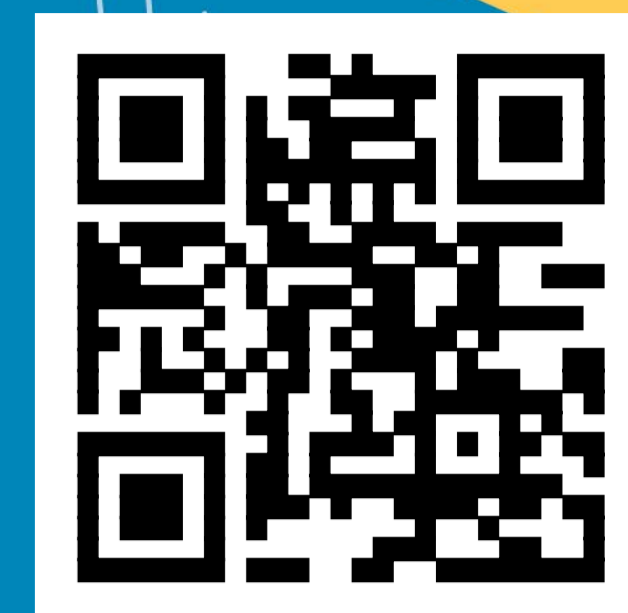


# Using Zedoc to Capture Patient's Distress: Experiences of Patients and Nurses

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## Introduction

Historically patients would have a distress screening completed by nursing staff at their CT planning scan. This assessment would allow partnership with the patient to work through the distress and put strategies in place to alleviate some of their concerns. However, completing a distress screening at the planning scan appointment resulted in delays and interruptions in patient flow. This time point of distress screening was also a reactive process instead of proactive, anticipatory screening of patient distress which impeded patient-centered care. The Zedoc platform enables electronic distress screening to be delivered and completed in the patient's home before they attend their first CT planning appointment. These surveys are completed remotely by the patient in their home environment. Nursing staff then review all distress screening surveys prior to the patient attending their consultation, to discuss any concerns raised, and create a tailored care plan during their planning scan appointment.

## Aim

To explore radiation oncology nurses' experiences of using electronic distress screening in practice to alleviate patients' distress before they arrive for their CT planning scan in the Radiation Oncology Department.

## Method

Collecting distress screening in Radiation Oncology has always been at the time of a patient's CT planning scan. This was completed face to face by a radiation oncology nurse.

The radiation department participated in a project led by the Commission on Excellence and Innovation in Health (CEIH) to pilot test electronic distress screening using a digital platform.

A multidisciplinary team was formed which consisted of radiotherapy nurses and staff from the CEIH, to develop a survey that could be sent to patients via a SMS digital system to be completed remotely in the patients' own home environment prior to a care point.

The Radiation Oncology Department was already using a validated tool to capture this screening using a paper-and-pen format. The NCCN Distress Screen Tool<sup>1</sup> was converted into an electronic survey which was embedded in the digital platform – Zedoc (see Figure 1).

Electronic distress screening surveys were sent out to patients every Wednesday before their appointment in the radiotherapy department the following week. This timepoint allowed for surveys to be completed and followed up in a timely and anticipatory manner before the patients' planning scan appointment (see Figure 2).

Patients who indicated a high distress rating of 4 and above were automatically escalated to the nursing team via an email to be actioned accordingly before the patient visit. All other distress screening was followed up on a Friday clinic by a radiation oncology nurse who contacted the patients via telephone.

