

Supplement 1. Study Protocol

## How to Discuss the Uncertain Prognosis:

# A Scoping Review on Current Communication Guidelines and their Application in Oncology

A SCOPING REVIEW PROTOCOL

Prepared for Registration to Open Science Framework

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## REVIEW TITLE AND TIMESCALE

**Review title:** How to Discuss the Uncertain Prognosis: A Scoping Review on Current Communication Guidelines and their Application in Oncology

**Anticipated or actual start date:** 1/1/2021

**Anticipated completion date:** 3/1/2021

**Stage of review at time of this submission:**

Review Stage	Started	Completed
Preliminary searches	<input type="checkbox"/>	✓
Piloting of the study selection process	<input type="checkbox"/>	✓
Formal screening of search results against eligibility criteria	<input type="checkbox"/>	✓
Data extraction	<input type="checkbox"/>	✓
Risk of bias (quality assessment)	<input type="checkbox"/>	N/A
Data analysis	<input type="checkbox"/>	<input type="checkbox"/>

## REVIEW TEAM DETAILS

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**Organizational affiliation of the review:**

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**Review team members and their organizational affiliations:**

Title	Affiliation
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**Funding sources/sponsors:** None

**Conflicts of interest:** Authors have no known conflicts of interest to declare.

## REVIEW METHODS:

**Review question(s):**

This scoping review aims to assess recommendations and guidelines that explore how oncology clinicians can approach the discussion of the uncertain prognosis.

- (1) What guidelines exist to aid clinicians in having successful conversations surrounding the uncertain prognosis of their oncology patient?

- (2) What expert opinions and symposiums of national experts exist to aid clinicians in having successful conversations surrounding the uncertain prognosis of their oncology patient?
- (3) Of the guidelines that exist that address how to have successful conversations surrounding the uncertain prognosis of their oncology patient, which guidelines are validated?

**Literature search:**

Comprehensive literature searches of electronic databases were completed by a clinician and experienced librarian to maximize sensitivity; a broad search strategy included databases: Medline, EMBASE, PsychINFO, and Cochrane CENTRAL, in accordance with the PRISMA statement. Search terms were adapted for different databases.

Summarizing: Neoplasm AND Prognosis AND Communication AND Guidelines as topic in title/abstract/keywords. Boolean operators (AND & OR) were used to search by different combinations of words. Searches were conducted using keywords, MeSH and MeSH Entry; Boolean operators were completed up through 10/20/2020; all language entries were included. Two authors then independently analyses the text words contains in the title and abstract used for studies' eligibility.

**Condition of domain being studied:**

Prognosis communication guidelines and supported recommendations.

**Participants/Population:**

The population of interest is any oncology patient population, excluding populations looking at one specific disease sites (e.g. only breast cancer patients etc.) Retrospective cohorts studies, prospective cohort studies, randomized control trials, observational studies, expert opinion and symposium of national expert conclusions are included.

**Intervention(s)/Exposure(s):**

1. Prognosis communication guidelines developed by expert personnel including clinicians, physician scientists, and medical scientists.
2. Prognosis communication interventions including but not limited to communication written guidelines, communication training sessions for clinicians (in-person or virtual), communication interventions for patients (written, in-person or virtual), communications prompts in electronic medical records.

**Comparator(s)/Control(s):**

Any comparator is relevant for inclusion. Studies comparing guidelines to another guidelines or a guideline to a control. In addition, studies without a comparator are eligible for inclusion.

**Types of study to be included initially:**

All types of publications including published articles, articles in conference proceedings, editorials, chapters in textbooks are included.

**Context:**

All periods of time and duration of follow-up are eligible.

**Primary outcome(s):**

There are two categories of outcomes that are of interest: (1) guidelines and recommendations that exist on how to communicate successfully the uncertain prognosis with cancer patients; and (2) these same guidelines or recommendations applied in the clinical setting and their effect on clinicians' abilities to communicate successfully.

**Secondary outcomes(s):**

None

**Data extraction (selection and coding):**

Information will be extracted by two independent researchers. If necessary, for cases of discrepancy, a third researcher will review the article to discern if the article meets inclusion criteria. We abstracted data on guidelines, and both qualitative and quantitative measures of the accordant interventions with relation to communication tools.

