Opinions of physicians participating in multidisciplinary tumor boards about the participation of patients and/or patient caregivers in multidisciplinary tumor boards (MTC) - questionnaire form

A. Your academic title:
1. Medical oncology fellow
2. Specialist Dr.
3. Dr. Assistant professor
4. Associate Professor. Dr.
5. Professor

B. Institution you work for:
1. Private hospital
2. State hospital
3. Training and research hospital
4. University hospital (public)
5. Private practice only
6. Private / Foundation University

C. Gender
1. Female
2. Male

D. Your age
1. Under 30 years old
2. Between 30-40
3. Between 40-50
4. Between 50-60
5. Between 60-70
6. Between 70-80

E. How many years have you been doing your job as a specialist?
1. 5 less than 5 years
2. Between 5-10 years
3. Between 10-15 years
4. Between 15-20 years
5. Between 20-25 years
6. Between 25-30 years
7. Over 30 years

F. What is your opinion about the participation of cancer patients or their caregivers in multidisciplinary tumor councils (MTB)?
   a) I do not think that MTBs have a place in patient management. Therefore, I will not comment
   b) I am positive about the participation of cancer patients or their relatives in multidisciplinary tumor board (MTB).
   c) I do not favor the participation of cancer patients or their relatives in multidisciplinary tumor board (MTB).
   d) I favor the participation of cancer patients in MTB, but I do not want patient caregivers to attend.
   e) I do not favor the participation of cancer patients in multidisciplinary tumor councils (MTC), but patient caregivers can participate.

G. What are your thoughts on the benefits or drawbacks of the participation of cancer patients or their caregivers in (MTB)? You can tick more than one option.
   a. With the participation of cancer patients or their caregiver in MTB, more accurate decisions can be made by reviewing the patient's history and physical examination findings.
   b. Direct communication enables more humanly decisions to be made. These decisions may be more radical or instead may provide more palliative approaches to treatment.
   c. The patient and their relatives may not understand the language and terms used. Legal problems may occur as a result of communication issues and misunderstandings. Physicians may avoid discussing them in detail in the presence of patients and/or caregivers. The difference in approach between physicians may not be understood by the patient or their caregivers.

D. Participation of cancer patients or their relatives in multidisciplinary tumor councils (MTC) can be emotionally stressful for physicians.

H. How should the arrangement be if the patient and/or their relatives will join the MTK?
   a. It is appropriate to participate from the beginning of the meeting.
   b. First, the physicians should talk among themselves and a decision should be taken, then the patient and/or their relatives should be invited and the decision should be reported to them and discussed with them.
   c. First, physicians should discuss among themselves, but should not make a final decision. The final decision should be taken after consultation with the patient or his/her relatives.