

The Genetic Management Clinic: Oncology Nurses and Management of Hereditary Cancer Risk

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Integrating clinics designed to manage hereditary cancer risk into oncology care models has the potential to improve navigation of individuals predisposed to increased cancer risk through risk-reducing education, as well as recommendations for cancer screening and surveillance. Oncology nurses have the unique opportunity and optimal position to navigate patients through the complex subject of genetics and hereditary cancer syndromes. Effectively and efficiently navigating patients with pathogenic variants to minimize and manage hereditary cancer risk has the potential to improve patient outcomes.

AT A GLANCE

- Understanding genetic testing, genetic counseling, and pathogenic variant management supports navigation for a population at higher risk of developing cancer.
- Developing professional relationships and partnerships between nurses and genetic counselors is key for collaboration and a useful resource when patient questions arise.
- Equip patients for informed decision-making regarding individual cancer risk by incorporating cancer genetics in nursing education.

KEYWORDS

hereditary cancer risk; genetic counseling; navigation; patient education; genetics

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The National Cancer Institute (2019) has documented that about 5%–10% of all cancers are caused by hereditary pathogenic variants. The International Society of Nurses in Genetics (2021) and Oncology Nursing Society (2015) have position statements on cancer prevention and early detection related to individuals who have a positive hereditary cancer risk. This article reviews an example of the oncology nurse's role in a clinic designed to manage hereditary cancer risk and highlights potential nursing implications.

Cancer Risk Identification

The Genetic Management Clinic (GMC) began in the cancer institute at Prisma Health–Upstate in Greenville, South Carolina, in 2017. The clinic was developed within the Center for Cancer Prevention and Wellness by oncology nurse practitioners (ONPs), oncology nurse navigators (ONNs), and genetic counselors to fill the void of managing patients' cancer risk after they had been identified as positive for a pathogenic variant. The GMC is for patients unaffected by a cancer diagnosis, as well as those already affected by a cancer diagnosis. Because of its unique position within the cancer institute and the interprofessional team involved in the management of patients predisposed to increased risk of developing cancer, the GMC supports improved patient outcomes through enhanced cancer surveillance and personalized risk management (see Figure 1).

Before patients are referred to the GMC to manage increased cancer risk, they must be identified with a positive pathogenic variant through genetic testing. Within the cancer institute, patients may be scheduled for a genetic counseling visit to discuss genetic testing options and recommendations. The certified genetic counselors follow guidelines from the National Comprehensive Cancer Network (NCCN, 2021) to navigate patients through decisions related to genetic testing. Family history of cancer, history of a cancer diagnosis, insurance coverage and cost, differences in gene panel tests, and possible results are key discussion points between the genetic counselors and patients in the shared decision-making visit. Genetic testing will be recommended for patients if they have a history of blood relatives with a known positive pathogenic variant in a cancer susceptibility gene or if there is a high prevalence of certain types of cancer in their family history (NCCN,