

Factors Influencing Physician Selection Among Oncology Patients in Georgia

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Declaration of Originality

I hereby declare that this thesis is the result of my own independent work and investigation. All sources of information, quotations and ideas taken from the works of other authors are fully referenced and acknowledged in accordance with academic standards. I certify that this thesis has not been previously submitted, in whole or in part, for any other academic degree or qualification at this or any other institution.

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A handwritten signature in blue ink, appearing to read 'J.gh', is placed over a faint, light blue rectangular stamp.

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Abstract

Background: In oncology, selecting a physician is a high-stakes decision often made under emotional pressure and limited time. Understanding how patients navigate this process is essential for promoting patient-centered care and improving doctor–patient communication.

Objective: This study aimed to explore the factors that influence physician selection among oncology patients in Georgia and to compare the decision-making strategies used when selecting clinical versus surgical oncologists.

Methods: A cross-sectional survey was conducted using a structured, self-administered questionnaire. Data were collected both online and in-person from 81 oncology patients. Descriptive and inferential statistical analyses were performed using SPSS. The Adaptive Decision Maker Framework (ADMF) and the Patient-Centered Care (PCC) model were used to interpret findings.

Results: Communication style, emotional support, and physician professionalism emerged as the most valued attributes across both clinical and surgical oncologists. However, patients employed different decision-making strategies: while clinical oncologist selection was associated with analytic approaches and active information-seeking, surgical oncologist selection was driven more by emotional and intuitive factors. Trust in physician recommendations and preference for shared decision-making were also prominent findings. Demographic characteristics such as physician gender or appearance were rated as relatively unimportant.

Conclusion: The study highlights the variability in decision-making strategies based on physician specialty and underscores the need for adaptive, emotionally intelligent, and patient-centered communication. These insights can inform the training of oncology professionals and the design of more responsive healthcare environments.

Keywords: oncology, physician selection, decision-making, Adaptive Decision Maker Framework, patient-centered care, communication, oncology in Georgia

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