

## Peer Review File

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### Reviewer A

I think this is an excellent paper that teases out and specifies what is needed for these very important programs. It highlights the importance of rapid response clinics not only to the patient but also to the system by increasing the number of referrals.

I think it would also lend itself to excellent follow up work for instance, utilizing a well oiled PROP program and identifying how it was set up, the day to day workings, the challenges and the positives of the program. Including patient perspective would be great.

Reply: Thanks for your kind review. We agree with your comments about a follow-up paper detailing the inner workings of a PROP. One of the main objectives of the current project was to lay a foundation for developing a white paper detailing how to build, maintain, and sustain a PROP and further develop the logistics and strategies to make a successful PROP.

Changes in the text: None

### Reviewer B

This is an interesting and important topic and I commend the authors on a well written Discussion section. It highlights the importance of Palliative Radiation Oncology and enablers and barriers to creating a sustainable program.

I found the abstract “dense” and long (although I presume it is within the guidelines for the journal) and thus hard to absorb – as was the Results section although the Tables and Discussion were easier to follow. I wonder if the barriers/enablers could be grouped in some way (eg “logistics/organization”, “expertise/interest” etc) to understand and absorb information more easily.

It would be helpful to provide information about representativeness of the responders as compared to non-responder members of SPRO (if that information is available). I only found one comment that “some members are residents/trainees, so they didn’t respond”. The discussion appropriately cautions that SPRO members are not representative of RO at large.

I note that 10 of the responders were non-US based. Given relatively small numbers, I don’t think it would be appropriate to separate responders by country of practice, although I was curious whether their responses were different or not from US based, and whether they were from a broad range of countries or not.

Survey was done in 2019 – would be worth adding a comment in Limitations (or discussion) that practice pre vs post COVID may be different although the question of palliative RT and symptom management is still very relevant.

Comments1: “I found the abstract “dense” and long (although I presume it is within the guidelines for the journal) and thus hard to absorb – as was the Results section although the Tables and Discussion were easier to follow. I wonder if the barriers/enablers could be grouped in some way (eg “logistics/organization”, “expertise/interest” etc) to understand and absorb information more easily.

Response1: We did follow the journal guidelines for the abstract, but agree that it is dense and that this type of survey data is hard to distill and display simply, which is why we designed the tables ranking each element from highest to lowest response. We did try to streamline the results section of the abstract to make it more understandable. We chose to group the results section by the type of institution (those with PROPs, those desiring PROPs), which made it difficult to report barriers/enablers in a grouped or systematic way.

Changes in Text1: We made changes to streamline the abstract to make it more clear.

Comments2: “It would be helpful to provide information about representativeness of the responders as compared to non-responder members of SPRO (if that information is available)”

Response2: We agree that this would be helpful, but unfortunately, we don’t have this information due to the way that the data was collected and stored in RedCap.

Changes in Text2: None

Comments3: “I note that 10 of the responders were non-US based. Given relatively small numbers, I don’t think it would be appropriate to separate responders by country of practice, although, I was curious whether their responses were different or not from US based, and whether they were from a broad range of countries or not.”

Response3: Unfortunately, the way the survey was designed, the only data that was collected was US vs non-US, so we don’t have the actual countries that they came from. We anticipate that most of the non-US responses were from Canada, the UK, or Germany, since those are the countries with the most SPRO members. We agree that the comparison between responses for US vs non-US would be interesting, but this was not performed and is challenging with the way the data was collected and reported from RedCap.

Changes in Text3: none

Comments4: “Survey was done in 2019 – would be worth adding a comment in Limitations (or discussion) that practice pre vs post COVID may be different although the question of palliative RT and symptom management is still very relevant.”

Response4: We agree. We will make a comment to this in the limitations section of the discussion.

Changes in Text4: Additionally, the survey was completed in 2019 and prompt report was delayed due to the COVID pandemic. As a result, some of the practices regarding PROPs may have changed pre vs post pandemic, but the topic and the information remains very relevant.

**Reviewer C**

This is a short, well written report providing results of a small survey that did not lend itself to detailed statistical analysis. It has 43 references that appear appropriate. The Survey was conducted in July of 2019. It was not indicated why it took 4 years to process this and the authors do not discuss changes in 4 years that might affect interest in their data. Although a survey of only Society for Palliative Radiation Oncology members, presumably this captured most of those with the strongest interest in a palliative Radiation Oncology program. The findings may be most valuable to practices, often of non-members, contemplating establishment of a palliative Radiation Oncology program. The results may also assist those with a program to improve their existing operations. Surveying a larger group of Radiation Oncologists would be helpful and would bring more attention to palliative programs since all strive to improve quality and decrease costs for cancer patients.

This is a small study without detailed statistical analysis but it offers value and could be published without revision.

Comment 1: “Although a survey of only Society for Palliative Radiation Oncology members, presumably this captured most of those with the strongest interest in a palliative Radiation Oncology program.”

Comment 1: He chose to focus on the SPRO membership, because we felt these were most likely to have experience and exposure to PROPS and would provide the best insight and experience to make the survey meaningful.

Change in Text: None.

Comment2: “It was not indicated why it took 4 years to process this and the authors do not discuss changes in 4 years that might affect interest in their data”.

Reply2: Our initial plan was to turn this project around quickly, but Covid derailed our best intentions, and it took more activation energy than expected to bring it back to life as the pandemic subsided. We did add an additional comment in the limitation section of the discussion to address the Covid issue.

Changes in text: Additionally, the survey was completed in 2019 and prompt report was delayed due to the COVID pandemic. As a result, some of the practices regarding PROPS may have changed pre vs post pandemic, but the topic and the information remains very relevant.

Comment 2: Surveying a larger group of Radiation Oncologists would be helpful and would bring more attention to palliative programs since all strive to improve quality and decrease costs for cancer patients.

Response 2: We completely agree and this would be a great opportunity for a follow-up project. For the current project we tried to focus on those with the most experience with PROP, which were the SPRO membership.

Changes in the text: None

General Response to Reviewer C

Reply: We agree that the data, information, and results are important and that despite the small size, which limited statistical analysis it can be a valuable resource for those who would like to start a PROP and improving existing operations.