



An Observational Study to Examine End of  
Treatment Transition to Follow-Up Care among Early  
Stage Lung Cancer Patients & their Oncology  
Providers

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# Background

- Number of early stage lung cancer (ESLC) survivors with improved survival is rapidly growing
- High symptom burden and poor quality of life after treatment, but little is known about how these concerns are addressed and what additional resources are needed
- Survivorship care planning is recommended for all survivors, yet limited uptake in thoracic oncology and not known if meets needs of ESLC survivors

Objectives: Describe 1) **ESLC survivors'** reports of a) experienced and desired follow-up care communication, b) current health-related information and supportive care needs, and c) persistent symptoms and HRQOL & 2) **Thoracic oncology providers'** ESLC survivorship care delivery, communication, and training

- Follow-up Care & Communication
- Information & Supportive Care Needs
- HRQOL & Symptoms

- ESLC Survivorship Care Delivery & Communication
- Survivorship Care Confidence & Training

- # and Nature of Oncology Appointments in 12 Months post-Treatment
- Symptoms Reported and Strategies to Address

### Eligibility Criteria

- Small-cell or non-small cell lung cancer (AJCC O-II)
- Completion of primary lung cancer treatment 3 to 24 months prior to study recruitment
- No lung cancer recurrence or second malignancy

# Assessments

## **Patient Survey**

- Experienced and desired follow-up care communication and planning (using FOCUS and NHIS survey questions)
- Perceived quality of follow-up care (APECC instrument)
- Knowledge and understanding of their follow-up care plan (PLANS Measure)
- Health information and supportive care needs (NCI measure)
- Lung cancer-specific quality of life and symptoms (FACT-L & M. D. Anderson Symptom Inventory Lung Cancer module)

## **Provider Survey**

- Survivorship care delivery, communication, and coordination (NCI SPARCCS survey)
- Survivorship care confidence & training (NCI SPARCCS survey)

# Status

- NCI grant was submitted, awaiting funding decision
- Protocol is in development