Survivorship care plans can improve medical care, health outcomes and quality of life for cancer patients. In 2005, the Institute of Medicine issued a report recommending that all cancer patients receive a post-treatment individualized survivorship care plan from their primary oncology provider. Survivorship care plans are a written, comprehensive summary of all treatment received and instructions for follow-up care. A summary of this information is essential because cancer survivors need high-quality follow-up care after completion of treatment to monitor for second cancers, cancer recurrence and treatment-related side effects. Survivorship care plans serve as a tool for the transfer of knowledge between oncologists and primary care providers and support a coordinated transition of care for the cancer survivor.

The number of cancer survivors continues to rise and there are nearly one million survivors alive today in NYS. Health professionals need to ensure the coordination of follow-up care for this growing population through the use of survivorship care plans.

- Just over half (51.1%) of adult cancer survivors in NYS who were first diagnosed with cancer in the last ten years, and only 27.5% of survivors diagnosed greater than ten years ago, received a survivorship care plan that included both a written summary of treatments and follow-up instructions (Figure 1).
- More cancer survivors reported receiving instructions about follow-up care (88.7% of survivors diagnosed in the last ten years and 79.2% diagnosed greater than ten years ago) than a written summary of all cancer treatments (57.6% of survivors diagnosed in the last ten years and 30.8% diagnosed greater than ten years ago) (Figure 1).

Data Source: 2010 NYS Behavioral Risk Factor Surveillance System.

PUBLIC HEALTH OPPORTUNITY

Health care providers should promote the routine use of survivorship care plans for cancer survivors and their primary care physicians by providing a written summary of cancer treatments, future care needs and available resources.

Contact:
For more information about the data included and their specific implications for action, please send an email to DCDPIFA@health.state.ny.us with the IFA # 2013-11 in the subject line.

References