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| **Virtual lung cancer MDT meeting in a peripheral hospital, improving efficiencies** |
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| **Introduction/Aim:** Discussion at a multidisciplinary team meeting (MDT) is the standard of care in the management of lung cancer. MDTs are resource intensive and require the time of numerous senior clinicians on a regular basis. The incidence of lung cancer is increasing and thereby presentations at MDTs will also increase.Peripheral hospitals such as Blacktown Hospital are resource limited and lack on-site Radiology, Pathology and Nuclear medicine services. Blacktown hosts a weekly virtual MDT to aid in the management of lung cancer. Data on efficiency of virtual MDTs in peripheral hospitals is lacking. The objective of this study was to describe the efficiency and issues surrounding the virtual MDT at Blacktown hospital. **Methods:** Prospective data was collected for 12 months on time taken for each case discussion in MDTs and number of specialities involved. The nature of any issues interrupting MDT discussions was recorded. **Results:** An average of 5 cases were discussed per week. Each case discussion involved 4.05 (+/-1.27 SD) specialities. The mean time taken for each case discussion was 8:26 (+/-0:24 SD) min. The 3 commonest issues encountered during case discussions were images not being accessible to the radiologist, technical difficulties presenting pathology images online and cardiothoracic or EBUS specialist not being available for comment. **Conclusion:** This study describes the average time taken for an MDT discussion in virtual space. Our study shows that Lung Cancer MDTs can be conducted in a virtual space in hospitals which lack on-site radiology, pathology and nuclear medicine. The average time taken per case discussion at Blacktown indicates that 6-7 patients can be discussed in a one hour meeting. **Grant Supports:** Nil |