

# Multidisciplinary Lung Cancer Care Pathway for EGFR-positive Advanced Non-Small Cell Lung Cancer Patients at the Sunnybrook Odette Cancer Centre: A Process Map

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## BACKGROUND

Cancer care is a complex and fragmented process involving a variety of specialized healthcare providers

Increased use of oral anticancer medications (OAMs) has introduced additional complexity, with new safety and efficacy concerns

To address OAM drug therapy problems, the Sunnybrook Odette Cancer Centre Pharmacy introduced an innovative program to offer patients clinical and technical OAM support

- 2015: Pilot in non-small cell lung cancer patients, subsequently expanded to all disease sites
- 2017: Identified as a *Leading Practice in Cancer Care* by Accreditation Canada

## OBJECTIVES

1. Describe the Odette OAM Program
2. Describe how the OAM Program fits into the EGFR positive advanced non-small cell lung cancer (EGFR+aNSCLC) care pathway at the Odette Cancer Centre

## METHODS

**Setting:** Sunnybrook Odette Cancer Centre, Toronto, Ontario, Canada

**Scope:** OAM Program overview and description of care pathway between diagnosis to end of treatment cycle 1 for EGFR+aNSCLC

**Data collection:** Artifact analysis, interviews, & direct observation (Jan 2019–Mar 2019)

- 4 medical oncologists, 2 nurses, 4 pharmacists, 2 registered pharmacy technicians, 1 drug reimbursement specialist, and 5 administrative support staff

**Analysis:** Process mapping (flow charts, swim-lane diagrams), iteratively refined and consolidated

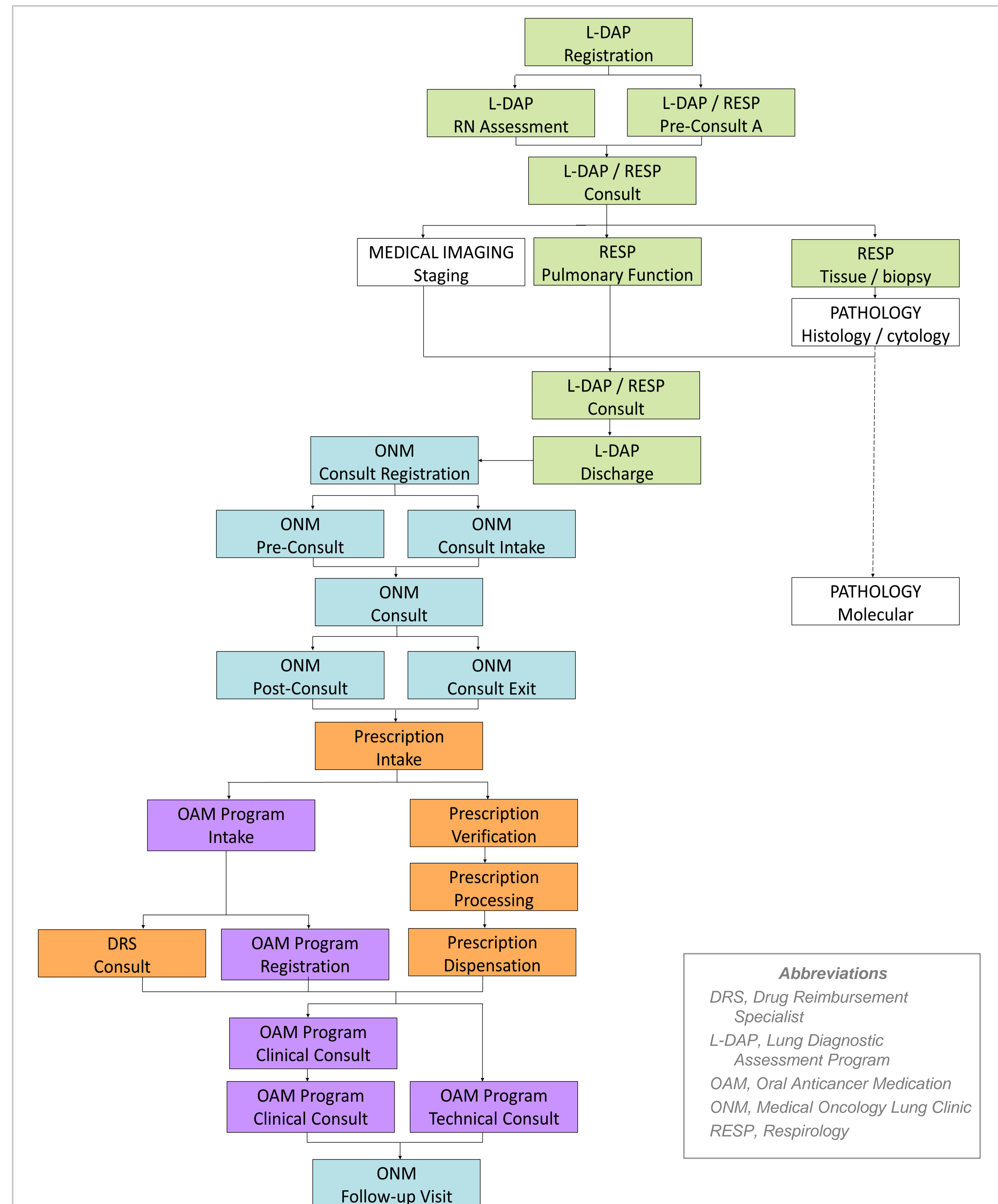
## RESULTS

Figure 1 is the first real-world depiction of a complex EGFR+aNSCLC patient care pathway from diagnosis to the end of treatment cycle 1 (agents: afatinib, erlotinib, gefitinib, or osimertinib)

