Category: Trial Recruitment & Community Outreach and Engagement – Work in Progress

Reduction of Days From Referral to Phase I Consultations

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1. Background

The Phase I program at the NCI-designated Winship Cancer Institute of Emory University has a consultation process where physicians can easily refer patients for evaluation for early-phase research studies. The patient should be seen by a Phase I provider for clinical trial evaluation quickly. However, this process can take longer than anticipated with communication between the referring physician and the research team about trial selection and patient records. A calendar year's worth of data was reviewed and found the median time between the time of referral till a consult was nine days, and more than 50 percent of patients referred did not have a consult within a week. The longer the delay in consultation, the increased adverse impact on the chances of the patient going on a clinical trial as well as patient and referring physician satisfaction.

2. Goals

The goal is to reduce the median number of days from referral for a Phase I consultation from nine to four days and reduce the percentage of patients who wait longer than a week for a consult for a Phase I provider consultation.

3. Solutions and Methods

The solution implemented is a new workflow leveraging technology to reduce the time from patient referral to a visit with a Phase I provider for evaluation and discussion of clinical trial options within three business days of the referral. This solution utilizes telemedicine visits to remove barriers such as transportation to easily engage the entire catchment area of Emory's Winship NIC-designated cancer center throughout the entire state of Georgia. Two processes occur in tandem once a referral is made to the Phase I program by email. A research nurse reviews the patient's medical record and the Phase I clinical trial portfolio to identify potential clinical trials. A research coordinator will contact the patient within one business day and set up telemedicine or in-person consultation within three business days. The possible clinical trial options are communicated to the Phase I provider conducting the consultation. The expectation of our referring physicians is that at the time of referral, the patient has failed their current line of therapy and is ready to discuss clinical trial options and that the physician has alerted the patient that they have been referred and that the Phase I program will be contacting them to set up a consult. This information is also communicated through an auto-reply from the consultation email address. At the end of the consultation, the Phase I provider contacts the research team to provide the patient with a consent to review. This research team member is also the point of contact for the patient to answer any non-clinical questions, schedule the screening visits and procedures, and relay any clinical questions the patient may have to the Phase I clinical team.

4. Outcomes

N/A

5. Lessons Learned and Future Directions

This new workflow is still a work in progress. However, experiments have proven successful with specific oncology disease groups. This process is being rolled out to internal referrals with the goal of rolling it out to outside referrals within the coming year.