# INTRODUCTION FOR RESPONDENTS

**February 25, 2019**

**Medical Director Discussion Guide**

**National Cancer Institute Environmental Scan**

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**DISCUSSION GUIDE**

Thank you very much for agreeing to participate in this discussion. My name is \_\_\_\_ and I work for a third-party marketing company called Heartbeat. We are conducting an interview on behalf of the National Cancer Institute (NCI) to better understand the available types of cancer-related information as well as the most helpful ways of sharing this information.

The focus of today’s call is to understand the type of cancer information you look for in the course of your work, where you look to find it, and how you access it.

Before we start, can you please confirm that you received the image that was sent to you prior to this call? Secondly, how do you like to be referred to? As Dr. \_\_\_\_?

**Here are some things to know before we get started:**

* This interview will last about 30-45 minutes.
* Participation is voluntary and there are no penalties for not participating or withdrawing at any time. Refusal to participate will not affect your benefits in any way.
* The information collected will be kept private to the extent provided by law. Names and other identifiers will not appear in any report. Information provided will be combined for all participants and reported as summaries.
* We will be recording audio from the interview. Only Heartbeat and NCI staff who are associated with this project will hear the recording, and we will not include your name or personal information in the recording. The recordings are a memory aid for me so I can go back later to recall what happened during each interview. Are you okay if we record this conversation? *(If yes, start recording. If no, do not record.)*
* Some people from my team and from the NCI may be listening in remotely to take notes and record your comments. Your honest and candid feedback will be very valuable, so even though people may be listening in, please speak openly about your opinions and experiences. There are no wrong responses to the questions I’ll be asking.
* If you do not want to answer any of my questions, you do not have to. Please just say so, and we will move on. And of course, you can stop at any time.

Do you have any questions before we begin?

**Warm Up Question**

Can you please tell us a little about your institution?

What is your role in defining protocols for and delivering cancer treatment?

* Probe: Are you purely administrative or do you also see patients?

Probe: How much of your time, if any, is spent seeing patients?

**Seeking Content/Information Questions**

1. What is your process for deciding what information is recommended for physicians in your practice?
	* Probe: sources, source inclusion criteria, who is involved, type of information sought, primary motivators, update frequency
	* Probe: methods of dissemination of institutional/practice recommendations
2. What type of cancer information do you typically look for to augment your/their own knowledge?
	* Probe: disease education, treatment information, clinical trial data, new treatments (Immuno-Oncology, CAR-T therapy, etc.), cutting-edge technology (AI, Machine Learning), when caring for patients, guidelines such as the National Comprehensive Cancer Network (NCCN) or the recommendations from the US Preventative Services Task Force (USPSTF).
	* Probe: Which resources, if any, are you required to use by your institution?
	* Probe: Why?
3. What trusted sources (websites, books, databases, conferences etc.) do you go to for this information?
	* Probe: Specifically, on digital sources, what kind of devices do you use to access cancer information (e.g., smart phones, desktop, tablet, etc.)?
	* Probe: What makes these sources “trusted”?

**(Patient Focused) Seeking Content/Information Questions**

1. In your experience, at what point do patients or caregivers seek or require educational or support information?
	* Probe: What exactly are they seeking?
	* Probe: How does the information patients seek differ from what caregivers seek?
2. How are you involved in staff training? (i.e. CME, new drugs and devices).
	* Probe: How do you support your staff in helping them to provide information to their patients?
	* Probe: Describe when you look up this information for your staff – how do you search for it? Do you have a “go to” resource you use or is it more on a “case by case” basis?
3. Where do you see the biggest gaps in terms of educational or support information for patients and caregivers?

**Cancer.gov and PDQ Familiarity**

*Cancer.gov*

1. Are you familiar with Cancer.gov? [If not, skip to Question 9.]

 *[Note to Facilitator: Steer responses away from funding related topics.]*

* + Probe: Can you please open the file that was sent to you prior to this call? Is this the website you were referring to in your previous response?
	+ Probe: Do you consider Cancer.gov to be a trusted source of information?
1. What do you use Cancer.gov for?
	* Probe: What prompts you to use it?
	* Probe: credibility, trustworthiness, comprehensiveness

*PDQ*

1. Are you familiar with PDQ (Physician Data Query)? [If not, skip to Question 11.]
2. What do you use PDQ for?
	* Probe: How do you use PDQ information to develop your own standards and protocols?
	* Probe: What prompts you to use it?
	* Probe: credibility, trustworthiness, comprehensiveness, evidence-based site

**Future Engagement Methods and Technologies**

1. What technologies have you adopted into your practice in the past couple of years?
	* Probe: EHR, telehealth, wearables for patients, virtual assistant
	* Probe: Do you consider yourself an early adopter or do you tend to stick with technologies you already know?

**Closing Question**

1. What else would you like to share about accessing or using cancer information?

Thank you for your time, this now concludes the interview. Your answers are very helpful and will be used in the analysis phase. Have a good day.