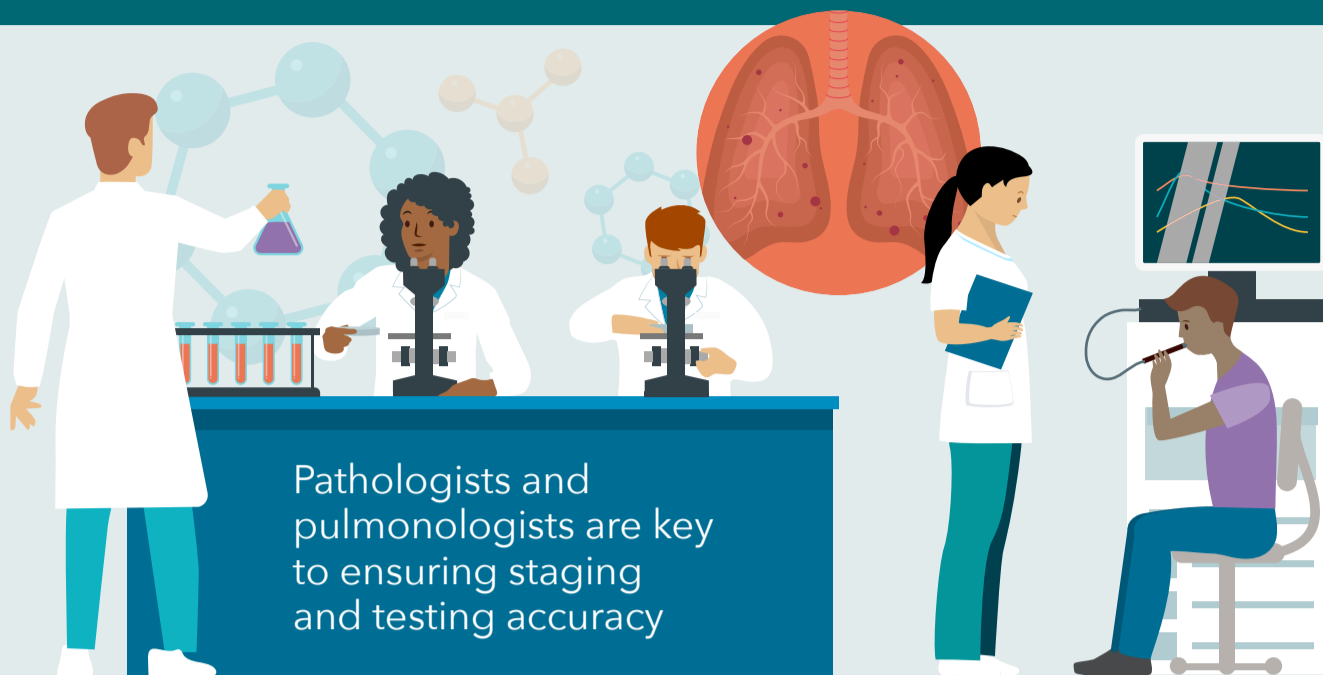


Staging and Testing for Stage III/IV Non-Small Cell Lung Cancer: Perspectives from Pathologists and Pulmonologists in US cancer care programs

Accurate staging and testing using standard guidelines is essential for effectively managing advanced non-small cell lung cancer (NSCLC) cases



Pathologists and pulmonologists are key to ensuring staging and testing accuracy



What is the expertise level of pathologists and pulmonologists in US cancer care programs? What barriers to care delivery do they face?

National Quality Survey

- Administered January to April 2019; web-based
- Multidisciplinary team members for cancer care delivery

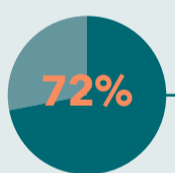
Total respondents **639**

44 US states
160 Unique cancer care programs

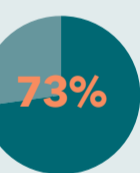
114 Pathologists

57 Pulmonologists

Familiar with the latest staging system

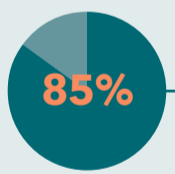


Pathologists



Pulmonologists

Familiar with the latest molecular testing guidelines



A significantly higher proportion of pathologists, compared with other specialists, were unfamiliar with the science behind

- Liquid biopsy testing (47.7% pathologists vs 35.4% other specialists)
- Tumor mutational burden (51.4% pathologists vs 39.1% other specialists)



The presence of a pathologist at the patient's bedside improved biopsy sampling adequacy

Barriers to care delivery

- Poor patient referral for screening
- Poor appointment scheduling
- Patient refusal to undergo tests
- Missed appointments



Improving pathologist and pulmonologist know-how on diagnostic modalities and alleviating barriers to care delivery can optimize care for stage III/IV NSCLC patients

acc-cancer.org/NSCLC-testing