



Case 2: Adenocarcinoma NSCLC

In the following case, what chemotherapy treatment regimen would you likely choose as first line treatment for this person diagnosed with Stage IV adenocarcinoma NSCLC:

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

3. Given this scenario, what chemotherapy regimen are you most likely to choose as first line treatment?
(choose ONE best)
- A. Carboplatin – Paclitaxel – Bevacizumab (go to 4-A, page 7)
 - B. Carboplatin – Pemetrexed (skip to 4-B, page 8)
 - C. Cisplatin – Pemetrexed (skip to 4-C, page 9)
 - D. Carboplatin – Paclitaxel (skip to 4-D, page 10)
 - E. Carboplatin – Gemcitabine (skip to 4-E, page 11)
 - F. Other, please specify _____ (go to Q5, page 12)

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

Case 2 Scenario, continues...

4-A) Your Case 2 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

- 1 = Hair Loss
- 2 = Nausea
- 3 = Vomiting

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel – Bevacizumab (go to Q5, page 12)
- B. Carboplatin – Pemetrexed (go to Q5, page 12)
- C. Cisplatin – Pemetrexed (go to Q5, page 12)
- D. Carboplatin – Paclitaxel (go to Q5, page 12)
- E. Carboplatin – Gemcitabine (go to Q5, page 12)
- F. Other, please specify _____ (go to Q5, page 12)

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

Case 2 Scenario, continues...

4-B) Your Case 2 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

- 1 = Hair Loss
- 2 = Nausea
- 3 = Vomiting

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel – Bevacizumab (go to Q5, page 12)
- B. Carboplatin – Pemetrexed (go to Q5, page 12)
- C. Cisplatin – Pemetrexed (go to Q5, page 12)
- D. Carboplatin – Paclitaxel (go to Q5, page 12)
- E. Carboplatin – Gemcitabine (go to Q5, page 12)
- F. Other, please specify _____ (go to Q5, page 12)

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

Case 2 Scenario, continues...

4-C) Your Case 2 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

- 1 = Hair Loss
- 2 = Dizziness
- 3 = Headache

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel – Bevacizumab (go to Q5, page 12)
- B. Carboplatin – Pemetrexed (go to Q5, page 12)
- C. Cisplatin – Pemetrexed (go to Q5, page 12)
- D. Carboplatin – Paclitaxel (go to Q5, page 12)
- E. Carboplatin – Gemcitabine (go to Q5, page 12)
- F. Other, please specify _____ (go to Q5, page 12)

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

Case 2 Scenario, continues...

4-D) Your Case 2 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

- 1 = Hair Loss
- 2 = Nausea
- 3 = Vomiting

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel – Bevacizumab (go to Q5, page 12)
- B. Carboplatin – Pemetrexed (go to Q5, page 12)
- C. Cisplatin – Pemetrexed (go to Q5, page 12)
- D. Carboplatin – Paclitaxel (go to Q5, page 12)
- E. Carboplatin – Gemcitabine (go to Q5, page 12)
- F. Other, please specify _____ (go to Q5, page 12)

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

Case 2 Scenario, continues...

4-E) Your Case 2 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

- 1 = Hair Loss
- 2 = Dizziness
- 3 = Headache

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel – Bevacizumab (go to Q5, page 12)
- B. Carboplatin – Pemetrexed (go to Q5, page 12)
- C. Cisplatin – Pemetrexed (go to Q5, page 12)
- D. Carboplatin – Paclitaxel (go to Q5, page 12)
- E. Carboplatin – Gemcitabine (go to Q5, page 12)
- F. Other, please specify _____ (go to Q5, page 12)

End Case 2, Q4. Go to Q5, page 12.

5. If you could receive the information quickly at the outset of considering a case, so that you could use it when deciding on a chemo treatment plan, on a scale of “1” to “9” (1=very beneficial vs. 9=downright hindrance), how beneficial would it be to the improvement of patient care to have added information about adverse effects of chemo that a patient would MOST LIKE TO AVOID? (choose ONE best)
- a. 1 = very beneficial
 - b. 2
 - c. 3
 - d. 4
 - e. 5 = neutral, I don't know if it would help or not
 - f. 6
 - g. 7
 - h. 8
 - i. 9 = would be a downright hindrance
6. What factors are typically most influential in your choice of which chemotherapy regimen to use for first line treatment of a patient who has been newly diagnosed with, or has newly progressed to, Stage IV NSCLC? (check all that apply)
- a. efficacy
 - b. logistics
 - c. cost
 - d. toxicity
 - e. patient factors
 - f. other, please specify (text) _____

End Core Questions Section. Continue with Demographic Section.

Demographic Section

The following responses will be used for aggregate purposes only.

