

E. NOI FELLOWSHIP REPORT – LONG-TERM BENEFITS

NOI Fellowship Report concerning the evaluation of the long-term benefits must be sent no later than 12 months after the end of the fellowship to grant@noisk.sk. Specifically, indicate the scope of work during the fellowship in the report and highlight the achievement of goals together with the possibility of knowledge transfer for the Oncology in Slovakia.

NOI Grant with its assigned number must be acknowledged in all publications or presentations related to the fellowship results, and a citation of the publication or information about the conferences needs to be sent to grant@noisk.sk.

Name and titles of NOI Fellow:

Michaela Švajdová, MD.

Contact Address of the Home Institution:

Clinic of Radiation and Medical Oncology, Central Military Hospital Ružomberok, Generála Miloša Vesela 43, 034 26 Ružomberok, Slovakia

NOI Fellowship Title and Objectives:

Contouring and planning of selected oncological diagnoses with a specific focus on State-of-the-Art Radiotherapy for Head and Neck cancers, Stereotactic Radiotherapy, implementation of 4-D CT, and respiratory gating.

NOI Fellowship Dates:

1.2.2020-1.3.2020

Contact Address of the Host Institution:

James Cancer Center and Solove Research Institute, Columbus, Ohio, United States of America

Overview of NOI Fellowship experience:

During my month-long fellowship at the James Cancer Center in Ohio State, I actively participated in multidisciplinary teams mostly aimed at the treatment of head and neck tumors, but also at the treatment of other diagnoses (spinal and paraspinal tumors, and metastases, gastrointestinal malignancies, brain tumors, urological malignancies, etc.). The multidisciplinary team meetings were organized in the form of a radiological seminar with high-resolution presentations of radiographic images of the patient with a subsequent joint debate on the optimal treatment procedure for the specific case. At the same time, various conferences with many, mostly research topics, were organized on a daily basis within this large oncology institute. It was very interesting to witness the young age of the speakers, who often presented important research results that might have a substantial impact on the clinical practice in radiation oncology all around the world. In the USA, it is very common that medical students earn two degrees at the same time (MD. and Ph.D). This is a very fundamental difference compared to our educational system.

The approval of radiation plans also took place in the form of a multidisciplinary seminar, when the individual patient was presented in the beginning, and the treatment procedure could be further optimized at this point; e.g., concerning follow-up visits, systemic treatment timing, and prospective accrual of the patient into the many ongoing clinical trials, etc. The colleagues always had detailed information regarding the ongoing clinical trials within the James Cancer Center so they could cooperate very effectively in patient accrual.

The role of the nurse in providing outpatient care during radiotherapy and subsequent follow-up was also very interesting. The nurse examined and questioned the patient herself and passed this information to the specialist, who then only focused on the specific problems of the patient and did not lose time asking the same questions repeatedly. The medications were prescribed by the nurse, which spared a significant amount of time to the treating radiation oncologist. The nurse also filled in request forms for various examinations. However, the doctor was in charge of the communication with insurance companies which was often very time-ineffective.

Possible Knowledge Transfer for the Improvements in Oncology in Slovakia:

Apart from my own improvement in the field of radiation oncology, I have not applied the acquired knowledge in a broader sense in my own country. We have a very different healthcare system, all the administrative work related to the treatment is done by the doctor himself which does not offer more space for a more effective use of the work schedule compared to the system that I observed in the James Cancer Center in the state of Ohio. In Slovakia, there is a general lack of specialists in radiation oncology and therefore applying additional time burden (multidisciplinary teams, approval of radiation plans in the form of a seminar) is often not possible and is not carried out on a regular basis. Neither is there space for systematic teaching of non-certified doctors in the field (daily seminars, tests, oral examinations) but it would certainly be a great benefit in the future.

Place and Date

Ružomberok, 28.2.2021

Signature