



Post Bone Marrow Transplant: Improving Coordination and Return to Care for Revaccination in Primary Oncology Settings

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SIGNIFICANCE

- No bone marrow transplant (BMT) services available in a tertiary care center that serves 29 rural counties
- Rural BMT patients must travel over 100 miles for care at another facility
- Post-transplant vaccinations require repeated travel
- Barriers to care:
 - Distance from BMT center
 - Lack of reliable transportation
 - Caregiver hardship
 - Limited fiscal means for travel

PURPOSE

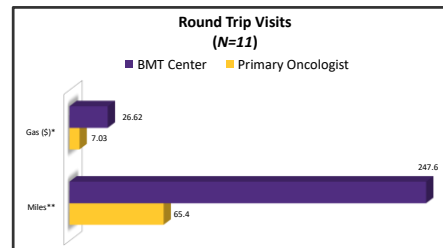
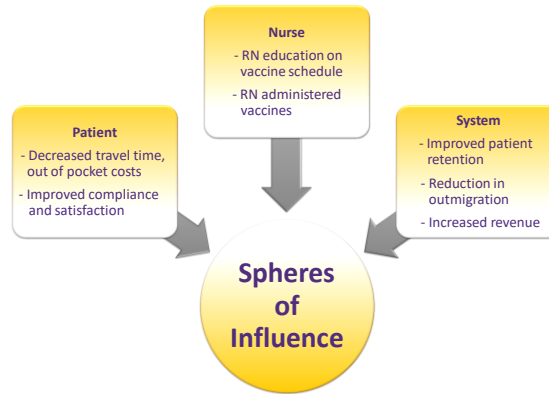
To improve post-transplant transition of care by coordination of vaccination administration and return to care appointments.

METHODOLOGY

Using the PICO (population, intervention, comparison, outcome) question model, a revaccination series of appointments was developed and implemented from May 2016 until October 2016. Prior to program design, environmental readiness was assessed. Collaboration with BMT centers, oncologists, clinic management, and financial staff ensured the design followed revaccination guidelines.

PICO Model

P	Post-BMT patients in need of revaccination
I	Revaccination incorporated into primary oncology appointment (close to home)
C	Patients who received vaccinations at transplant centers
O	Improved return to care, patient retention, coordination of care and patient satisfaction.



*Gas costs based on 20 mpg at \$2.15/gal
**average miles traveled

FINDINGS

- Four patients received revaccination in the clinic setting- 100% post-BMT needing revaccination
- Convenience allowed 100% of patients to receive revaccination versus 80% prior to intervention
- Fifteen total vaccinations given
- Patients reported convenience, timeliness, and were adherent with appointments
- Out-of-pocket costs were lower
- Physicians reported new process easy to follow and documentation streamlined

	Vaccination Within 1 month of Due Date	Total Number of Vaccines	Percent of Timely Revaccination
Pre-Implementation	24	30	80%
After-Implementation	15	15	100%

DISCUSSION

- Using the PICO model to implement post-transplant vaccination appointments:
- Streamlined care
 - Improved patient satisfaction, retention, and adherence
 - Maximized CNS intervention using the three spheres of influence

Majhail, N.S., Rizvi, I.D., Leo, S.J., Aljurg, M., Atsuta, Y., Bonfim, C., ... & Tichelli, A. (2012). Recommended screening and preventive practices for long-term survivors after hematopoietic cell transplantation. *Hematology Oncology Stem Cell Therapy*, 5(1), 1-30. doi: 10.5144/1658-3876.2012.1