**Risk of bias (quality) assessment:**

Since this is a scoping review, a quality appraisal will not be conducted, consistent with Arksey and O'Malley's framework and Joanna Briggs Institute methodological guidance for Scoping Reviews.

**Strategy for data synthesis:**

The present study will be performed in accordance with Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) Guidelines. Based on Cochran guidelines, the study involves the following steps: study design and search strategy, collection of articles, evaluation for meeting inclusion and exclusion criteria, qualitative analysis of data. All steps will be conducted by two researchers independently; a third independent will weigh in on areas of discrepancies. The synthesis will focus on providing: 1) the communication guidelines that exist to aid clinicians in having more successful conversations with their oncology patients on the uncertain diagnosis, 2) find possible commonalities and/or differences that exist between these guidelines, and 3) identify existing clinical application of these guidelines and validity of their use.

**Analysis of subgroups:**

Not applicable.

## REVIEW OF GENERAL INFORMATION

**Type of review:** Scoping review

**Language(s):** All languages included, published in English

**Country:** United States of America

**Reference for protocol search:**

Database	Advanced Search Entry
Pubmed	("Neoplasms"[Mesh] OR "Medical Oncology"[Mesh] OR "Oncology Service, Hospital"[Mesh] OR "Oncologists"[Mesh] OR "serious illness" OR neoplasm* OR oncolog* OR cancer* OR tumor* OR malignan*) AND ("Palliative Care"[Mesh] OR "Prognosis"[Mesh] OR palliative OR prognos*) AND ("Communication"[Mesh] OR "Health Communication"[Mesh] OR "Physician-Patient Relations"[Mesh] OR "Truth Disclosure"[Mesh] OR physician patient relation* OR doctor patient relation* OR truth disclosure* OR conversation*) AND (Clinical pathway[mh] OR Clinical protocol[mh] OR Consensus[mh] OR Consensus development conferences as topic[mh] OR Critical pathways[mh] OR Guidelines as topic [Mesh:NoExp] OR Practice guidelines as topic[mh] OR Health planning guidelines[mh] OR guideline[pt] OR practice guideline[pt] OR consensus development conference[pt] OR consensus development conference, NIH[pt] OR position statement*[tiab] OR policy statement*[tiab] OR practice parameter*[tiab] OR best practice*[tiab] OR standards[ti] OR guideline[ti] OR guidelines[ti] OR ((practice[tiab] OR treatment*[tiab]) AND guideline*[tiab]) OR CPG[tiab] OR CPGs[tiab] OR consensus*[tiab] OR ((critical[tiab] OR clinical[tiab] OR practice[tiab]) AND (path[tiab] OR paths[tiab] OR pathway[tiab] OR pathways[tiab] OR protocol*[tiab])) OR recommendat*[ti] OR (care[tiab] AND (standard[tiab] OR path[tiab] OR paths[tiab] OR pathway[tiab] OR pathways[tiab] OR map[tiab] OR maps[tiab] OR plan[tiab] OR plans[tiab])) OR (algorithm*[tiab] AND (screening[tiab] OR examination[tiab] OR test[tiab] OR tested[tiab] OR testing[tiab] OR assessment*[tiab] OR diagnosis[tiab] OR

	diagnoses[tiab] OR diagnosed[tiab] OR diagnosing[tiab])) OR (algorithm*[tiab] AND (pharmacotherap*[tiab] OR chemotherap*[tiab] OR chemotreatment*[tiab] OR therap*[tiab] OR treatment*[tiab] OR intervention*[tiab]))))
<b>EMBASE:</b>	(Neoplasm) AND (Communication) AND (Prognosis) AND (Guideline)
<b>Chocrane CENTRAL:</b>	(Neoplasm) AND (Communication) AND (Prognosis)
<b>PsychINFO:</b>	(Neoplasm) AND (Prognosis) AND (Communication) AND (Guideline)

**Dissemination plans:**

The summary of this scoping review's results, its key messages and synthesis will enhance clinicians understanding of the current guidelines. We aim to publish our results in an international journal to reach varying circles of clinicians and scientists in medicine. Finally, team members will disseminate results in their accordant networks. Both of these actions will increase awareness surrounding this topic and encourage further, future pursuit and analysis of this subject.

**Keywords:**

neoplasms, prognosis, communication, guidelines as topic, serious illness, palliative care, medical oncology, truth disclosure, best practice.