Health professionals need to receive education and training to ensure proper care is provided to the growing number of cancer survivors. Although physicians and nurses are the primary providers of care, other care givers, such as rehabilitation specialists and psychosocial and mental health providers, also play an integral role in the overall cancer health care team.

**Training and Education**

Cancer survivorship care as a distinct phase of the cancer trajectory is a relatively new construct, and health professional schools’ curricula have generally not included much content in this area. This needs to change, but a larger task is providing continuing medical education to professionals who have completed their formal training and are encountering cancer survivors in their practices.

Providers need to be apprised of the risks of cancer treatments, the probabilities of cancer recurrence and second cancers, the effectiveness of surveillance and interventions for late effects, the need to address psychosocial concerns, the benefits to patients of prevention and lifestyle change, and the complexities of integrating survivorship concerns with care for other chronic conditions. Education and training must also stress the need for multidisciplinary approaches, integrated and coordinated care, and effective use of community-based resources.

**Opportunities for Increased Training**

**Physicians**

Cancer survivorship has yet to be well represented in undergraduate medical school curriculum and only a few schools currently offer courses or clerkships pertaining to cancer survivorship. Some medical schools have incorporated survivorship issues into their curriculum by including cancer survivors as “standardized patients” in what are referred to as “structured clinical instruction modules.”

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### Suggested Essential Content of Survivorship Training

- Prevention of secondary cancers
- General discussion of survivorship
- Long-term complications/sequelae of treatment
- Trends and statistics in health care access
- Health care systems/quality assurance/models of care
- Rehabilitation services
- Quality-of-life issues in survivorship
- Detection of recurrent and secondary cancers
- Pain management
- Palliative care/end-of-life care
- Short-term complications
- Treatment of recurrent cancer

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According to a review of the curriculum for medical oncology in graduate medical education programs, only some of the required content areas relate to survivorship (e.g., knowledge of drug toxicity, rehabilitation, and psychosocial aspects of clinical management of the cancer patient). Generally, no specific mention is made of cancer survivorship.

For practicing clinicians, continuing medical education provides opportunities to gain skills in this relatively new area. According to a recent survey, more than 75 percent of medical oncologists reported that they provide some follow-up care for cancer survivors, but a significant proportion wanted additional training. Opportunities for continuing medical education include professional meetings, online workshops, and journal supplements. In addition, developing and disseminating evidence-based guidelines in survivorship care can educate both specialists and primary care providers on how to care for cancer survivors.
Nurses
Nursing represents the largest segment of the nation’s health care workforce and has a significant role on the “front lines” of cancer care, both in hospitals and ambulatory settings.

Undergraduate nursing education rarely includes didactic training in oncology, according to a review of the content of basic nursing education. Nurses generally only receive exposure to cancer care through coursework related to surgical and medical care of chronic diseases.

A review of the curricula of graduate nursing programs offering an oncology focus suggests that the survivorship content could be strengthened. In addition, incentives should be developed to encourage nurses to seek certification in oncology, and the number of nursing schools that provide graduate training in oncology should be expanded. These advanced training programs could generate more nurses with the training needed to assume active roles in survivorship care.

Other Providers and Their Role in Cancer Care

Rehabilitation Specialists
Three other important professional groups that provide rehabilitative care are physical therapists, occupational therapists, and speech and language pathologists. Of these three, physical therapists are the most commonly encountered providers of rehabilitation services. Each of these specialties currently receives specialized training in their field, however, including a stronger focus on oncology is needed.

Psychosocial and Mental Health Providers
Many cancer survivors experience psychosocial distress. Therefore social service and mental health professionals play an integral role in cancer survivorship care. Social workers assist cancer patients in navigating health care and insurance systems; by leading peer support groups; and by referring patients and families to community services. Psychologists provide clinical consultation and management of psychosocial concerns in patients with cancer and their families. Psychiatrists work with cancer survivors to help control symptoms such as severe anxiety and depression, which often requires management with psychopharmacologic interventions. Other psychosocial providers involved in survivorship care include rehabilitation counselors, marriage and family therapists, and religious or spiritual counselors.

Continuing education is available from the professional societies representing each of these specialties, as well as the multidisciplinary American Psychosocial Oncology Society (APOS). An online core curriculum, developed by APOS, can also be used by all psychosocial and mental health providers to learn about cancer survivorship issues.

Health Care Educational Programs Should:

Physicians
• Add more survivorship-related continuing medical education opportunities.
• Improve online survivorship information aimed at health care providers.
• Expand training opportunities to promote interdisciplinary, shared care.

Nurses
• Increase survivorship content in undergraduate and graduate nursing programs.
• Expand continuing education opportunities on survivorship for practicing nurses.
• Increase the number of nursing schools that provide graduate training in oncology.
• Increase the number of nurses who seek certification in oncology (incentives are needed).
• Endorse activities of those working to ease the nursing shortage.

Social workers and other providers of psychosocial services
• Support efforts of APOS to standardize and promote continuing education.
• Endorse activities of those working to maintain social services in cancer programs.