator then speaks with the medical oncologist after his consultation with Ms. Smith to become aware of the proposed plan of care, and finds that the plan includes the initiation of chemotherapy. In caring for Ms. Smith, the navigator begins to prepare her for treatment by initiating chemotherapy education which includes the process of what to expect on the first day, expected side effects and how to manage them, as well as making sure that all of her questions are answered; all the while being sensitive to Ms. Smith’s needs and concerns. She also makes Ms. Smith aware that the likelihood of hair loss is great, and supplies her with wig shop information as well as making her aware of the “Look Good, Feel Better” program offered by the American Cancer Society at the cancer center free of charge. As treatment begins, the navigator continues to assess the ongoing needs of Ms. Smith and offers the services of the social worker, financial counselor, dietician, chaplain, psychological counselor, and support groups as deemed necessary. She also continues to relay pertinent information to Ms. Smith’s health care team on her behalf. With Ms.
Smith’s permission, her family is encouraged to contact the navigator for information on how best to support her during her cancer journey. Throughout the course of Ms. Smith’s care, the navigator continues to meet with her during her clinic visits, offering words of reassurance and encouragement to call at any time, for any reason, and with any questions or concerns she might have.

Patient navigation, although defined specifically to meet the needs of the institution that it represents, is truly a role meant to optimize and streamline patient care across the cancer care continuum. Navigators seek to empower those they serve by offering education, resources, and an open line of continuous support; a light to offer calm guidance in the midst of the storm.

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Brenda is employed as an oncology nurse navigator at Duke Raleigh Cancer Center, an out-patient comprehensive cancer care facility on the campus of Duke Raleigh Hospital in Raleigh, NC, for the past five years. With over 20 years of oncology nursing experience, she is a dedicated “voice” in the promotion of patient navigation as well as the patients and families that she serves.