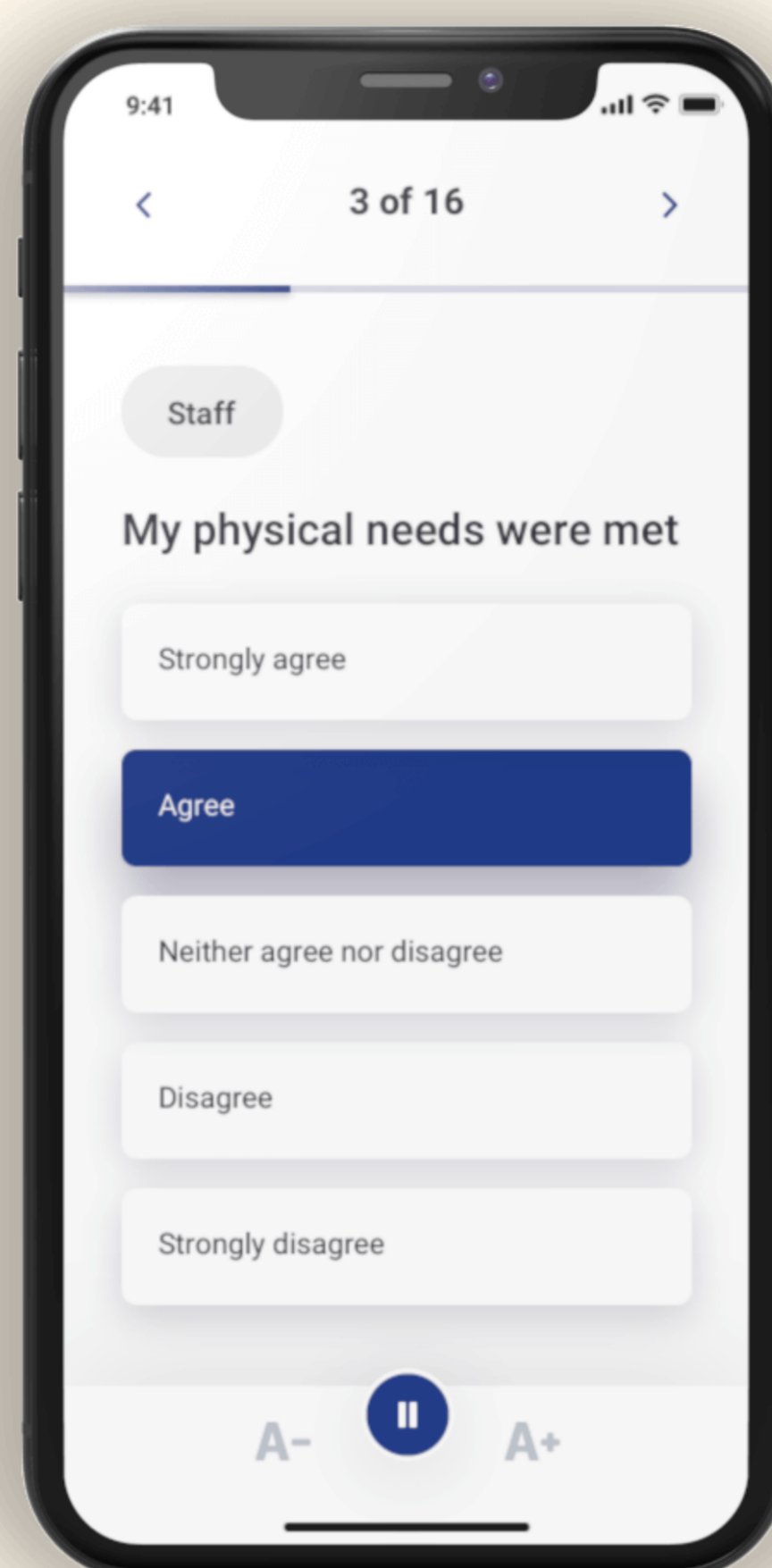


Figure 2. Patient Survey

A digital platform was developed to support the delivery of more proactive, personalised and value-based healthcare. By enabling timely exchange of health outcomes, experiences and educational information, Zedoc provides care teams and patients with real-time, actionable information to improve health outcomes<sup>2</sup>.