1. In what city and state is your primary practice of oncology?
5-digit Zip Code: _____ City _____ State: _____
2. What is the setting of your primary oncology-related practice?
 - a. community practice
 - b. teaching hospital/university
 - c. VA
 - d. other (please specify): _____

3. Regarding the diagnosis and care of patients with suspected or known lung cancer, what is your typical role?
- a. medical oncologist
 - b. other (please specify): _____
 - c. N/A: not typically involved. . . .
4. How many years have you been in clinical practice involved in the care of oncology patients?
- a. 0 – 5
 - b. 6 – 15
 - c. 16 – 30
 - d. More than 30
5. What is your gender?
- a. female
 - b. male
6. What is your race? (*choose ONE best*)
- a. Alaska Native
 - b. American Indian
 - c. Asian
 - d. Black / African American
 - e. Native Hawaiian / Other Pacific Islander
 - f. White / Caucasian
 - g. More than One Race
 - h. Other (*specify*): _____
7. What is your ethnicity? (*choose ONE best*)
- a. Hispanic / Latino
 - b. Non-Hispanic / Non-Latino

Comments? (optional): *(text)* _____

THANK YOU!

Thank you for your continued participation and valuable support of the PCORI Lung Cancer Study

Acknowledgement and Disclaimer: The foregoing Chemotherapy Treatment Planning Questions were developed by the UNMC Lung Cancer Research Team directed by KM Monirul Islam from 2013-2016. This study was supported in part by the Patient-Centered Outcomes Research Institute (PCORI) Contract # CE-12-11-4351. However, the contents are solely the responsibility of the authors and do not necessarily represent the official views of the PCORI, its Board of Governors or Methodology Committee.



Lung Cancer Study: Chemotherapy Treatment Planning

Case 1: Squamous Cell NSCLC

In the following case, what chemotherapy treatment regimen would you likely choose as first line treatment for this person diagnosed with Stage IV squamous cell NSCLC:

Case 1:

56-year-old male; smoking history: 35 pack years, quit 5 years ago; presents with worsening shortness of breath

CT Scan – right lower lobe cavitory lesion with mediastinal lymphadenopathy and bilateral adrenal lesions

Biopsy of Adrenal – squamous cell carcinoma

MRI of Brain – negative

On Exam – performance status: ECOG-0, no other abnormalities identified

Lab – hemoglobin = 11 gm/dL

Kidney & Liver Function – normal

Patient is not interested in a clinical trial; but wants to be aggressive.

1. Given this scenario, what chemotherapy regimen are you most likely to choose as first line treatment? (choose *ONE* best)
 - A. Carboplatin – Paclitaxel (go to 2-A, page 2)
 - B. Carboplatin – Gemcitabine (skip to 2-B, page 3)
 - C. Carboplatin – Vinorelbine (skip to 2-C, page 4)
 - D. Cisplatin – Gemcitabine (skip to 2-D, page 5)
 - E. Other, please specify _____ (skip to Question 3, page 6)

Throughout this survey, unless otherwise noted, all response choices are limited to one per question.

For both the case scenarios, the order of the questions asked is important. In these sections, respondent may not go back and change a prior answer.

Case 1:

56-year-old male; smoking history: 35 pack years, quit 5 years ago; presents with worsening shortness of breath

CT Scan – right lower lobe cavitory lesion with mediastinal lymphadenopathy and bilateral adrenal lesions

Biopsy of Adrenal – squamous cell carcinoma

MRI of Brain – negative

On Exam – performance status: ECOG-0, no other abnormalities identified

Lab – hemoglobin = 11 gm/dL

Kidney & Liver Function – normal

Patient is not interested in a clinical trial; but wants to be aggressive.

Case 1 Scenario, continues...

2-A) Your Case 1 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

1 = Neuropathy

2 = Bleeding Risk

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel (go to Q3, page 6)
- B. Carboplatin – Gemcitabine (go to Q3, page 6)
- C. Carboplatin – Vinorelbine (go to Q3, page 6)
- D. Cisplatin – Gemcitabine (go to Q3, page 6)
- E. Other, please specify _____ (go to Q3, page 6)

Case 1:

56-year-old male; smoking history: 35 pack years, quit 5 years ago; presents with worsening shortness of breath

CT Scan – right lower lobe cavitory lesion with mediastinal lymphadenopathy and bilateral adrenal lesions

Biopsy of Adrenal – squamous cell carcinoma

MRI of Brain – negative

On Exam – performance status: ECOG-0, no other abnormalities identified

Lab – hemoglobin = 11 gm/dL

Kidney & Liver Function – normal

Patient is not interested in a clinical trial; but wants to be aggressive.

Case 1 Scenario, continues...

