

Supplemental online content for:

## Improving Interdisciplinary Communication: Barriers and Facilitators for Implementation of Standardized Structured Reporting in Oncology

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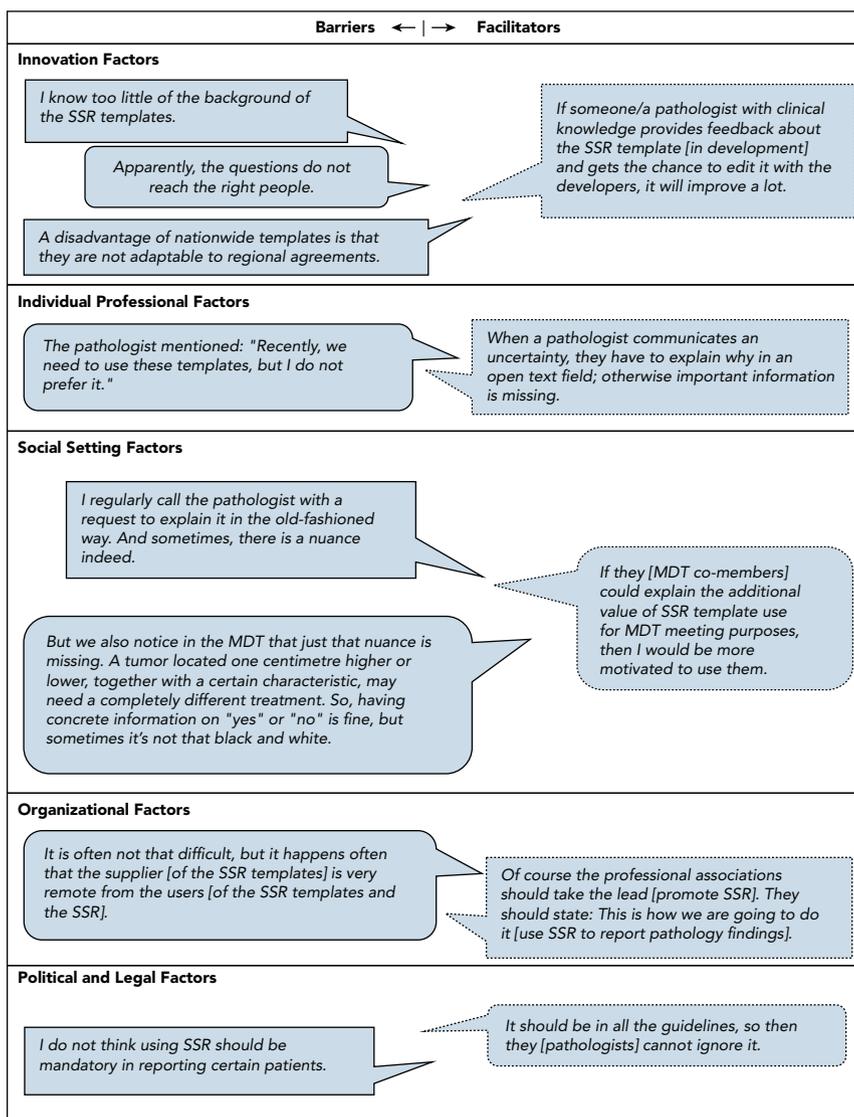
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**eFigure 1:** MDTM Illustrative Quotes About Barriers and Facilitators in SSR

**eTable 1:** Information on the PALGA Foundation and SSR Templates

**eTable 2:** Overview of the Distribution of the eSurvey

**eTable 3:** Differences in Agreement With Barriers and Facilitators of SSR Perceived by Pathologists Versus Other MDTMs



**eFigure 1.** MDTM answers to theses about the innovation factors and individual professional factors of SSR. Abbreviations: MDT, multidisciplinary team meeting; MDTM, multidisciplinary team member; SSR, standardized structured reporting.

<b>eTable 1. Information on the PALGA Foundation and SSR Templates</b>	
<b>PALGA Foundation</b>	<b>SSR Templates</b>
<ul style="list-style-type: none"> <li>• Dutch network and registry of histopathology and cytopathology</li> <li>• Established in 1971</li> <li>• Achieved nationwide coverage by 1991</li> <li>• Currently 42 pathology laboratories are connected</li> <li>• Manages 2 databases containing all pathology reports in the Netherlands. Used for support of patient care, evaluation, monitoring of the population screenings programs, and scientific research purposes.<sup>19</sup></li> <li>• Has a designated link with each laboratory: the PALGA liaison</li> </ul>	<ul style="list-style-type: none"> <li>• Enable SSR in pathology</li> <li>• Comprise the highest reporting level (level 6 in the Spectrum of Cancer Pathology Reporting)<sup>13</sup></li> <li>• Consist of a minimal mandatory data set and additional nonmandatory items, both based on national and international guidelines.<sup>21-23</sup></li> <li>• Automatically generate pathology reports <ul style="list-style-type: none"> <li>➤ Contain the clinical information, macroscopy and microscopy, and an automatically generated conclusion</li> <li>➤ Additional information can be added manually</li> <li>➤ Automatically generated conclusion can be turned off and a manual conclusion can be added</li> </ul> </li> </ul>

Abbreviations: HIS, hospital-information system; MDT, multidisciplinary team; SSR, standardized structured reporting.

