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Background:
While clinical guidelines for non-small cell lung cancer (NSCLC) provide recommendations on specific individual components of care and advocate multidisciplinary collaboration, guidance on multidisciplinary care spanning the complete patient journey is lacking. Quality-focused recommendations for the multidisciplinary team, along with selected clinical criteria for ideal NSCLC care, were compiled, and a new set of metrics encompassing the entire care continuum was proposed. These metrics were used to set a new benchmark for ideal NSCLC care through the Association of Community Cancer Centers’ (ACCC) national quality care initiative for patients with advanced (stage III/IV) NSCLC.

Methods:
The ACCC convened an expert steering committee of multidisciplinary specialists and representation from patient advocacy, who identified and compiled evidence-based recommendations via a systematic search of clinical and quality care guidelines and peer-reviewed journals. Ideal quality recommendations were organized within key care areas of the patient journey: care coordination, diagnosis, and treatment.

Results:
A total of 32 recommendations were included. Of these, 9 were key unpublished recommendations on NSCLC care, including diagnosis and biomarker testing, treatment planning, care coordination, and patient education (Table).
Conclusions:
These recommendations define the criteria for ideal NSCLC care and serve as a valuable resource to guide multidisciplinary practice and quality improvement initiatives.

Key unpublished quality recommendations for ideal stage III/IV NSCLC care.

<table>
<thead>
<tr>
<th>Diagnosis and biomarker testing</th>
<th>Treatment planning</th>
<th>Care coordination</th>
<th>Patient education</th>
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<tbody>
<tr>
<td>Multidisciplinary evaluation of suspicious findings</td>
<td>Incorporate invasive staging procedures for increased sensitivity and specificity</td>
<td>Access to MDT care navigator for information on financial aspects of treatment</td>
<td>Educate patients on all aspects of NSCLC management, including diagnosis (staging) and treatment</td>
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<tr>
<td>MDT coordination for efficient biopsy collection</td>
<td>Biomarker test results to inform all treatment-related decisions</td>
<td>Standardize patient participation in shared decision-making</td>
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<td>Use of broad molecular profiling to identify actionable and rare mutations</td>
<td>Repeat biopsy and/or plasma testing in the setting of insufficient tissue*</td>
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</table>

* This is now reflected in the NCCN Guidelines for NSCLC (Version 2.2020). MDT, multidisciplinary team; NCCN, National Comprehensive Cancer Network; NSCLC, non-small cell lung cancer

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