

Supplementary file 3: Topic guide for semi-structured interviews to identify facilitators and barriers to performing an efficient, competent and high-quality oncological multidisciplinary team meeting

1. Introduction
 - Introducing, asking for consent to recording, explaining goals.
 - Verifying specialty, resident or medical specialist, number and type of tumour-specific MDTMs* interviewee is participating in, and affiliated hospital.
2. MDTM quality
 - What is the quality of the MDTM(s) you participate in, in your experience? Reasons for answer.
 - What do you think is counterproductive to a good quality MDTM? Why/how does that influence your actions? How does it influence the outcomes of the MDTM? Can you give examples?
 - What do you like about the MDTM? Why/How does it affect your actions? Can you give examples?
 - Topics: chairperson, participants, tumour-specific expertise, minutes, question to be answered, presenting case, last-minute cases, postponing cases, presence treating physician, video conferencing.
3. Atmosphere and competences
 - What is the atmosphere in MDTMs, in your experience? Is there a hierarchy? If yes, what effect has this on the interviewee? What is your experience of the learning climate?
 - What is your experience of the educational function of MDTMs? What competences need to be acquired?
 - For residents: do you feel that the current form of MDTM participation prepares you for a role in the MDTM? If not, what is missing and why?
 - For medical specialists: how would you evaluate your current MDTM performance? How do you see your current teaching role during MDTMs?
4. MDTM improvements and future
 - Do you feel that changes / improvements in the MDTM are necessary? Why yes/no?
 - What is needed to improve the MDTM in the future? What is your role in this? What do you need for a future-proof MDTM? Can you give suggestions?

*MDTM = Multidisciplinary team meeting