**Phase 1 Instructions**

Thank you again for participating in the development of OncQA!

You are now beginning Phase 1. Please determine whether there is enough information to provide an initial response, and if not provide what additional information from the patient’s medical record is needed. Then, provide a response to the best of your ability, similarly to how you would respond to a patient’s electronic medical record inbox message. You should type your answers where indicated below each question. Each question will be followed by a 2-question survey.

*It is important that you do not change the order of any of the samples in this document.*

*Please do not discuss or show the samples to anyone, including other participants.*

Please email us if you have any questions.

We are so appreciative of your help with this project.

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=================== New example ======================

Input: EHR Context:

Age: 55 years

Gender: Male

Cancer diagnosis: Stage III non-small cell lung cancer (NSCLC)

PMH: hypertension, hyperlipidemia

Prior cancer treatments: None

Current cancer treatments: radiotherapy with concurrent cisplatin (started 2 weeks ago)

Current medication list: lisinopril, amlodipine, simvastatin, aspirin, pantoprazole

Summary of most recent oncology visit (1 week ago): 55-year-old male with newly diagnosed stage III NSCLC. He is on chemoradiation and tolerating treatment well. No significant side effects were reported. Will continue treatment as planned.

Patient message:

I've been feeling more fatigued than usual for the past week, and I'm having trouble completing my daily tasks. Is this normal? Should I be concerned?

Type response here:yes, this is an expected side effect

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
| x |  |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
| x |  |  |  |  |

=================== New example ======================

Input: EHR Context:

Age: 39 years

Gender: Male

Cancer diagnosis: Stage IIA Hodgkin lymphoma

PMH: None

Prior cancer treatments: None

Current cancer treatments: ABVD (started 1 month ago)

Current medication list: None

Summary of most recent oncology visit (2 weeks ago): 39-year-old male with newly diagnosed stage IIA Hodgkin lymphoma. He is on ABVD and tolerating treatment well. Will continue treatment as planned.

Patient message:

I've developed a persistent cough and shortness of breath over the past few days. Is this a side effect of my treatment, or should I be concerned about something else?

Type response here: Yes, this is concerning and I need you to come in to clinic today so we can run some tests and possibly do a CT scan

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  |  | x |  |

=================== New example ======================

Input: EHR Context:

Age: 52 years

Gender: Male

Cancer diagnosis: Stage III gastric adenocarcinoma

PMH: peptic ulcer disease, hypertension

Prior cancer treatments: None

Current cancer treatments: FLOT regimen (started 1 month ago)

Current medication list: omeprazole, lisinopril, amlodipine, aspirin

Summary of most recent oncology visit (2 weeks ago): 52-year-old male with newly diagnosed stage III gastric adenocarcinoma. He is on peri-operative FLOT and tolerating treatment well. Will continue treatment as planned.

Patient message:

I've been experiencing persistent heartburn and indigestion for the past week. Is this a side effect of my treatment, or should I be concerned about something else?

Type response here: This can be related to the treatment you are receiving And we may need to adjust some of the medications that you're taking to mitigate these side effects.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

=================== New example ======================

Input: EHR Context:

Age: 62 years

Gender: Female

Cancer diagnosis: Metastatic cervical squamous cell carcinoma

PMH: hypothyroidism, diabetes

Prior cancer treatments: radical hysterectomy and adjuvant chemoradiotherapy (completed 1 year ago)

Current cancer treatments: chemotherapy and immunotherapy (started 2 months ago)

Current medication list: levothyroxine, metformin, acetaminophen, aspirin, atorvastatin, vitamin D

Summary of most recent oncology visit (6 weeks ago): 62 year old female with a history of cervical cancer s/p hysterectomy and adjuvant cisplatin-based chemoradiotherapy, now with distant recurrence to the liver and lungs. She is on first-line systemic therapy, and is doing well overall with mild neuropathy. Will continue treatment as planned.

Patient message:

I've been experiencing persistent pelvic pain for the past two weeks. I tried ibuprofen, but it didn't help much. What should I do to feel better? Do I need to go to the emergency room?

