

## **Appendix 1 Assessment of dental practitioner attendance at head and neck cancer multidisciplinary meetings in Australia and New Zealand**

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The primary objectives of this study are the following:

1. Establish the make-up of Head and Neck MDT within Australian and New Zealand institutions
2. Identify the rates of Head and Neck MDT attendance by a dental practitioner
3. Describe the role of dental practitioners within Head and Neck MDTs (e.g. reviewing of OPGs, pre-surgical oral assessment, management of mucositis and conditions after surgery/radiotherapy, restoration of dental implants)
4. Identify the rate of ordering of OPGs and review at Head and Neck MDT
5. Describe the referral pathways for dental review prior to surgery and follow-up protocol post-operatively/post-radiotherapy

### *Survey Questions*

1. What is your role within the Head and Neck Cancer MDT?
2. Which hospital is your MDT primarily based and held?
3. Which department chairs the meeting?
4. What is the approximate population catchment that your MDT encompasses?
5. Do patients attend physically, or virtually, or are just their cases discussed?
6. Who attends your MDT?
  - 6.1. Listing of regular attending medical subspecialties
  - 6.2. Listing of regular attending allied health services
7. Are Orthopantomograms (OPG X-rays) routinely ordered and assessed for each patient?
8. Is there a referral pathway for patients to access dental review and treatment?
  - 8.1. If so, what is this pathway?
9. Are rates of osteoradionecrosis monitored and/or reported?
  - 9.1. If so, what are they?
10. Is there a dental practitioner who can restore dental implants or orally rehabilitate patients after head and neck cancer?