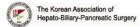


MARCH 25-27, 2021 GRAND WALKERHILL HOTEL, SEOUL, KOREA

HBP SURGERY WEEK 2021 **VIRTUAL** 

& The 54<sup>th</sup> Annual Congress of the Korean Association of HBP Surgery



## NURSE SY 2-3

## Experience of the Cancer Coordinator as an Advanced practice nurse in Gangnam Severance Hospital

## NOMI PARK

Pnacreatobiliary cancer Center, Yonsei University Gangnam Severance Hospital, Korea

**Lecture** : The tasks and names of Advanced Nurse Practice at Gangnam Severance Hospital are classified into 3 categories as Cancer Coordinator, NP (Nurse Practitioner) and PA (Physician Assistant).

If the Surgical oncology nurse is applied to each of the above nurse practitioners, 1) there is a PA (Physician Assistant) that aids cancer patients in their surgery, 2) the NP is in the inpatient treatment before and after surgery, and Management and prevention of complications, and 3) Cancer coordinator who is involved in cancer therapy, counseling, and telephone counseling at any time after initial treatment and after surgical treatment.

The NP administers all surgical patients, including benign disease patients, with cancer patients. On the other hand, the cancer coordinator manages cancer patients in all the centers, not the patients belonging to the department. For example, the pancreatic cancer center is linked to pancreatic medicine, pancreatic surgery, oncology, and radiation oncology, and the cancer coordinator works. Cancer coordinators do not belong to the department, so they can work freely from the department and work within the scope of work set by the Center.

In cancer patients, the continuity of treatment and multidisciplinary treatment make the change and acceptance of changed physician burdensome and difficult to understand. In this part, the cancer coordinator naturally connects through counseling and education. In addition, the patient can receive general management such as counseling, education, regardless of any treatment related to the primary cancer in the present invention. It also serves as a bridge between the professor and the patient and provides integrated cancer patient management.

Although it plays a role in each of the needs of Advanced Nurse Practice and institutional diversity, it is a reality that the legitimacy of medical act and the development of professional nursing have not progressed because there is no guarantee in realistic medical law. We must protect the health of the nation and the people more safely by legally guaranteeing the name, scope and corresponding compensation of the Advanced practice nurses necessary for the change of medical environment and population.