Memo on Meeting with Dr. Wang at VA CT surgery on October 2017

Information on patients that CT surgeons would be looking for on Tumor board-

1. The referral to surgery happens when confirmation is needed for curative or palliative surgery. The decision is based on-

Radiology- Site/location/size/metastasis of Tumor- CT, PET, MRI – within 3-6 months

Pathology-

Molecular information

1. For decision on surgery the following information is needed-

Age, smoking status, Family history of cancer (lung),

ECOG status,

Anticoagulation status

Other comorbidities- renal function, cardiac disease (vascular/valvular), Diabetes, hypertension

1. Lung function tests- PFT , FEV1, DLCO, Cardio Pulmonary Exercise tests
2. Surgical Risk Calculator – ACCP

Memo on Meeting with Pathology team lead by Dr. Rana Samuel at VA

Concerns with current Tumor Board and wish list-

1. Takes time to dig up patients’ information and history of present illness in a comprehensive manner. It should be readily available on tumor boards
2. Specifics about diagnostic criteria for tumors- the margin identification criteria should be available.
3. Whole slide image may be more advantageous and easily reviewed by other pathologists to have a consensus.
4. Dermato pathologists and Cyto pathologists consult may be of help from other facilities.
5. VISN based consult
6. Molecular information