

Well-Timed Nudges Help Care Providers to Honor the Wishes of Patients with Cancer

Small, targeted prompts can significantly increase the number of serious illness conversations that take place, finds research in JNCCN.

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New research in the June 2026 issue of [JNCCN—Journal of the National Comprehensive Cancer Network](#) finds that small, targeted prompts delivered to both patients and providers at the right moment can significantly increase the number of serious illness conversations that take place.

The randomized controlled trial out of Dana-Farber Cancer Institute tested two simple nudges designed to encourage important conversations between patients with cancer and their oncologists about goals and preferences for care. One nudge consisted of a reminder email to clinicians prior to patients' appointments, and another was a letter and questionnaire mailed to patients. When these nudges were combined, these conversations occurred significantly more often.

"Past research has shown these conversations improve patient anxiety and quality of life and help them get care that matches their goals, especially near the end of life," said one of the lead researchers, Christopher R. Manz, MD, MSHP, Dana-Farber Cancer Institute. "Having the conversation with a provider they trust, and documenting it somewhere accessible, is what allows the rest of the team to honor the patients' wishes, particularly if the patient is ill and unable to advocate for themselves."

The clinical trial was conducted across four cohorts totaling 1,051 patients and 160 clinicians at two academic cancer center sites between December 4, 2022, and September 30, 2024. Adult patients with poor prognosis were randomized to either receive one of the two types of nudges, both nudges, or neither. Patients in the combined nudge arm had 79% higher odds of having a serious illness conversation documented as advance care planning within 60 days over the no-nudge group. The single-nudge groups also showed a modest increase, though not statistically significant.

The researchers deliberately limited the nudges to only patients starting a treatment that is

associated with a poor prognosis and capped them at three visits.

“The key is precision. Nudging clinicians at the right time for the right patient rather than blasting reminders for every patient is how we turn this into a helpful quality improvement initiative rather than a burdensome email. Burnout is real and alert fatigue undermines the goal of these nudges: when they feel like noise, they get ignored,” noted co-lead author Cody E. Cotner, MD, Harvard Medical School. “When a patient is prepared to have these conversations through initial outreach and walks into the office already thinking about what matters most to them, the clinician has a more receptive partner across the desk, and the conversation is easier to start and goes deeper.”

“This study offers a practical dose of hope for patients with advanced cancer and the clinicians caring for them,” commented Elise Carey, MD, a palliative care specialist at Mayo Clinic Comprehensive Cancer Center, who was not involved with this research. “It shows that a relatively simple approach—identifying high-risk patients through existing oncology treatment pathways and sending simple reminders to both patients and clinicians—can meaningfully increase serious illness communication in routine cancer care.”

Dr. Carey, a Member of the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines) Panel for [Palliative Care](#), continued: “What is especially striking is that the benefit was driven largely by the clinician nudge, suggesting that small, well-timed supports can help clinicians make space for these essential conversations even in a busy clinical practice. Overall, this study offers a realistic, scalable step toward bringing serious illness conversations into oncology care earlier and more reliably.”

To read the entire study “[Pathways to Advance Targeted and Helpful Serious Illness Conversations \(PATH-SIC\): A Randomized Clinical Trial](#),” visit JNCCN.org.

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