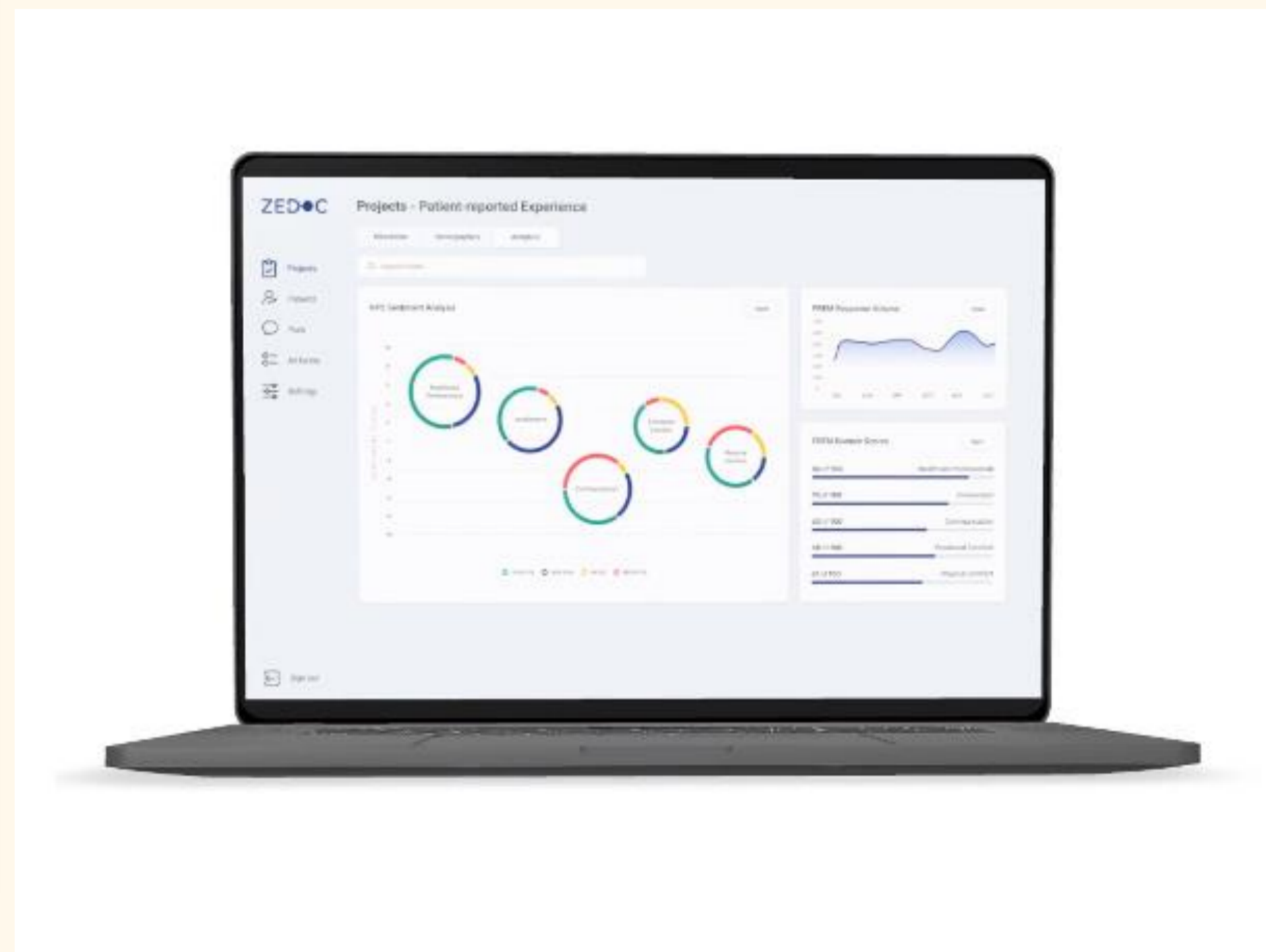
