What Are the Barriers to Efficient Multidisciplinary **Treatment of Stage III/IV Non-Small** Cell Lung Cancer in the US?



Multidisciplinary team (MDT) care is patient-centric and increases the quality of cancer treatment

However, insufficient characterization of MDT practice patterns is a barrier in the optimal treatment of non-small cell lung cancer (NSCLC)



What are the barriers to effective MDT implementation and how can MDTs be optimized for NSCLC treatment?

Double-blind web-based survey

Insights on care delivery for patients with stage **III/IV NSCLC**

160 unique cancer programs across 44 US states



of respondents' cancer programs did not have a thoracic multidisciplinary clinic

HOSPITAL





Nurse navigators and radiation oncologists were significantly more likely to engage in shared decision-making



Frequency of tumor board meetings Time to complete disease staging





The most challenging barriers to MDT treatment of NSCLC



Care coordination Treatment costs



Diagnosis Insufficient biopsy material



Screening Lack of community awareness of screening programs



Multiple opportunities exist to improve MDT care delivery and quality for patients with stage III/IV NSCLC

accc-cancer.org/nsclc-quality-care

