B reast cancer is the second leading cause of cancer death in women in the United States (American Cancer Society, 2015). One of eight women will be diagnosed with breast cancer during her lifetime; therefore, millions of women are living with this disease and the sequelae of treatment. This has led to a new focus on the longer-term survivorship phase among breast cancer survivors (Crane-Okada et al., 2012).

A pilot study by Williams, Williams, LaFaver-Rolling, Johnson, and Williams (2011) yielded preliminary evidence in support of an educational intervention in use of self-care. Findings from a study of 113 patients showed that (compared to usual care) the use of the Therapy-Related Symptom Checklist (TRSC) resulted in significantly higher patient-reported quality of life and functional status. The enhanced patient-nurse communication resulted in significantly more symptoms being documented and managed (Williams, Graham, Storlie, Pedace, Haeflinger, et al., 2011).

Oncology nurses play a key role in developing a model of survivorship care planning for patients with breast cancer. Although increasing numbers of women are being successfully treated for cancer, an estimated 231,840 women in the United States will be diagnosed with invasive breast cancer in 2015, and 60,290 women will be diagnosed with in situ breast cancer. The five-year survival rate for all stages combined for breast cancer is 89%, the 10-year rate is 83%, and the 15-year rate is 78% (American Cancer Society, 2015).

About 5% of women have metastatic cancer when they are first diagnosed with breast cancer. Even if the cancer is found at a more advanced stage, new treatments help many people with breast cancer maintain a good quality of life, at least for some period of time. Since 1989, the number of women who have died of breast cancer has steadily decreased (American Cancer Society, 2015). This highlights the timeliness, importance, and need for survivors to explore self-care. Nurses can reassure survivors that credible and current resources will be available during their time of need.

The Oncology Nursing Society (ONS) statement on the scope and standard of oncology nursing practice refers to the process of care as being based on a “continuous healing relationship” (Boyle, Bruce, Iwamoto, & Summers, 2004, p. 3). Evidence-based symptom management and skilled assessments are