

Supplemental Figures and Tables:

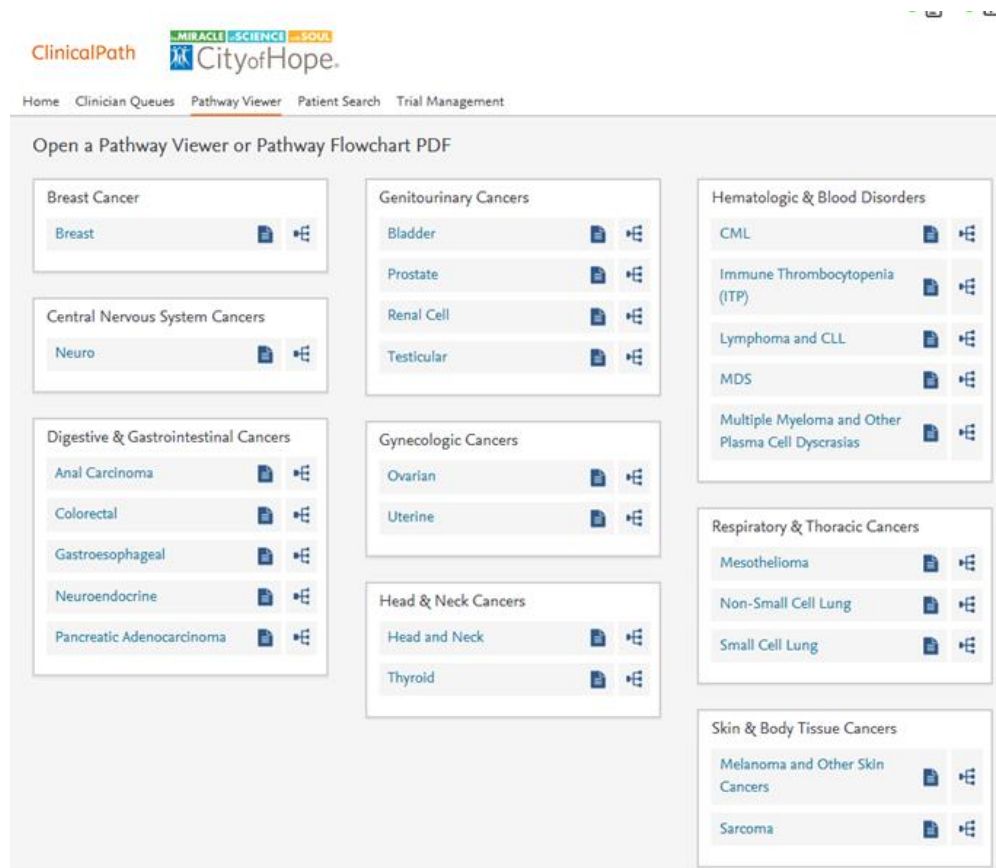


Figure S1: Tumor Types by Disease Categories in City of Hope’s ClinPath Pathways.

| Table S1: Tumor Board Quality Improvement Questionnaire | |
|---|-----------------------------------|
| Case Submission | |
| 1 | Date |
| 2 | Submitting Provider |
| 3 | Medical Record Number |
| 4 | Primary Site |
| 5 | Case Description |
| 6 | Initial Presentation or Recurrent |
| 7 | Histology |
| 8 | TNM Stage |
| 9 | Question for Radiology |
| 10 | Question for Pathology |
| 11 | Question for Surgery |
| 12 | Question for Medical Oncology |
| 13 | Question for Radiation Oncology |
| 14 | Question for Genetics |
| 15 | Other Questions |
| 16 | Question for Tumor Board |
| Case Discussion Results | |

| | |
|----|-------------------------------------|
| 1 | Tumor Board Date |
| 2 | Medical Record Number |
| 3 | Radiology Recommendations |
| 4 | Pathology Recommendations |
| 5 | Surgery Recommendations |
| 6 | Medical Oncology Recommendations |
| 7 | Radiation Oncology Recommendations |
| 8 | Genetics Recommendations |
| 9 | Other Recommendations |
| 10 | Overall Tumor Board Recommendations |