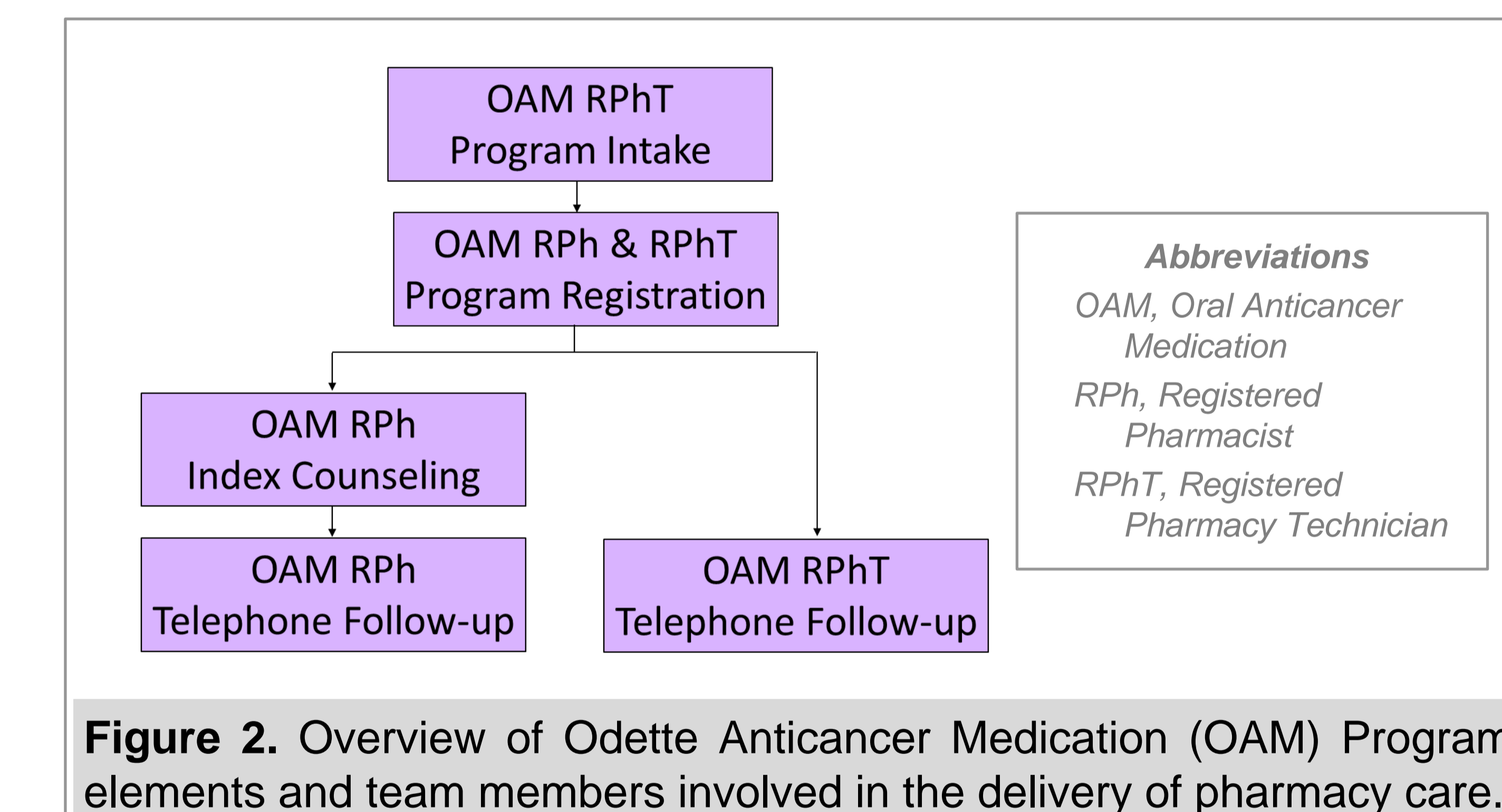
Figure 2 provides an overview of Odette OAM Program elements and team members

Clinical and technical OAM Program services were integrated into the outpatient pharmacy workflow; the OAM team (OAM RPh and OAM RPhT) identified and resolved complex OAM drug therapy problems in collaboration with patients, medical oncologists, lung clinic staff, drug reimbursement specialists, the outpatient pharmacy team, and other health service providers

Delayed access to molecular pathology results created redundancy and delayed treatment decisions; process mapping was an effective tool to illustrate the EGFR+aNSCLC patient care pathway that revealed opportunities to improve interprofessional communication and healthcare service delivery practices



**Figure 1.** Process map of the multidisciplinary lung cancer care pathway at the Sunnybrook Odette Cancer Centre. Sequence of tasks clinical and non-clinical staff contribute to the diagnosis and management of EGFR+aNSCLC. The process map illustrates the coordination of care across administrative staff and four teams: Lung Diagnostic Assessment Program (L-DAP), Medical Oncology Lung Clinic (ONM), Oral Anticancer Medication (OAM) Program, and Outpatient Pharmacy.



**Figure 2.** Overview of Odette Anticancer Medication (OAM) Program elements and team members involved in the delivery of pharmacy care.



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## CONCLUSION

Cancer Care Ontario has published pathways outlining best practices for the management of patients across the lung cancer continuum; however, real-world descriptions of the complex pathway are absent from scholarly literature

This is the first research to describe the EGFR+aNSCLC patient journey and integration of a *Leading Practice* medication management program into an ambulatory oncology care pathway

Findings could be used to guide OAM Program design and implementation at other sites (provide a framework for OAM Program structure and service delivery)

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## DISCLOSURES

Authors of this poster have the following to disclose concerning possible personal or financial relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation:

Thawer A – Research funding, Boehringer Ingelheim	Menjak I – Nothing to disclose
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Peragine C – Nothing to disclose	Shloush J – Nothing to disclose