Biomarker Testing Nursing Process

FACILITATOR GUIDE

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Overview

The Biomarker Testing Nursing Process is a high-level algorithm to help nurses assess all patients with cancer for appropriate germline and/or somatic biomarker testing to inform the treatment plan. You or your nurse participants may be unfamiliar with some of the terms in this algorithm; refer to the ONS Genomics Taxonomy for evidence-based definitions.

This facilitator guide is meant to provide a couple of models in which you may review the Biomarker Testing Nursing Process with a group of nurses. It includes both an in-person model and a virtual model. Both methodologies involve reviewing the tool, discussing its uses, and determining how you can incorporate it into your workflow when considering patients with cancer and biomarker testing.

Below, please find information that the facilitator needs to prepare for this session, setup considerations for in-person sessions and virtual sessions, and important points to include while giving an overview of the tool. Each group and setup can be different depending on your participants, location, and physical resources. The outline and options are not fixed but rather are suggestions for how you might be able to adapt the session for your group and environment; review this guide and take the particulars of your group or situation into account during planning.

Facilitator Preparation

Institutional Application

When leading this discussion with nurses, you’ll want to gather specific information in relation to your institutional policies and procedures. Although all this information may not be used in every conversation with the patient, nurses will need to be prepared in case it comes up.

Prepare to discuss the following:

- The nurse’s role and responsibilities in relation to biomarker testing at your institution and in your department
- Directions on how nurses can access biomarker testing results
- Examples of a germline test report and a somatic biomarker test report

Whether conducting these sessions in person or virtually, send a copy of the Biomarker Testing Nursing Process to the nurses in advance of the session. Ask them to review the algorithm and to come prepared for discussion and with any questions they might have.
If appropriate, consider conducting this session as a part of a larger session or meeting. For example, if all nurses are present for another educational session, this content may work well as a five-minute segment of that meeting.

**Session**

**Setup: In Person**

*Length of session: five minutes*

Ensure that all nurses can see the Biomarker Testing Nursing Process; they could each have a copy or be viewing it on a screen.

**Setup: Virtual**

*Length of session: five minutes*

Consider conducting this as a small segment of a larger meeting; a five-minute virtual meeting may not be worth the time and effort to set up.

Share your screen to ensure that all nurses can see the Biomarker Testing Nursing Process and are following along with the section you are discussing.

**Overview**

First, take about two minutes to give an overview of the process. As long as the nurses receive the Biomarker Testing Nursing Process in advance, they should be familiar with the setup and flow. Be sure to touch on the following:

- **Purpose:** to help the nurse think through the thought process for working with patients who may or may not have received biomarker (germline and/or somatic) testing
- **When to use:** This process should be incorporated into the nurse’s already established workflow when preparing to see a patient for their visit. It should be placed in a location where it can be easily referenced for the nurse to refresh their memory.
- **Format:**
  - The Biomarker Testing Nursing Process is set up to start at the top with a simple question: Does the patient have biomarker testing results?
  - The nurse should then follow the process based upon the answer to that question.
  - If the patient has received germline or paired testing, it is important that they be seen by a genetics healthcare professional.
  - If they have received somatic testing, the nurse will look at the report for clinically actionable biomarkers.
  - If the patient has not received any testing, the nurse should consider whether the patient should receive germline, somatic, or paired testing.
  - For all instances, the nurse should advocate for appropriate intervention and consider what the results mean in terms of the treatment plan.
The Biomarker Testing Nursing Process also points to additional resources to help nurses understand terminology, know when to refer to the patient to a genetics professional, and assess the need for germline, somatic, or paired testing.

- **ONS Genomics Taxonomy:** Use this tool to understand genomics vocabulary, including everything from foundational terms to modes of inheritance to biomarker categories. This taxonomy serves as a foundation for terminology that will begin to be represented in ONS materials. As the evidence base continues to evolve and expand, so will this taxonomy.
- **ONS When to Refer to a Genetics Professional Quick Guide**
- **NCCN Guidelines:** Use this tool to understand whether biomarker testing is associated with the tumor type. It is important to check the guidelines regularly because they change as testing evolves, new biomarkers are discovered, and treatments are developed.

**Discussion**

**In Person**

Because the nurses were asked to review the process in advance and to consider their questions, they should be prepared with those questions for this short discussion.

**Smaller group discussion:** If you have a small meeting, it may be best to allow the nurses to ask their questions and to answer them as fully as possible with the information you gathered.

**Larger group discussion:** Because many individuals will likely have similar questions, you can have them chat for 30 seconds with the people around them (three to five people) to determine if they had the same questions. At that point, one person from each group can share the most common question from the group. After one question from each group is answered, you can ask if there are any remaining questions.

**Please note the following:** Conducting a conversation with a larger group may take more time. If you cannot allot more time for this conversation, you may want to start an email thread or virtual asynchronous chat (e.g., Microsoft Teams chat) as a means of follow-up so that nurses can ask their questions, and everyone can benefit from the answers.

**Virtual**

Because the nurses were asked to review the process in advance and to consider their questions, they should be prepared with those questions for this short discussion.

**Smaller group discussion:** If you have a small meeting, it may be best to allow the nurses to ask their questions and to answer them as fully as possible with the information you gathered. It is sometimes hard to know when to speak in a virtual meeting, so even in a small group, it may be beneficial to have nurses raise their hands (usually a button on the software) and call on individuals to voice their questions. Alternatively, you could have the nurses type their questions into the chat and you can answer the questions aloud.
Larger group discussion: As groups get larger, speaking virtually becomes increasingly harder. For large groups, it is often beneficial to have the participants type their questions into the chat and you can answer those questions verbally for all.

Because this is meant to be a short activity, it would likely not work to send the participants into breakout rooms to discuss the tool. However, if you have additional time and would like them to discuss further, smaller groups are better; you can send participants to breakout rooms to talk and determine if they have any remaining questions. After closing the breakout rooms, the whole group can reconvene to answer any remaining questions.

Please note the following: Conducting a conversation with a larger group may take more time. If you cannot allot more time for this conversation, you may want to start an email thread or virtual asynchronous chat (e.g., Microsoft Teams chat) as a means of follow-up so that nurses can ask their questions, and everyone can benefit from the answers.