Supplemental online content for:

**Tumor Board Conferences for Multidisciplinary Skin Cancer Management: A Survey of US Cancer Centers**

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eAppendix 1: Online Survey Regarding Skin Cancer Tumor Board Conferences
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* 1. Please indicate the name of your institution: 

* 2. Please indicate your specialty: 

3. If you have more than one skin cancer tumor board at your institution please indicate which tumor board you are answering for: 

* 4. Which diagnoses are reviewed? Choose all that apply. 

- Melanoma
- Cutaneous squamous cell carcinoma
- Basal cell carcinoma
- Merkel cell carcinoma
- Cutaneous adnexal carcinoma
- Dermatofibrosarcoma protuberans
- Cutaneous lymphoma

Tumor Board Attendees and Format

* 5. On average, how many attending staff physicians take part in your skin cancer tumor board conference? 

- 1-5
- 6-10
- 11-15
- 16-20
- 21-30
- >30

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eAppendix 1. Online Survey Regarding Skin Cancer Tumor Board Conferences (cont)

* 6. Who attends the meeting? Choose all that apply.

- [ ] Dermatology
- [ ] Dermatologic surgery
- [ ] Pathology
- [ ] Dermatopathology
- [ ] Radiation oncology
- [ ] Radiology
- [ ] Surgical oncology
- [ ] Head and neck surgery
- [ ] Otolaryngology
- [ ] Plastic surgery
- [ ] Medical oncology
- [ ] Other (please specify)

- [ ] Psychiatry and/or psychology
- [ ] Prosthetics
- [ ] Dental oncology
- [ ] Fellows, residents, students
- [ ] Nursing
- [ ] Administration
- [ ] Social work
- [ ] Insurance liaison
- [ ] Clinical trials team
- [ ] Laboratory scientist or research
- [ ] Genetic counselor

* 7. Are there designated faculty leaders for the meeting?

- [ ] No
- [ ] Yes, (please specify specialty/specialties):

* 8. Is there a designated coordinator or secretary who provides administrative support for the meeting?

- [ ] No
- [ ] Yes

* 9. For how long has your tumor board been established?

- [ ] <1 year
- [ ] 7-10 years
- [ ] 1-3 years
- [ ] 10-15 years
- [ ] 4-6 years
- [ ] >15 years

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eAppendix 1. Online Survey Regarding Skin Cancer Tumor Board Conferences (cont)

* 10. How frequently does your tumor board meet?

- [ ] Weekly
- [ ] Twice per month
- [ ] Monthly
- [ ] As needed
- [ ] Other (please specify)

* 11. What is the average duration of each meeting?

- [ ] 30 minutes
- [ ] 60 minutes
- [ ] 90 minutes
- [ ] 120 minutes

* 12. What is the average number of tumor board cases discussed per meeting?

- [ ] 1-5
- [ ] 6-10
- [ ] 11-15
- [ ] 16-20
- [ ] 20+

* 13. Do you use video conferencing for those who cannot physically attend the meeting?

- [ ] No
- [ ] Yes

* 14. How are resources for your tumor board conference financially supported? (i.e., biostatistics, database management, administrative support) Choose all that apply.

- [ ] By the institution
- [ ] By philanthropic donor(s)
- [ ] By individual department(s): Please indicate which department(s)

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**eAppendix 1. Online Survey Regarding Skin Cancer Tumor Board Conferences (cont)**

**Tumor Board Function**

* 15. Which types of tumor board cases are discussed? Choose all that apply.

- [ ] Not yet diagnosed or indeterminate diagnosis
- [ ] Pre-surgical
- [ ] Post-surgical
- [ ] Challenging cases
- [ ] Recurrent disease
- [ ] Follow-up
- [ ] Cases for interest
- [ ] Other (please specify)

* 16. What kind of information is presented for each tumor board case? Choose all that apply.

- [ ] Clinical history
- [ ] Clinical photos
- [ ] Radiographic imaging
- [ ] Histopathology slides
- [ ] Molecular pathology
- [ ] Genetic testing
- [ ] Other (please specify)

* 17. Is radiographic imaging reviewed by a radiologist at the meeting?*

- [ ] No
- [ ] Yes
- [ ] Sometimes

* 18. Is histopathology reviewed by a dermatopathologist at the meeting?*

- [ ] No
- [ ] Yes
- [ ] Sometimes

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**eAppendix 1. Online Survey Regarding Skin Cancer Tumor Board Conferences (cont)**

* 19. Are research protocols discussed prior to institutional review board submission at your meeting?
   - [ ] No
   - [ ] Yes

* 20. Are there research talks or guest speakers at your meeting?
   - [ ] No
   - [ ] Yes

* 21. What kind of follow-up action, if any, takes place after the meeting? Choose all that apply.
   - [ ] Minutes are recorded for each meeting
   - [ ] Tumor board notes are recorded in patient’s medical record
   - [ ] Physician contact with patient
   - [ ] Nursing, PA, or ancillary staff contact with patient
   - [ ] Further discussion among physicians treating the patient
   - [ ] All cases are entered in a database
   - [ ] No further contact from tumor board
   - [ ] Other (please specify)

* 22. Does your skin cancer program manage a database of skin cancer cases?
   - [ ] No
   - [ ] Yes

**Tumor Board Impact**

* 23. What kind of impact has your tumor board conference had on patient care?
   - [ ] No impact
   - [ ] Minimal impact
   - [ ] Moderate impact
   - [ ] Significant impact

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eAppendix 1. Online Survey Regarding Skin Cancer Tumor Board Conferences (cont)

* 24. In your experience, what is the value of tumor board conference? Choose all that apply.

- Enhanced communication among physicians
- Continuing medical education for physicians
- Encouraged use of most recent guidelines for management
- More treatment options for patients
- Reduced number of visits for patients
- Opportunity for physicians, nurses, allied health professionals to discuss cases together
- Drives development of new research protocols
- Increased enrollment of patients in clinical trials
- None of the above
- Other (please specify)

* 25. What barriers have you faced in organizing or setting up your tumor board? Choose all that apply.

- Finding a common date and time
- Lack of time to prepare for the meeting
- Lack of administrative support in organizing the meeting
- High caseload
- Lack of specialties who are available or interested in attending
- Lack of financial support
- Finding a physician to take on leadership role
- None of the above
- Other (please specify)

* 26. What would you improve about your tumor board?