2-B) Your Case 1 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

1 = More Frequent Clinic Visits (weekly vs. every 3 weeks, for example)

2 = Bleeding Risk

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel (go to Q3, page 6)
- B. Carboplatin – Gemcitabine (go to Q3, page 6)
- C. Carboplatin – Vinorelbine (go to Q3, page 6)
- D. Cisplatin – Gemcitabine (go to Q3, page 6)
- E. Other, please specify _____ (go to Q3, page 6)

Case 1:

56-year-old male; smoking history: 35 pack years, quit 5 years ago; presents with worsening shortness of breath

CT Scan – right lower lobe cavitory lesion with mediastinal lymphadenopathy and bilateral adrenal lesions

Biopsy of Adrenal – squamous cell carcinoma

MRI of Brain – negative

On Exam – performance status: ECOG-0, no other abnormalities identified

Lab – hemoglobin = 11 gm/dL

Kidney & Liver Function – normal

Patient is not interested in a clinical trial; but wants to be aggressive.

Case 1 Scenario, continues...

2-C) Your Case 1 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

1 = Constipation

2 = More Frequent Clinic Visits (weekly vs. every 3 weeks, for example)

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel (go to Q3, page 6)
- B. Carboplatin – Gemcitabine (go to Q3, page 6)
- C. Carboplatin – Vinorelbine (go to Q3, page 6)
- D. Cisplatin – Gemcitabine (go to Q3, page 6)
- E. Other, please specify _____ (go to Q3, page 6)

Case 1:

56-year-old male; smoking history: 35 pack years, quit 5 years ago; presents with worsening shortness of breath

CT Scan – right lower lobe cavitory lesion with mediastinal lymphadenopathy and bilateral adrenal lesions

Biopsy of Adrenal – squamous cell carcinoma

MRI of Brain – negative

On Exam – performance status: ECOG-0, no other abnormalities identified

Lab – hemoglobin = 11 gm/dL

Kidney & Liver Function – normal

Patient is not interested in a clinical trial; but wants to be aggressive.

Case 1 Scenario, continues...

2-D) Your Case 1 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

1 = Nausea & Vomiting

2 = More Frequent Clinic Visits (weekly vs. every 3 weeks, for example)

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel (go to Q3, page 6)
- B. Carboplatin – Gemcitabine (go to Q3, page 6)
- C. Carboplatin – Vinorelbine (go to Q3, page 6)
- D. Cisplatin – Gemcitabine (go to Q3, page 6)
- E. Other, please specify _____ (go to Q3, page 6)

End Q2, Case 1. Go to Q3, page 6.

Case 2: Adenocarcinoma NSCLC

In the following case, what chemotherapy treatment regimen would you likely choose as first line treatment for this person diagnosed with Stage IV adenocarcinoma NSCLC:

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

3. Given this scenario, what chemotherapy regimen are you most likely to choose as first line treatment? (choose ONE best)
- A. Carboplatin – Paclitaxel – Bevacizumab (go to 4-A, page 7)
 - B. Carboplatin – Pemetrexed (skip to 4-B, page 8)
 - C. Cisplatin – Pemetrexed (skip to 4-C, page 9)
 - D. Carboplatin – Paclitaxel (skip to 4-D, page 10)
 - E. Carboplatin – Gemcitabine (skip to 4-E, page 11)
 - F. Other, please specify _____ (go to Q5, page 12)

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

Case 2 Scenario, continues...

4-A) Your Case 2 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

- 1 = Expensive
- 2 = Bleeding Risk
- 3 = Neuropathy

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel – Bevacizumab (go to Q5, page 12)
- B. Carboplatin – Pemetrexed (go to Q5, page 12)
- C. Cisplatin – Pemetrexed (go to Q5, page 12)
- D. Carboplatin – Paclitaxel (go to Q5, page 12)
- E. Carboplatin – Gemcitabine (go to Q5, page 12)
- F. Other, please specify _____ (go to Q5, page 12)

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

Case 2 Scenario, continues...

4-B) Your Case 2 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

1 = Fatigue

2 = Expensive

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel – Bevacizumab (go to Q5, page 12)
- B. Carboplatin – Pemetrexed (go to Q5, page 12)
- C. Cisplatin – Pemetrexed (go to Q5, page 12)
- D. Carboplatin – Paclitaxel (go to Q5, page 12)
- E. Carboplatin – Gemcitabine (go to Q5, page 12)
- F. Other, please specify _____ (go to Q5, page 12)

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

Case 2 Scenario, continues...