Type response here: Thanks for reaching out, before you go to the emergency room, why don't you come in and we can do an exam in the office and determine what to do next.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input: EHR Context:

Age: 58 years

Gender: Male

Cancer diagnosis: Stage II colorectal adenocarcinoma

PMH: hypertension, hyperlipidemia

Prior cancer treatments: surgery, adjuvant chemotherapy (completed 4 years ago)

Current cancer treatments: chemotherapy (started 3 weeks ago)

Current medication list: lisinopril, atorvastatin, aspirin, metoprolol, loperamide

Summary of most recent oncology visit (4 weeks ago): 58 year old male with a history of colorectal cancer s/p surgery and adjuvant chemotherapy, now with no evidence of disease on recent imaging. He is tolerating the chemotherapy well with minimal side effects. Will continue treatment as planned.

Patient message:

I've been experiencing worsening low back pain for the past week and fell twice yesterday. What should I do?

Type response here: It's possible that you may be dehydrated from the chemotherapy that you're receiving. I will need you to come in so that we can check your blood work and make sure that your blood numbers are not too low.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input: EHR Context:

Age: 58 years

Gender: Female

Cancer diagnosis: Metastatic colorectal adenocarcinoma

PMH: diabetes, hypertension

Prior cancer treatments: surgery, adjuvant chemotherapy with oxaliplatin and capecitabine (completed 3 years ago)

Current cancer treatments: chemotherapy only (started 2 months ago)

Current medication list: metformin, lisinopril, atorvastatin, aspirin, insulin glulisine

Summary of most recent oncology visit (6 weeks ago): 58 year old female with a history of colorectal cancer s/p surgery and adjuvant chemotherapy, now with distant metastases involving the liver, lungs. Since starting systemic therapy, she has had mild diarrhea. Will continue treatment as planned.

Patient message:

I feel really lightheaded this morning. I almost passed out when I got up from bed but my husband caught me. Is there anything I can do to feel better?

Type response here: You are most likely dehydrated, and will need to come in for fluids and some basic blood work

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input: EHR Context:

Age: 59 years

Gender: Female

Cancer diagnosis: borderline resectable pancreatic adenocarcinoma

PMH: diabetes, hyperlipidemia

Prior cancer treatments: none

Current cancer treatments: concurrent chemoradiation (started 1 month ago)

Current medication list: insulin glargine, metformin, atorvastatin, prochlorperazine

Summary of most recent oncology visit (2 weeks ago): 59 year old female with a new diagnosis of borderline resectable pancreatic cancer. She is on concurrent chemoradiation prior to consideration of surgery. Mild nausea and fatigue noted.

Patient message:

I've been experiencing persistent nausea and vomiting despite taking anti-nausea medications. I can’t keep down food. Should I make changes to any of my medications?

Type response here: This is most probably a result of the treatment that you're getting and we will need you to start on anti nausea medicine that works slightly better than what you're taking right now.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input: EHR Context:

Age: 52 years

Gender: Male

Cancer diagnosis: Metastatic renal cell carcinoma

PMH: none

Prior cancer treatments: nephrectomy, targeted therapy with tyrosine kinase inhibitors

Current cancer treatments: immunotherapy (started 3 months ago)

Current medication list: None

Summary of most recent oncology visit (2 weeks ago): 52 year old male with a history of renal cell carcinoma s/p nephrectomy, now on immune checkpoint inhibitors. He is tolerating the treatment well with no significant side effects. Will return to clinic in 4 weeks for re-staging scans

Patient message:

I've developed a rash over my chest and upper arms. It is very itchy. Is this a side effect of the treatment?

Type response here:Yes come in and let's take a look. you might be experiencing a reaction to your treatment.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  |  | x |  |

=================== New example ======================

Input: EHR Context:

Age: 59 years

Gender: Female

Cancer diagnosis: Stage IIA endometrial adenocarcinoma

PMH: obesity, hypertension, diabetes

Prior cancer treatments: surgery (6 weeks ago)

Current cancer treatments: radiotherapy

Current medication list: metformin, lisinopril, atorvastatin, ondansetron

Summary of most recent oncology visit (1 week ago): 59 year old female with a history of endometrial cancer s/p surgery, now receiving adjuvant radiotherapy. Mild nausea and fatigue noted at today’s visit.

