

Lung Cancer Screening Physician Telephone Focus Group Guide

Time: 60 minutes [schedule 90 minutes]

Greeting & Receiving: A member of the research team (moderator or co-moderator) should be on the phone at least 30 minutes earlier to set-up and receive key informants. Introduce yourself to each person and explain we are waiting for others to join. Review consent. Participants should be provided an opportunity to ask any questions at this time.

Content in bold, black text is not to be read aloud by focus group moderator.

INTRODUCTION / PURPOSE

- ◆ **Welcome participants and introduce yourself to the group (and assistant if present).**

Welcome! My name is _____ (**moderator's name**). I am a _____ (**moderator's title**) with _____ (**moderator's affiliation**).

Thank you for agreeing to participate in the telephone focus group discussion. We are trying to learn more about your thoughts on lung cancer screening and how we can develop education materials that improve informed decision making for potential lung screening patients. The ideas you give us today will also be used to improve the way lung cancer screening promotions are done in our community. We are especially interested in your ideas and want you to share your opinions so please speak up. Everything you say will be confidential. Information discussed will be analyzed in aggregate form (as a whole) and individual names will not be used in any part of analysis. We ask that we all keep each other's identities, participation, and remarks private. Feel free to speak openly and honestly.

- ◆ Our discussion today will take about 60 minutes. We will end at about ____ (**time**). In appreciation of your time, we will mail each of you a \$100 gift card at the end of our discussion.

PROCEDURES

Before we begin here are some important reminders:

- ◆ We are interested in all of your ideas, comments, and suggestions.
- ◆ There are no right or wrong answers.
- ◆ All comments, both positive and negative, are welcome.

- ◆ Please feel free to disagree with one another. It is perfectly fine to have many points of view on each of the topics we will discuss.
- ◆ We will be using a digital tape (voice) recorder and will take notes. This is to help us capture your important ideas. Again, all your comments are confidential, and are used for research purposes only.
- ◆ We want this to be a group discussion. Please speak one at a time, so that the recorder can pick up everything.
- ◆ We have a lot of ground to cover, so at times we may change the subject or move ahead.
- ◆ If you are unclear about a question, please let us know. We are here to ask questions, listen, and make sure everyone has a chance to share.
- ◆ Please call from a land line if possible and put cell phones on vibrate. If you must take a call, please mute your phone.

SELF-INTRODUCTION

Please tell us your first name, specialty, and your estimation of what percentage of your patients have inquired about lung cancer screening.

[Review Eligibility Criteria for Lung Cancer Screening]

1. Do you currently recommend lung cancer screening for your eligible patients?
2. If not, why? If yes, what is your process for determining who to recommend screening to? [probe: what if someone does not exactly fit the criteria?]
3. What are the benefits of lung cancer screening?
4. What are the drawbacks?
5. What information do you tell your patients about screening? [probe: do you recommend any resources for obtaining additional information?]

At this point, we would like to review with you the current evidence for lung cancer screening across several areas. After our brief presentations, we will ask for your thoughts regarding the evidence we present.

[EPI, Imaging, Clinical]

1. Was any of this information new for you? Do you trust it? Why or Why not?
2. Where do you think there are gaps in the evidence?
3. What evidence is irrefutable?

4. How do you view lung cancer screening as compared to the other types of screenings you typically recommend such as breast or colon?
5. Can you describe a situation where you would not recommend lung cancer screening to a potentially qualified patient [probe: due to patient factors such as age, income, other health issues or mental status?]
 - a. Do patients ever tell you they do not want to be screened? [probe: what do you see as the greatest patient barrier to screening?]
 - i. What are the reasons for their unwillingness (e.g. fear or procedure, lack of knowledge, not convinced of reliability of test, financial reason)?
 - ii. Do you persuade them to undergo screening? How?
 - b. Do you think giving education to patients before they see you could help in your discussion about lung cancer with them? [For example, educating people while they are waiting to be seen for an appointment.]
6. Do you have any strategies for ensuring that patients who have been referred for screening (example: follow through with the procedure?) [probe: Where does the responsibility lie to ensure patient follow through with screening test procedures? To what extent? Doctor? Patient? Other?]
7. As we develop promotional materials for lung screening for the state of Florida, what do you think regarding the following:
 - a. Content
 - i. What are the most important points to include?
 - ii. What is the best way to inform physicians about lung cancer screening sites [direct mail, DVD, email, text, webinars, etc]
 - b. Length
 - i. About how long should the information be?
 - c. Format & Style
 - i. Who should deliver the messages?
 1. National organization?
 2. Hospital providing the screening?
 3. Another physician?
8. Are there resource(s) that could be added to your practice for eligible patients to receive information about lung cancer screening?

[probe: Examples: reminder system, audit and feedback of medical charts, patient communication tools for use during medical encounter, workshop on colorectal cancer screening.]

[probe: Do you already have some of these resources? Which resource(s)?]

We are just about done. As we come to a close, we want to ensure that we covered the items that we intended. Our purpose for this discussion was to identify key issues faced by primary care practices regarding referral for lung cancer screening.

9. Have we missed anything? Is there anything you would like to add to today's discussion?

Thank you very much for your participation and help with answering these questions. The information you have provided is most helpful. If you should have additional questions or concerns about anything that we discussed we will be available to assist you and we will also provide you our contact information.