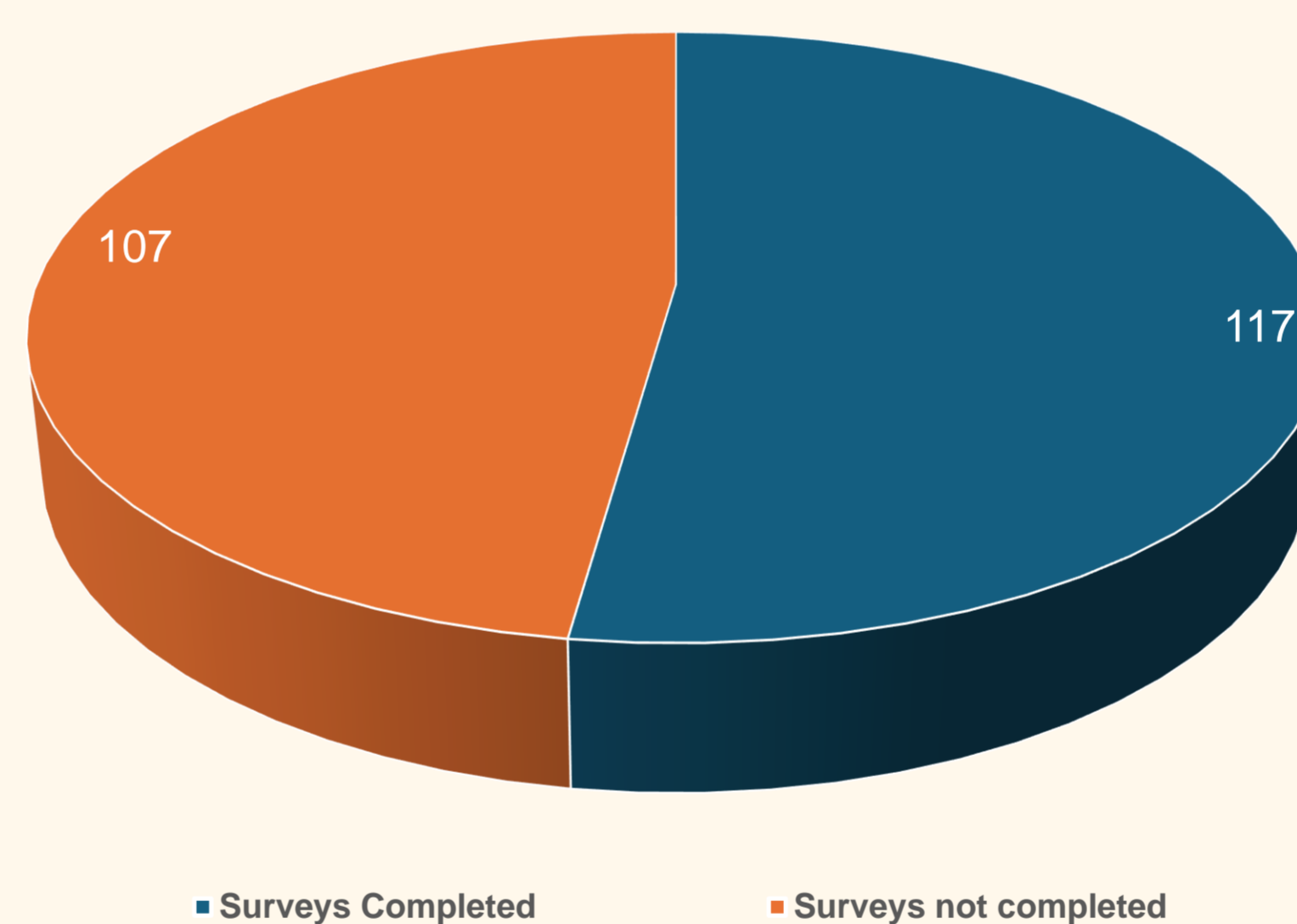


