

Quick reference for high-quality cancer multidisciplinary meetings

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Multidisciplinary meetings (MDMs) are deliberate, regular (weekly, fortnightly or monthly), meetings where health professionals from different specialities discuss and recommend options for patients' prospective treatment and care.

What are the benefits of MDMs?

- Improved equality of outcomes for patients with cancer.
- More patients are offered the opportunity to take part in relevant clinical trials.
- There is greater continuity of care and less duplication of services.

Which patients are discussed at MDMs?

There is an opportunity to discuss newly diagnosed cases of cancer, and any patients who require review. Each MDM have agreed criteria specifying which patients need to be discussed (this may include discussion of private patients).

Who attends MDMs?

MDMs involve health professionals with expertise in different specialities. Ideally they include:

- a radiologist
- a pathologist
- a specialist surgeon
- a general surgeon or physician
- radiation and medical oncologists
- allied health or psychosocial professionals
- a specialist nurse
- a palliative care clinician.

The membership reflects the tumour type being discussed. For example, in head and neck and haematology MDMs a dentist with appropriate expertise also attends the MDM. A designated chair will facilitate discussion, and coordinators or administrators are responsible for administering meetings, along with the chair.

What equipment is needed?

- Equipment for displaying radiology and pathology imaging.
- Computer technology for recording MDM decisions and capturing data.
- Video conferencing equipment to host or participate in regional and/or supraregional MDMs.

What information is presented?

MDM recommendations are based on reviews of the patient's clinical documentation. A proforma or data form is prepared in advance for each patient. The proforma or data form includes information about the case and is displayed with the patient's pathology and radiology results. The MDM process checks for concordance of information presented, and the ongoing management plan for each patient.

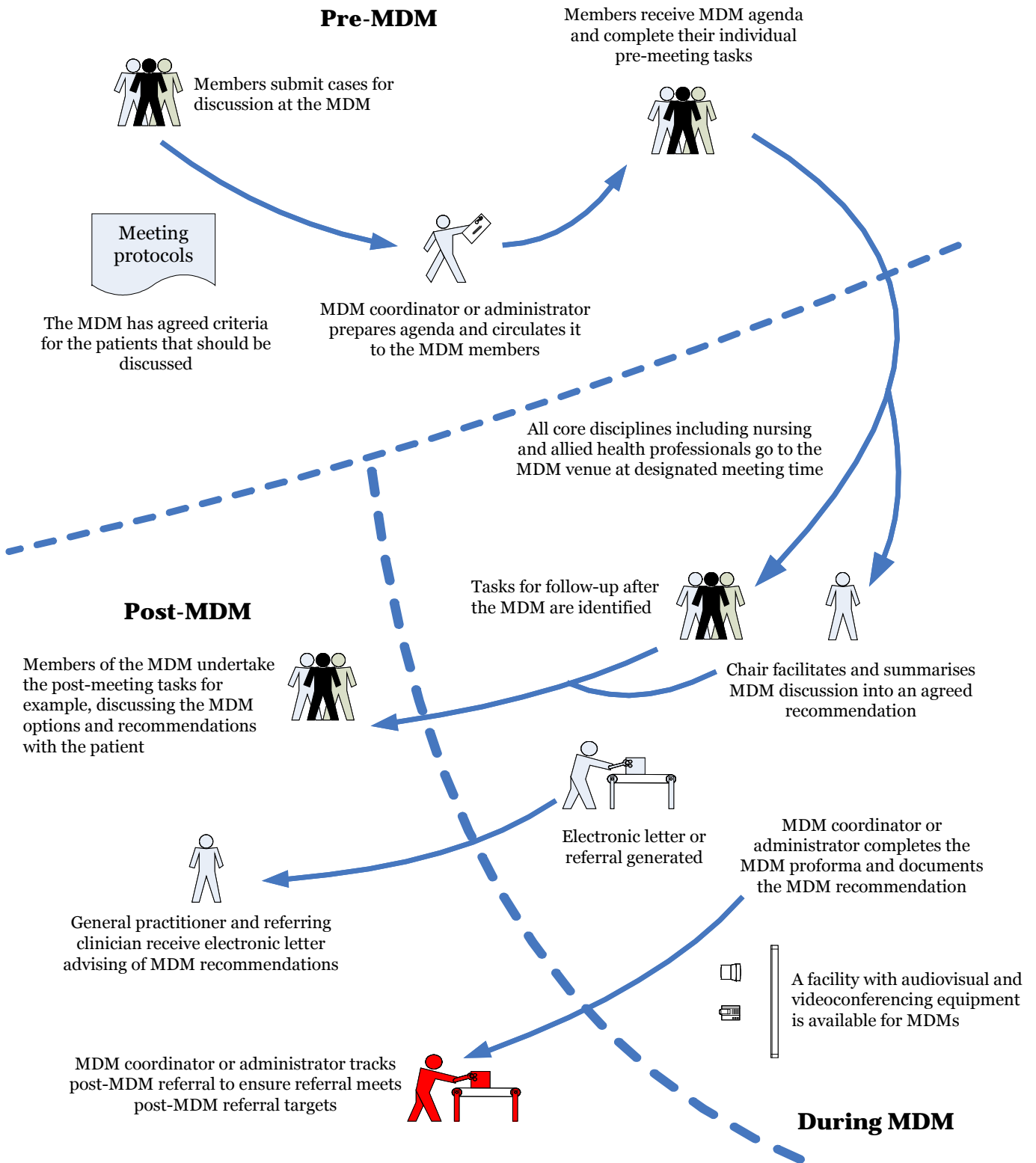
How are MDM outcomes communicated?

Inform the referring clinician and the patient's GP of the recommended treatment plan as soon as practicable after the meeting. Communicate treatment options and recommendations to the patient in a way that allows them to contribute to discussions about their treatment. Provide patients with written information about multidisciplinary care.

Do MDMs need protocols?

High-quality MDMs require written protocols that describe the organisation, content and recording of the meeting. MDMs will have Terms of Reference. See www.health.govt.nz

Example of MDMs and associated processes



Modified from diagram from: Kane BT. 2008. *An analysis of the dynamics of multidisciplinary medical team meetings and the use of communication technology*. Unpublished thesis. Dublin, Ireland: University of Dublin, Trinity College.