<b>eTable 2. Overview of the Distribution of the eSurvey</b>				
<b>Discipline</b>	<b>Permission</b>	<b>Target Group</b>	<b>Type of Channel</b>	<b>Frequency</b>
<b>Strategy 1: Distribution by IKNL</b>				
Gynecology	Regional tumor board chairs	Oncologic gynecologic tumor board members of IKNL	Email	2
Gastroenterology	Regional tumor board chairs	Oncologic gastrointestinal tumor board members of IKNL	Email	2
Urology	Not possible due to lack of regional tumor board chairs	—	—	—
<b>Strategy 2: Distribution by medical associations</b>				
Pathology	Dutch Society of Pathology	Pathologists and pathology residents	eNewsletter	3
Radiotherapy	Dutch Society of Radiotherapy	Radiotherapists	eNewsletter	3
Surgery	Dutch Society of Gastrointestinal Surgeons	Gastrointestinal surgeons	eNewsletter	1
Nuclear medicine	<i>Dutch Journal of Nuclear Medicine</i>	Nuclear medicine	eNewsletter	1
Radiology	Dutch Society of Radiology	Radiologists	Email	1
Urology	Dutch Society of Urology	Oncologic urologists	Email	2
Gynecology	Dutch Society of Gynecology	Oncologic gynecologists	Email	1
Pathology	Dutch Society of Pathology residents	Pathology residents	Email	2
Oncology-related disciplines	Dutch Society of Nurses and Nurse Practitioners	Nurses working in oncologic care	Email	1
Colorectal cancer-related disciplines	Dutch Colorectal Cancer Group	Colorectal cancer related disciplines	Email	1
All oncology-related disciplines	SONCOS	All oncology-related MDTMs	Website	1
Gastroenterology	Dutch Society of Gastroenterologists	Oncologic gastroenterologists	Website	1
Nuclear medicine	Dutch Society of Nuclear Medicine	Nuclear medicine	Website	1
Nuclear medicine	<i>Dutch Journal of Nuclear Medicine</i>	Nuclear medicine	Website	1
<b>Strategy 3: Distribution by PALGA Foundation</b>				
Pathology	PALGA Foundation	Pathologists	Website	1
			LinkedIn Page	1
<b>Strategy 4: Distribution by study advisors</b>				
All oncology-related disciplines	Not applicable	All oncology-related MDTMs	eNewsletter	1
Pathology	Chair of Dutch Society of Pathology	Pathologists and pathology residents	Email	1

Abbreviations: IKNL, Netherlands Comprehensive Cancer Organization; MDTM, Multidisciplinary team member.

<b>eTable 3. Differences in Agreement With Barriers and Facilitators of SSR Perceived by Pathologists Versus Other MDTMs</b>			
<b>Perceived Influencing Factors Per Domain</b>	<b>Pathologists<sup>a</sup> n (%)</b>	<b>Other MDTMs<sup>b</sup> n (%)</b>	<b>P Value</b>
<b>1. Innovation factors</b>			
I am not aware of the existence of the national SSR template working group	4 (7)	76 (49)	.000 <sup>c</sup>
Reading negative findings in pathology SSR, such as “no micrometastases present,” is a problem	15 (28)	11 (10)	.003
Reading pathology SSR with items that do not matter to the patient's choice of treatment is a problem	18 (33)	17 (15)	.007
<b>2. Individual professional factors</b>			
I am not familiar with the additional value of SSR based pathology reports	3 (5)	43 (28)	.000 <sup>c</sup>
<b>3. Social setting factors</b>			
I am not kept sufficiently informed about new SSR templates and updates by the pathologist	9 (2)	50 (55)	.001 <sup>c</sup>
Because of the conclusions in the pathology SSR, you start thinking in black and white during the MDT meeting and that is a problem	25 (46)	28 (29)	.035
In pathology SSR, important information necessary for a well-considered treatment policy is often lacking	5 (9)	23 (24)	.027
<b>4. Organizational factors</b>			
Using or not using the SSR templates should become a mandatory item of the audit criteria of the national pathology organization	27 (49)	95 (77)	.000 <sup>c</sup>
Using or not using the SSR templates should become a mandatory item of the criteria of quality of care institutes	26 (47)	95 (77)	.000 <sup>c</sup>
Medical associations should promote the use of SSR more actively	32 (58)	91 (76)	.014
<b>5. Political and legal factors</b>			
Use of the SSR templates should be mandatory in all oncology guidelines, just as in the guideline for colorectal carcinoma	25 (45)	81 (68)	.004

Abbreviations: MDT, multidisciplinary team; MDTMs, multidisciplinary team members; SSR, standardized structured reporting.

<sup>a</sup>Not all questions were answered by all survey participants. Therefore, the results do not always relate to the total study population: pathologists (n=57) and other MDTMs (n=154).

<sup>b</sup>Medical oncologists, radiologists, radiation oncologists, gynecologists, gastroenterologic surgeons, gastroenterologists, urologists, nuclear medicine physicians, and nurse practitioners.

<sup>c</sup>Significant after Bonferroni correction for multiple testing (P=.001).