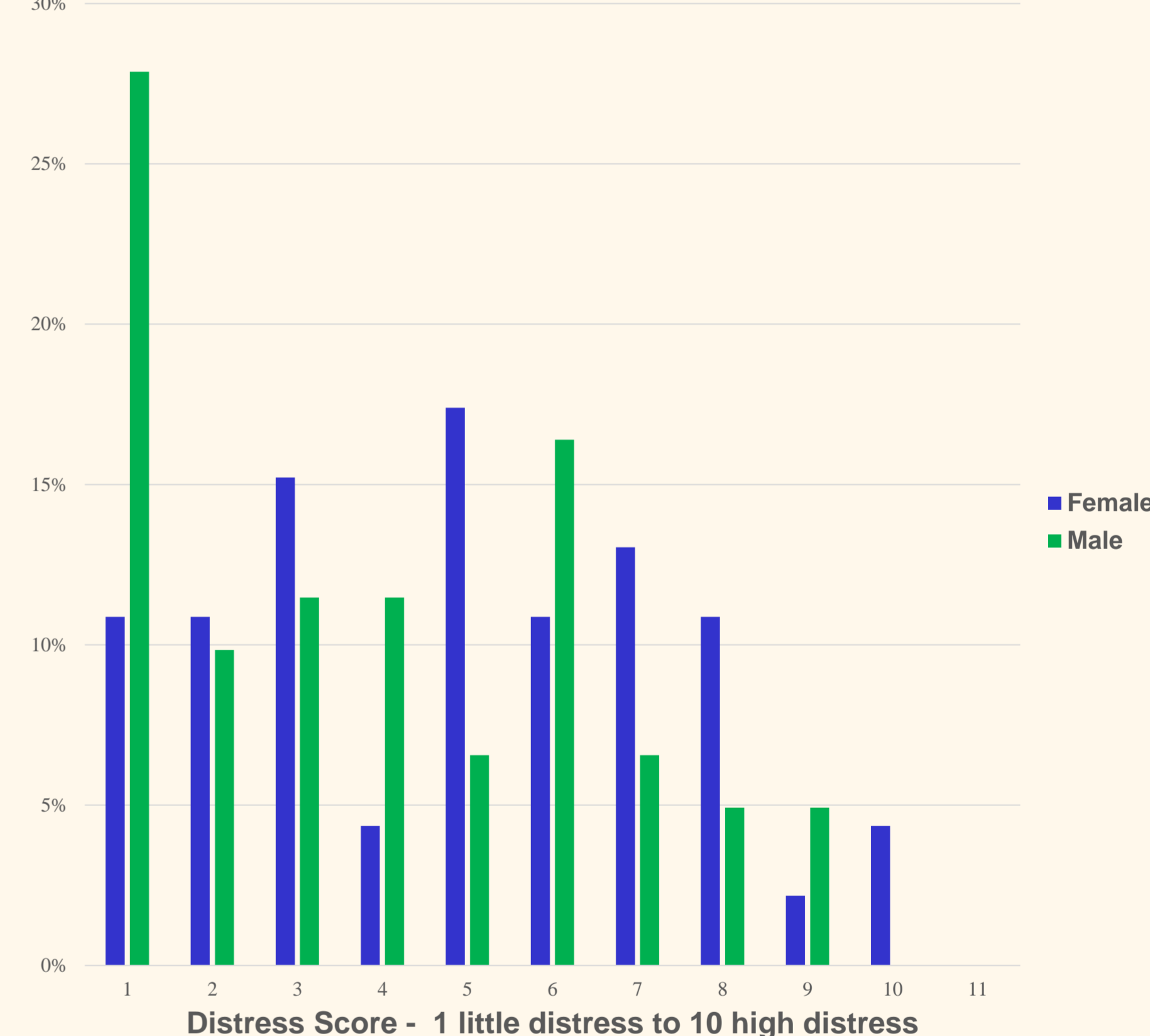
Figure 3. Zedoc administration nurses view

