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Provide consistency and continuity in terms of who the patient sees and what is said.

2

Involve the Clinical Nurse Specialist throughout, starting as early as possible in the diagnostic pathway.

3

Ensure that staff involved in communicating a diagnosis of mesothelioma have specialist knowledge and training in mesothelioma, as well as communication skills. Training should be ongoing with access to regular updates.

4

Be patient-centred when communicating a diagnosis. Take cues from the patient and family in balancing what information to give and when. Use language that is easy to understand. Don't just rely on written information and booklets.

5

Ensure the patient feels they have been allocated sufficient time.

6

Provide a quiet and private environment to facilitate communication.

7

Make the patient feel like the most important person in the room, and at the centre of the communication process.

8

Be direct and honest whilst maintaining hope where possible, for example by providing information about appropriate treatments, symptom management and trials.

9

Use available expertise and resources. No single clinician should carry the responsibility of communicating a diagnosis on their own. Best practice is often from partnership working with different services and quality resources.

10

Prepare and plan as a team before communicating a diagnosis of mesothelioma. This should include the communication of a plan for ongoing management and treatment to the patient and family carer.