

Draft Interview Guide

This interview guide includes four core domains that are intended to capture characteristics of health care providers (physicians, nurse practitioners, and physician assistants) and their perception of the AHRQ Safety Program for Telemedicine: Improving the Diagnostic Process (the “Safety Program”) to understand their experiences and any changes to the diagnostic process following implementation of the Safety Program. This guide will be refined to reflect differences between health care providers and key support staff. It will also be refined to reflect differences in telemedicine settings. Finally, this guide can be amended for length and comprehensibility of questions. All interviews will occur at the end of the intervention period.

Warm Up/Demographics

- What is your job title and role?
- In your own words, what does excellence in diagnosis mean to you?

Participation in the AHRQ Safety Program for Telemedicine: Improving the Diagnostic Process

- Did you think it was worthwhile for your practice to participate in the Safety Program? Please explain.
- How much leadership support did you have for improving diagnosis through this Safety Program? What do you think the barriers were/are to getting them involved?
- What structure or process changes did you make as a result of participating in the program?
- What are the greatest successes you have experienced as a result of participating in the Safety Program?
 - Which parts of the Safety Program did you find most valuable? [*Probe if necessary*] How were they helpful to you and your team?
- What are the greatest challenges you experienced in implementing changes to improve diagnostic accuracy?
 - What resources or support would have helped you overcome these challenges?
- What is your opinion of the Safety Program related to:
 - How has it affected how you think about the diagnostic process?
 - How has it impacted your practice and/or patient care?
- Since implementation of the Safety Program, how have patient-clinician interactions changed in terms of history taking, examination, assessment, differential diagnosis, clinical reasoning?

Barriers & Facilitators to Diagnostic Accuracy

- Prior to the start of the Safety Program, what were the biggest barriers to timely and accurate diagnosis of breast, colorectal, and lung cancers within a telemedicine setting? Did the Safety Program help you overcome them?

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Attachment H: Draft Interview Guide for Semi-Structured Interviews— Cancer Diagnostic Process Cohort

- What are the biggest facilitators for timely and accurate diagnosis for breast, colorectal, and lung cancers within a telemedicine setting? Did the Safety Program have any impact on these?
- Prior to the Safety Program, describe your expertise/comfort with the science of safety and diagnostic process improvement for breast, colorectal, and lung cancers within a telemedicine setting?
 - Prompt: Had you received any education or training on how to adapt in-person diagnosis to telemedicine?
 - Prompt: What additional training in telemedicine do you feel would benefit you?
- What do you think could be done at a systems level to improve diagnostic timeliness and accuracy of breast, colorectal, and lung cancers in the telemedicine setting?

The Role of Nursing in Diagnosis Improvement

- What role do you think nurses can play in improving diagnosis through telemedicine?
- After using the Safety Program, how did you engage nurses and others who are not directly responsible for diagnostics in the diagnostic process?

(Question for Primary Care Providers only)

- Are you aware of any processes to promote diagnostic accuracy for cases of cancer diagnosed within your patients over the last 3-6 months? Examples include:
 - Tumor boards
 - Consulting with a specialist when ordering or interpreting diagnostic tests
 - Seeking a second opinion – clinician initiated
 - Seeking a second opinion – patient initiated

[If respondent indicated that any of the activities referred to above took place] In any of these cases, did any of these processes lead to a change in the patient's final diagnosis?