

CADTH Reference List

Patient Navigation Programs for Adults at High Risk of Lung Cancer

February 2023

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Cite As: *Patient Navigation Programs for Adults at High Risk of Lung Cancer.* (CADTH reference list: summary of abstracts). Ottawa: CADTH; 2023 Feb.

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Funding: CADTH receives funding from Canada's federal, provincial, and territorial governments, with the exception of Quebec.

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Key Messages

- We found 1 systematic review about the clinical utility of patient navigation programs led by nurses for adults at high risk of lung cancer.
- We did not find any studies about the clinical utility of patient navigation programs led by nurses versus patient navigation programs led by other navigators for adults at high risk of lung cancer.
- We did not find any evidence-based guidelines regarding patient navigation programs led by nurses for adults at high risk of lung cancer.

Research Questions

1. What is the clinical utility of patient navigation programs led by nurses for adults at high risk of lung cancer?
2. What is the clinical utility of patient navigation programs led by nurses versus patient navigation programs led by other navigators for adults at high risk of lung cancer?
3. What are the evidence-based guidelines regarding patient navigation programs led by nurses for adults at high risk of lung cancer?

Methods

Literature Search Methods

A limited literature search was conducted by an information specialist on key resources including MEDLINE, Cumulative Index to Nursing and Allied Health Literature (CINAHL), the Cochrane Database of Systematic Reviews, the International HTA Database, the websites of Canadian and major international health technology agencies, as well as a focused internet search. The search strategy comprised both controlled vocabulary, such as the National Library of Medicine's MeSH (Medical Subject Headings), and keywords. The main search concepts were nurse navigators or patient navigation, lung cancer, cancer screening, and nurses. CADTH-developed search filters were applied to limit retrieval to guidelines for a secondary search of the concepts patient navigators and nurses. The search was completed on February 8, 2023, and limited to English-language documents published since January 1, 2018. Internet links were provided, where available.

Selection Criteria and Summary Methods

One reviewer screened literature search results (titles and abstracts) and selected publications according to the inclusion criteria presented in [Table 1](#). Full texts of study publications were not reviewed. The Overall Summary of Findings was based on information available in the abstracts of selected publications. Open access full-text versions of evidence-based guidelines were reviewed when available, and relevant recommendations were summarized.

Table 1: Selection Criteria

Criteria	Description
Population	Adults at high risk of lung cancer
Intervention	Patient navigation programs led by nurses
Comparator	Q1: No patient navigation or usual care Q2: Patient navigation programs led by other navigators (e.g., lay person) Q3: Not applicable
Outcomes	Q1 and Q2: Clinical utility (e.g., time to treatment, patient satisfaction, incidence of disease, mortality, quality of life) Q3: Recommendations and best practices regarding the use of patient navigation programs led by nurses (e.g., core competencies, implementation)
Study designs	Health technology assessments, systematic reviews, randomized controlled trials, non-randomized studies, evidence-based guidelines

Results

One systematic review was identified regarding the clinical utility of patient navigation programs led by nurses for adults at high risk of lung cancer.¹ No relevant literature was identified regarding the clinical utility of patient navigation programs led by nurses versus patient navigation programs led by other navigators for adults at high risk of lung cancer. No relevant evidence-based guidelines were identified regarding patient navigation programs led by nurses for adults at high risk of lung cancer. No health technology assessments, randomized controlled trials, or non-randomized studies were identified.

Additional references of potential interest that did not meet the inclusion criteria are provided in [Appendix 1](#).

Overall Summary of Findings

One systematic review¹ described the effect of interventions that aimed to help health care professionals refer high risk individuals for lung cancer screening, including nurse navigation. The systematic review¹ found that nurse navigators improved patient outcomes related to lung cancer screening.

No relevant literature was found regarding the clinical utility of patient navigation programs led by nurses versus patient navigation programs led by other navigators for adults at high risk of lung cancer. Additionally, no relevant evidence-based guidelines were found regarding patient navigation programs led by nurses for adults at high risk of lung cancer; therefore, no summary can be provided.

References

Health Technology Assessments

No literature identified.

Systematic Reviews

1. Saab MM, O'Driscoll M, Sahm LJ, et al. Referring high-risk individuals for lung cancer screening: a systematic review of interventions with healthcare professionals. *Eur J Cancer Prev*. 2022;31(6):540-550. [PubMed](#)

Randomized Controlled Trials

No literature identified.

Non-Randomized Studies

No literature identified.

Guidelines and Recommendations

No literature identified.

Appendix 1: References of Potential Interest

Systematic Reviews

Adults at Risk of Lung Cancer Not Specified

Oh J, Ahn S. Effects of nurse navigators during the transition from cancer screening to the first treatment phase: a systematic review and meta-analysis. *Asian Nurs Res (Korean Soc Nurs Sci)*. 2021;15(5):291-302. [PubMed](#)

Li C, Liu Y, Xue D, Chan CWH. Effects of nurse-led interventions on early detection of cancer: a systematic review and meta-analysis. *Int J Nurs Stud.* 2020;110:103684. [PubMed](#)

Randomized Controlled Trials

Alternative Population – Adults at Risk of Colorectal Cancer

Temucin E, Nahcivan NO. The effects of the nurse navigation program in promoting colorectal cancer screening behaviors: a Randomized Controlled Trial. *J Cancer Educ.* 2020;35(1):112-124. [PubMed](#)

Nurse Navigation Not Specified

Percac-Lima S, Ashburner JM, Rigotti NA, et al. Patient navigation for lung cancer screening among current smokers in community health centers a randomized controlled trial. *Cancer Med.* 2018;7(3):894-902. [PubMed](#)

Non-Randomized Studies

Alternative Population – Patients Screened for Breast Cancer

Hung DY, Kim P, Li M, et al. Lean practices for resource use, timeliness, and coordination of care in breast cancer navigation. *Clin J Oncol Nurs.* 2022;26(5):503-509. [PubMed](#)

Guidelines and Recommendations

Unclear Methodology

Franklin E, Burke S, Dean M, Nevidjon B, Simms L. Professional Oncology Navigation Task Force. Oncology navigation standards of professional practice. *J Oncol Navig Surviv.* 2022;13(3). <https://www.jons-online.com/issues/2022/march-2022-vol-13-no-3/4399-oncology-navigation-standards-of-professional-practice>. Accessed 2023 Feb 15.
Refer to Oncology Navigation Standards of Professional Practice, Standard 1 to 19

Not Specific to Adults at High Risk of Lung Cancer

Baileys K, McMullen L, Lubejko B, et al. Nurse navigator core competencies: an update to reflect the evolution of the role. *Clin J Oncol Nurs.* 2018;22(3):272-281. [PubMed](#)
Refer to Figure 5: Updated 2017 ONN Core Competencies (page 278 to 279)

Review Articles

Gilbert J, Veazie S, Joines K, et al. Patient navigation models for lung cancer. *Rapid Evidence Product. (Prepared by Scientific Resource Center under Contract No. 290-2017-00003-C.) AHRQ Publication No. 18(19)-EHC028-EF.* Rockville (MD): Agency for Healthcare Research and Quality; 2018: <https://effectivehealthcare.ahrq.gov/products/nav-model-lung-cancer/rapid-product>. Accessed 2023 Feb 15.

Additional References

Position Statement

Oncology Nursing Society. Role of the oncology nurse navigator throughout the cancer trajectory. [2023]. <https://www.ons.org/make-difference/advocacy-and-policy/position-statements/ONN>. Accessed 2023 Feb 15.