

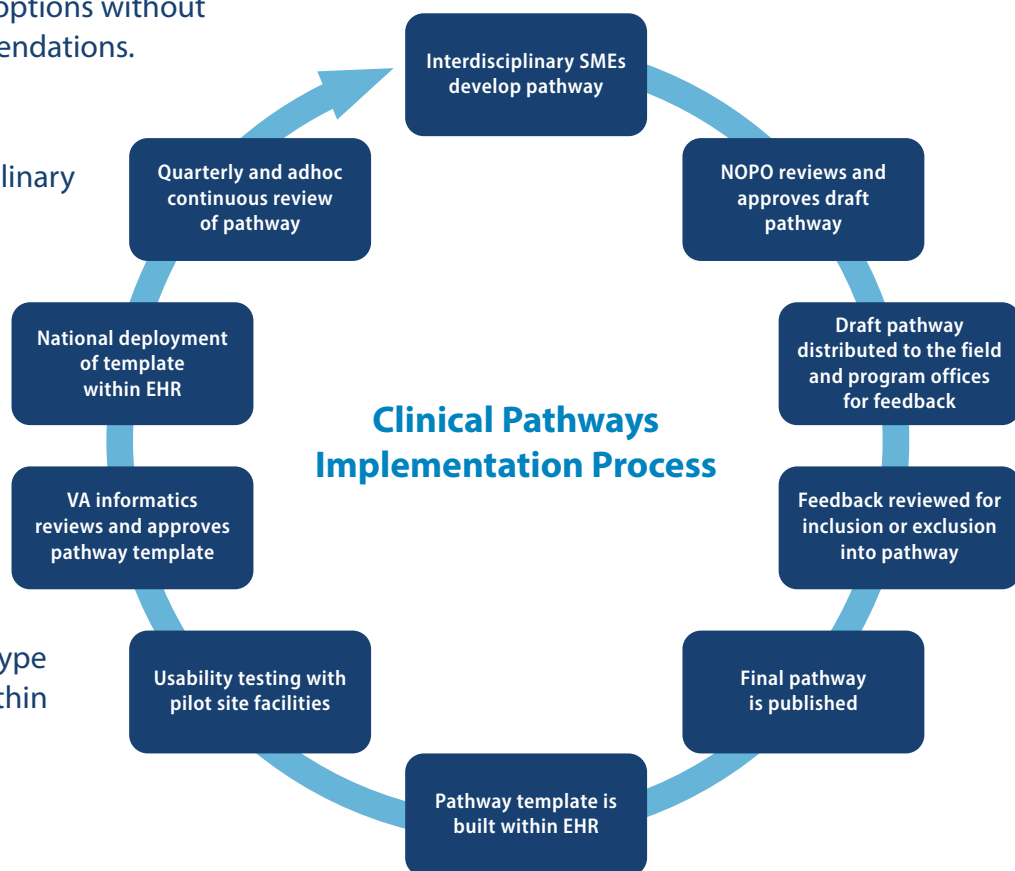
What are Oncology Clinical Pathways?

Evidence for cancer treatment is constantly evolving. This can result in lag times for system-wide implementation and variability in treatments for Veterans. Clinical Pathways (CPs) are a decision support tool that bridge this gap by translating published evidence into standardized treatment process maps to help guide treatment decisions.

CPs standardize evidence-based practices to ensure high quality, cost-effective care for Veterans at each point in their care plan. CPs are different from treatment guidelines, as **CPs recommend a standard treatment based on EFFICACY, TOXICITY, and COST**. Guidelines, on the other hand, offer treatment options without always prioritizing specific recommendations.

CPs are developed by an interdisciplinary subject matter expert (SME) group and approved by national program offices including medical oncology, radiation oncology, surgery, pathology, and pharmacy.

CPs are published to the National Oncology SharePoint site and reviewed on a recurring basis. Additionally, each CP cancer type will have an associated template within the Electronic Health Record (EHR).



VHA is deploying CP templates within the EHR to all sites of care. If your site does not yet have the CP templates implemented, clinicians should still follow the CP recommendations from the **National Oncology SharePoint** site.

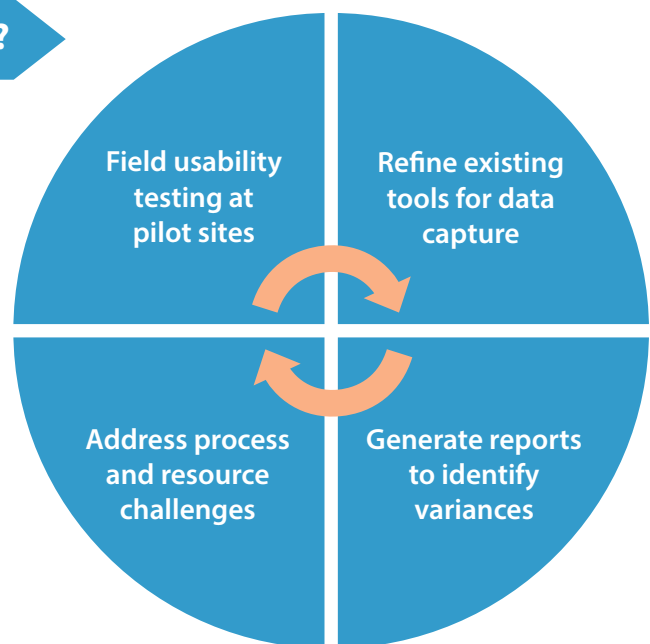
When should clinicians use Oncology Clinical Pathways?

The recommended CPs may not be appropriate for all Veterans with a specific disease presentation. In general, CPs are designed to accommodate most Veterans with an “on-pathway” recommendation. If a clinician determines that the Clinical Pathway recommendation is not appropriate for a specific Veteran, they may go “off-pathway.” The CP templates within the EHR system will prompt the reason for the off-pathway choice.

A Clinical Pathway never replaces clinical judgement. Common off-pathway reasons include comorbidities, a drug contraindication, or Veteran preference.

Why are Clinical Pathways valuable to clinicians?

- o **Clinicians can trust they have the most up-to-date treatment recommendations.** CPs are reviewed regularly and revised based upon published literature and Veteran outcomes, allowing clinicians using CPs to provide the highest quality care.
- o **CP templates facilitate the documentation of medical decision-making.**
- o **Clinicians continue to have autonomy in recommending the most appropriate treatment.** CPs help clinicians select the most effective and least toxic treatment but do not take the place of clinical judgement.



Data collected through CPs facilitate continuous process improvement

Why are Clinical Pathways beneficial for Veterans?

- o **Veterans will always have access to the highest quality of care, no matter where they live.** CPs are updated no less than quarterly to ensure the latest data is incorporated into treatment recommendations.
- o **Veterans are provided the most effective and least toxic treatment options.** CP recommendations are based upon national guidelines, published literature, and institutional experience with: efficacy, toxicity, and cost.
- o **Veterans still have treatment options.** Although CPs are designed to accommodate most Veterans' treatment needs, VA clinicians may go off-pathway when clinically appropriate

For more information on Clinical Pathways, please see the **Clinical Pathways FAQ Sheet** or contact VHAOncologyPathways@va.gov