## Results

Surveys Completed vs Surveys not Completed  
n=224 (Jan 2024-May 2024)



How Distressed are our Patients? (n = 107)



## Feedback from nursing staff

*"We actually captured the issues the patients felt they had rather than what we interpreted."*  
Radiation Oncology Nurse

*"I feel that more reliable data is obtained when patients can complete the screening tool at home before they come in, rather than being asked the questions by nursing staff."*  
Radiation Oncology Nurse

*"Having the data before patients arrive and adding this to the patient's nursing assessment allowed nursing staff to flag those who indicated they needed assistance or scored highly for distress. Nursing staff could then plan for discussions and anticipate referrals required and provide a shared decision-making approach."*  
Radiation Oncology Nurse

## Conclusion

Capturing distress screening before the patients planning scan increases patient flow through the area. The patients are less distressed when they get to their first appointment because their concerns have already been addressed.

## Acknowledgments

Thank you to all the patients involved in this pilot program. A big thank you to all the nursing staff in Radiation Oncology for your time and dedication in improving patient outcomes. Thank you to Marc and his team from the Commission on Excellence and Innovation in Health for working with us on this project.

National Comprehensive Cancer Network®  
**NCCN Guidelines Version 1.2024**  
Distress Management

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**NCCN DISTRESS THERMOMETER**  
Distress is an unpleasant experience of a mental, physical, social, or spiritual nature. It can affect the way you think, feel, or act. Distress may make it harder to cope with having cancer, its symptoms, or its treatment.  
Instructions: Please circle the number (0-10) that best describes how much distress you have been experiencing in the past week, including today.

Extreme distress 10  
9  
8  
7  
6  
5  
4  
3  
2  
1  
0  
No distress

**PROBLEM LIST**  
Have you had concerns about any of the items below in the past week, including today? (Mark all that apply)

<b>Physical Concerns</b>	<b>Practical Concerns</b>
<input type="checkbox"/> Pain	<input type="checkbox"/> Taking care of myself
<input type="checkbox"/> Sleep	<input type="checkbox"/> Taking care of others
<input type="checkbox"/> Fatigue	<input type="checkbox"/> Work
<input type="checkbox"/> Tobacco use	<input type="checkbox"/> School
<input type="checkbox"/> Substance use	<input type="checkbox"/> Housing
<input type="checkbox"/> Memory or concentration	<input type="checkbox"/> Finances
<input type="checkbox"/> Sexual health	<input type="checkbox"/> Insurance
<input type="checkbox"/> Changes in eating	<input type="checkbox"/> Transportation
<input type="checkbox"/> Loss or change of physical abilities	<input type="checkbox"/> Child care
<b>Emotional Concerns</b>	<input type="checkbox"/> Having enough food
<input type="checkbox"/> Worry or anxiety	<input type="checkbox"/> Access to medicine
<input type="checkbox"/> Sadness or depression	<input type="checkbox"/> Treatment decisions
<input type="checkbox"/> Loss of interest or enjoyment	<b>Spiritual or Religious Concerns</b>
<input type="checkbox"/> Grief or loss	<input type="checkbox"/> Sense of meaning or purpose
<input type="checkbox"/> Fear	<input type="checkbox"/> Changes in faith or beliefs
<input type="checkbox"/> Loneliness	<input type="checkbox"/> Death, dying, or afterlife
<input type="checkbox"/> Anger	<input type="checkbox"/> Conflict between beliefs and cancer treatments
<input type="checkbox"/> Changes in appearance	<input type="checkbox"/> Relationship with the sacred
<input type="checkbox"/> Feelings of worthlessness or being a burden	<input type="checkbox"/> Ritual or dietary needs
<b>Social Concerns</b>	<b>Other Concerns:</b>
<input type="checkbox"/> Relationship with spouse or partner	_____
<input type="checkbox"/> Relationship with children	_____
<input type="checkbox"/> Relationship with family members	_____
<input type="checkbox"/> Relationship with friends or coworkers	_____
<input type="checkbox"/> Communication with health care team	_____
<input type="checkbox"/> Ability to have children	_____
<input type="checkbox"/> Prejudice or discrimination	_____

Note: All recommendations are category 2A unless otherwise indicated.  
Clinical Trials: NCCN believes that the best management of any patient with cancer is in a clinical trial. Participation in clinical trials is especially encouraged.

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DIS-A

Figure 1 Distress screening before using a digital platform. This information was then documented in the electronic case notes<sup>1</sup>.

## References

- <https://www.nccn.org/global/what-we-do/nccn-framework-for-resource-stratification-of-nccn-guidelines>
- <https://theclinician.com/>