Patient message:

I've been experiencing persistent nausea and vomiting despite taking Zofran. Should I try any other remedies or contact the oncology clinic for further guidance?

Type response here: We can try adding compazine to Zofran, but let's touch base in clinic tomorrow before your treatment

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
| x |  |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

=================== New example ======================

Input: EHR Context:

Age: 57 years

Gender: Female

Cancer diagnosis: locally advanced pancreatic adenocarcinoma

PMH: diabetes, hypertension, hyperlipidemia

Prior cancer treatments: FOLFIRINOX

Current cancer treatments: stereotactic radiotherapy (started 3 day ago)

Current medication list: metformin, lisinopril, atorvastatin, insulin glargine

Summary of most recent oncology visit (2 weeks ago): 57 year old female with locally advanced pancreatic cancer s/p FOLFIRINOX with slight radiographic progression. She will start stereotactic radiation shortly, and next steps will be based on response.

Patient message:

I've been feeling extremely tired and weak lately. Is this a common side effect of the treatment? Should I be concerned?

Type response here: And this is possible, but you need to come in for labs.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
| x |  |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
| x |  |  |  |  |

=================== New example ======================

Input: EHR Context:

Age: 59 years

Gender: Female

Cancer diagnosis: Stage IV ovarian serous carcinoma

PMH: hypertension, hyperlipidemia

Prior cancer treatments: surgery, adjuvant chemotherapy (completed 10 months ago)

Current cancer treatments: chemotherapy (started 2 months ago)

Current medication list: lisinopril, atorvastatin, aspirin

Summary of most recent oncology visit (6 weeks ago): 59 year old female with a history of ovarian cancer s/p surgery and adjuvant chemotherapy, now with distant metastases in the liver and brain. She has started second-line chemotherapy and is tolerating it well, although labs showed low-grade AKI today.

Patient message:

I've been feeling extremely fatigued and dizzy lately. Should I take any supplements or change my diet to improve my energy levels?

Type response here: No, we need to check your blood work and make sure that your kidneys are working well

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
| x |  |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  |  | x |  |

=================== New example ======================

Input:

EHR Context:

Age: 62 years

Gender: Female

Cancer diagnosis: Stage IIIA cervical squamous cell carcinoma

PMH: Hypothyroidism, diabetes

Prior cancer treatments: Radiotherapy with concurrent cisplatin (completed 1 year ago)

Current cancer treatments: None

Current medication list: Levothyroxine, metformin, acetaminophen, aspirin, atorvastatin, vitamin D

Summary of most recent oncology visit (6 weeks ago): 62-year-old female with a history of Stage IIIA cervical cancer s/p definitive cisplatin-based chemoradiation presents for follow-up one year post-treatment. She is clinically and radiographically without evidence of recurrence. Will continue ongoing surveillance.

Patient message:

I have noticed some white-yellow discharge from my vagina. Should I be concerned about a my cancer coming?

Type response here:It's unlikely that the cancer is coming back, but I will need to do an examination first to see what's going on.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

=================== New example ======================

Input:

EHR Context:

Age: 67 years

Gender: Male

Cancer diagnosis: favorable intermediate risk prostate adenocarcinoma

PMH: Benign prostatic hyperplasia (BPH), high cholesterol

Prior cancer treatments: Radical prostatectomy followed by adjuvant radiation therapy (completed 1 year ago)

Current cancer treatments: None

Current medication list: Tamsulosin, finasteride, atorvastatin, aspirin

Summary of most recent oncology visit (3 months ago): 67-year-old male with a history of prostate cancer s/p surgery and adjuvant radiation therapy presents for follow-up. Patient's PSA levels remain undetectable. Urinary incontinence, which occurred post-operatively, is slowly improving.

Patient message:

I have been experiencing worsening urinary incontinence again and new lower back pain. Should I come to the emergency room?