4-C) Your Case 2 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

1 = Nausea

2 = Fatigue

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel – Bevacizumab (go to Q5, page 12)
- B. Carboplatin – Pemetrexed (go to Q5, page 12)
- C. Cisplatin – Pemetrexed (go to Q5, page 12)
- D. Carboplatin – Paclitaxel (go to Q5, page 12)
- E. Carboplatin – Gemcitabine (go to Q5, page 12)
- F. Other, please specify _____ (go to Q5, page 12)

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

Case 2 Scenario, continues...

4-D) Your Case 2 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

- 1 = Neuropathy
- 2 = Fatigue

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel – Bevacizumab (go to Q5, page 12)
- B. Carboplatin – Pemetrexed (go to Q5, page 12)
- C. Cisplatin – Pemetrexed (go to Q5, page 12)
- D. Carboplatin – Paclitaxel (go to Q5, page 12)
- E. Carboplatin – Gemcitabine (go to Q5, page 12)
- F. Other, please specify _____ (go to Q5, page 12)

Case 2:

62 year old female, noted to have an abnormal chest x-ray during a routine physical exam

CT Chest – 2.5 cm left upper lobe lesion with mediastinal lymphadenopathy; multiple liver lesions noted

PET Scan – increased activity in all lesions identified

Liver Biopsy – adenocarcinoma c/w lung primary

EGFR Mutation & Alk Rearrangement – negative

On Exam – performance status: ECOG-1

Lab – hemoglobin = 10.5 gm/dL; rest of CBC normal

Kidney & Liver Function – normal

Patient not interested in a clinical trial; but wants to be aggressive.

Case 2 Scenario, continues...

4-E) Your Case 2 patient ranked a group of 9 possible unwanted chemo drug “side effects” from “1” to “9” with “1” being the one they would MOST LIKE TO AVOID to “9” being the MOST TOLERABLE of the group.

Your patient’s top choices of adverse effects they would MOST LIKE TO AVOID were:

1 = Nausea & Vomiting

2 = More Frequent Clinic Visits (weekly vs. every 3 weeks, for example)

Now what would be your treatment choice? (*choose ONE best*)

- A. Carboplatin – Paclitaxel – Bevacizumab (go to Q5, page 12)
- B. Carboplatin – Pemetrexed (go to Q5, page 12)
- C. Cisplatin – Pemetrexed (go to Q5, page 12)
- D. Carboplatin – Paclitaxel (go to Q5, page 12)
- E. Carboplatin – Gemcitabine (go to Q5, page 12)
- F. Other, please specify _____ (go to Q5, page 12)

End Q4, Case 2. Go to Q5, page 12.

5. If you could receive the information quickly at the outset of considering a case, so that you could use it when deciding on a chemo treatment plan, on a scale of “1” to “9” (1=very beneficial vs. 9=downright hindrance), how beneficial would it be to the improvement of patient care to have added information about adverse effects of chemo that a patient would MOST LIKE TO AVOID? (choose ONE best)
- a. 1 = very beneficial
 - b. 2
 - c. 3
 - d. 4
 - e. 5 = neutral, I don't know if it would help or not
 - f. 6
 - g. 7
 - h. 8
 - i. 9 = would be a downright hindrance
6. What factors are typically most influential in your choice of which chemotherapy regimen to use for first line treatment of a patient who has been newly diagnosed with, or has newly progressed to, Stage IV NSCLC? (check all that apply)
- a. efficacy
 - b. logistics
 - c. cost
 - d. toxicity
 - e. patient factors
 - f. other, please specify (text) _____

End Core Questions Section. Continue with Demographic Section.

Demographic Section

The following responses will be used for aggregate purposes only.

1. In what city and state is your primary practice of oncology?
5-digit Zip Code: _____ City _____ State: _____
2. What is the setting of your primary oncology-related practice?
 - a. community practice
 - b. teaching hospital/university
 - c. VA
 - d. other (please specify): _____

3. Regarding the diagnosis and care of patients with suspected or known lung cancer, what is your typical role?
- a. medical oncologist
 - b. other (please specify): _____
 - c. N/A: not typically involved. . . .
4. How many years have you been in clinical practice involved in the care of oncology patients?
- a. 0 – 5
 - b. 6 – 15
 - c. 16 – 30
 - d. More than 30
5. What is your gender?
- a. female
 - b. male
6. What is your race? (*choose ONE best*)
- a. Alaska Native
 - b. American Indian
 - c. Asian
 - d. Black / African American
 - e. Native Hawaiian / Other Pacific Islander
 - f. White / Caucasian
 - g. More than One Race
 - h. Other (*specify*): _____
7. What is your ethnicity? (*choose ONE best*)
- a. Hispanic / Latino
 - b. Non-Hispanic / Non-Latino

Comments? (optional): *(text)* _____

THANK YOU!

Thank you for your continued participation and valuable support of the PCORI Lung Cancer Study

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