INTRODUCTION

- Complex requirements and ever-changing guidelines for the management of stage III/IV non-small cell lung cancer (NSCLC) in a fragmented U.S. healthcare system can impede consistent access to optimal care for patients with NSCLC
- Optimization of care coordination, screening, diagnosis, biomarker testing, staging, and treatment planning, along with refinement of the multidisciplinary team (MDT) approach, offers significant potential for improving the quality of NSCLC care and adherence to guideline-recommended protocols
- Multidisciplinary care in lung cancer is perceived as patient-centric and efficient, improving timelines and access to high-quality care
- The Association of Community Cancer Centers (ACCC) has designed a quality metric for ideal NSCLC care, which has guided the development of a national survey to improve understanding of diagnosis and management of patients with stage III/IV NSCLC across different U.S.-based practice settings and to design and execute process improvement plans to address the identified barriers

OBJECTIVES

- Primary objectives of the survey among U.S. healthcare providers:
  - Evaluation of the understanding of evolving standards for diagnosis and management of patients with stage III/IV NSCLC
  - Adoption of guideline-recommended protocols for screening, diagnosis, and treatment
  - Investigation of coordination and communication within the multidisciplinary specialties involved in NSCLC management
  - Identification of barriers to optimal care

- The goal of the survey was to identify practice areas and patterns that would benefit from the delivery of appropriate resources and application of process improvement initiatives, thereby ensuring the highest quality of care for patients with advanced NSCLC

METHODS

- The expert steering committee guiding the development of the survey included medical oncologists, a thoracic surgeon, a radiation oncologist, a pathologist, a pulmonologist, a nurse navigator, and representatives from patient advocacy and professional associations
- The survey was conducted over 4 months between January 24, 2019, and April 25, 2019.
- The methodology is detailed in Figure 1

Figure 1: Survey methodology

CONCLUSIONS

- This survey provides an overview of the barriers to quality care for patients with stage III/IV NSCLC, including a lack of consistent use of MDTs, optimized diagnosis using biomarker testing, and timely, complete staging of patients, in U.S. cancer programs
- Multiple opportunities exist to improve the quality and delivery of care for patients with stage III/IV NSCLC by enhancing screening, diagnosis, treatment, and care coordination for better outcomes in this patient population

REFERENCES


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DISCLOSURES

For details on author disclosures, please scan the QR code.

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