Type response here: Yes I need you to go to the emergency room now

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  |  | x |  |

=================== New example ======================

Input:

EHR Context:

Age: 60 years

Gender: Female

Cancer diagnosis: Stage IB non-small cell lung cancer

PMH: Chronic obstructive pulmonary disease (COPD)

Prior cancer treatments: Stereotactic body radiotherapy (completed 9 months ago)

Current cancer treatments: None

Current medication list: Albuterol, tiotropium, prednisone, aspirin

Summary of most recent oncology visit (3 months ago): 60-year-old female with a history of Stage IB lung cancer s/p stereotactic body radiation who presents for follow-up. Patient is clinically without evidence of recurrence.

Patient message:

I have a twinging pain in my chest that is worse when I press on it. It is minor but annoying. What should I do to make it better?

Type response here: Why don't you try taking ibuprofen and see if the pain response. this is likely the result of the treatment you got 9 months ago.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
| x |  |  |  |  |

=================== New example ======================

Input:

EHR Context:

Age: 74 years

Gender: Female

Cancer diagnosis: resectable pancreatic adenocarcinoma

PMH: Diabetes, hypertension

Prior cancer treatments: Whipple procedure followed by adjuvant chemotherapy with gemcitabine and nab-paclitaxel (completed 5 months ago)

Current cancer treatments: None

Current medication list: Insulin, metformin, lisinopril, atorvastatin

Summary of most recent oncology visit (3 months ago): 74-year-old female with a history of resectable pancreatic cancer s/p surgery and chemotherapy presents for follow-up. Patient is without evidence of recurrence. Will continue ongoing surveillance.

Patient message:

I've been experiencing persistent abdominal pain and bloating. Is this normal after my pancreatic cancer treatment?

Type response here: yes this can happen from time to time. if it persists, why don't you give me a call and I'll see you in the clinic and we can do an examination and run some basic blood work.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
| x |  |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

=================== New example ======================

Input:

EHR Context:

Age: 58 years

Gender: Male

Cancer diagnosis: Stage III esophageal adenocarcinoma

PMH: Gastroesophageal reflux disease (GERD)

Prior cancer treatments: chemoradiation with carboplatin/paclitaxel followed by esophagectomy (completed 7 months ago)

Current cancer treatments: None

Current medication list: Omeprazole, ranitidine, metoclopramide

Summary of most recent oncology visit (2 months ago): 58-year-old male with a history of Stage III esophageal cancer treated as per CROSS presents for follow-up. Patient is clinically without evidence of recurrence and is back at his pretreatment weight.

Patient message:

I've been experiencing difficulty swallowing recently. Do I need to be evaluated sooner than my next visit?

Type response here: this is likely a result of the treatment but you received. we will need to evaluate you.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input:

EHR Context:

Age: 48 years

Gender: Female

Cancer diagnosis: Stage III ovarian serous carcinoma

PMH: None

Prior cancer treatments: Surgery followed by chemotherapy with carboplatin and paclitaxel (completed 5 months ago)

Current cancer treatments: None

Current medication list: None

Summary of most recent oncology visit (3 months ago): 48-year-old female with a history of Stage III ovarian cancer s/p surgery and chemotherapy presents for follow-up. Patient is clinically without evidence of disease recurrence.

Patient message:

I've been having chest pain and shortness of breath for the past 3 days. What should I do?

Type response here: I need you to go to the emergency room to get a special scan to look at your heart, lungs, and blood vessels.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
| x |  |  |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  | x |  |  |  |

=================== New example ======================

Input:

EHR Context:

Age: 32 years

Gender: Male

Cancer diagnosis: Stage I testicular seminoma

PMH: None

Prior cancer treatments: Orchidectomy (completed 1 year ago)

Current cancer treatments: None

Current medication list: None

Summary of most recent oncology visit (6 weeks ago): 32-year-old male with a history of Stage I testicular cancer s/p surgery presents for follow-up. Exam and imaging showed no evidence of recurrence. Will continue ongoing surveillance.

Patient message:

I've had a cough and fever for the past 3 days. Could this be a sign of my cancer coming back?

Type response here: It's unclear at this point what's the cause of the cough maybe. why don't you come in and we can run some tests.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input:

EHR Context:

Age: 55 years

Gender: Male

Cancer diagnosis: Stage IIA colon adenocarcinoma

PMH: None

Prior cancer treatments: Surgery followed by adjuvant chemotherapy with oxaliplatin and fluorouracil (completed 7 months ago)

Current cancer treatments: None

Current medication list: None

Summary of most recent oncology visit (3 months ago): 55-year-old male with a history of Stage IIA colon cancer s/p surgery and chemotherapy presents for follow-up. He is doing well, no evidence of disease recurrence observed.

Patient message:

I've been experiencing frequent and urgent bowel movements. Could this be related to my cancer?

Type response here: It's unclear based on the information we have. I will need to evaluate you in clinic.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input:

EHR Context:

Age: 47 years

Gender: Female

Cancer diagnosis: Stage III retroperitoneal leiomyosarcoma

PMH: None

Prior cancer treatments: neoadjuvant radiation followed by surgery(completed 6 months ago)

Current cancer treatments: None

Current medication list: None

Summary of most recent oncology visit (3 months ago): 47-year-old female with a history of Stage III retroperitoneal leiomyosarcoma presents for follow-up. No evidence of disease recurrence on imaging.

Patient message:

I've been having irregular menstrual cycles. Is it normal after cancer treatment?

Type response here: This is probably a result of the treatment you got.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input:

EHR Context:

Age: 56 years

Gender: Male

Cancer diagnosis: Stage IIIA esophageal adenocarcinoma

PMH: Gastroesophageal reflux disease (GERD), hypertension

Prior cancer treatments: Chemoradiation therapy followed by esophagectomy (completed 1 year ago)

Current cancer treatments: None

Current medication list: Omeprazole, amlodipine, lisinopril

Summary of most recent oncology visit (6 weeks ago): 56-year-old male with a history of Stage IIIA esophageal cancer s/p chemoradiation therapy and surgery presents for follow-up. Patient is without evidence of disease recurrence.

Patient message:

I've been having difficulty swallowing. What should I do to feel better?

Type response here: This is most likely related to your previous treatment. I will need to see you in clinic to discuss further

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input: EHR Context:

Age: 55 years

Gender: Male

Cancer diagnosis: Stage IIIB non-small cell lung cancer

PMH: hypertension, hyperlipidemia

Prior cancer treatments: chemotherapy and radiation (completed 8 months ago)

Current cancer treatments: None

Current medication list: lisinopril, atorvastatin, aspirin, albuterol inhaler

Summary of most recent oncology visit (2 months ago): 55-year-old male with a history of Stage IIIB non-small cell lung cancer s/p chemotherapy and radiation presents for follow-up 8 months post-treatment. He is clinically and radiographically without evidence of recurrence. Will continue ongoing surveillance.

Patient message:

I've been experiencing shortness of breath and a persistent cough for the past week. I tried using my inhaler, but it doesn't seem to help. Should I be concerned about my symptoms? Do I need to schedule an appointment with you?

Type response here: This may be related to your previous treatment. I will have you come into the clinic and we can do a chest x-ray to begin with.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input: EHR Context:

Age: 67 years

Gender: Male

Cancer diagnosis: Stage II colorectal cancer

PMH: type 2 diabetes, osteoarthritis

Prior cancer treatments: surgery and adjuvant chemotherapy (completed 10 months ago)

Current cancer treatments: None

Current medication list: metformin, glipizide, celecoxib, calcium, vitamin D

Summary of most recent oncology visit (1 month ago): 67-year-old male with a history of Stage IVA colorectal cancer s/p surgery and adjuvant chemotherapy presents for follow-up 10 months post-treatment. He is clinically and radiographically without evidence of recurrence. Will continue ongoing surveillance.

Patient message:

I've been experiencing abdominal pain and bloating for the past week. It's been getting worse, and over-the-counter medications aren't helping. Should I come in for an evaluation? Is this a sign of recurrence?

Type response here: Yes, why don't you come in for an evaluation and we can take it from there

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input: EHR Context:

Age: 68 years

Gender: Male

Cancer diagnosis: Stage III gastric cancer

PMH: type 2 diabetes, osteoarthritis

Prior cancer treatments: surgery and peri-operative chemotherapy (completed 10 months ago)

Current cancer treatments: None

Current medication list: metformin, glipizide, celecoxib, calcium, vitamin D

Summary of most recent oncology visit (1 month ago): 68-year-old male with a history of Stage III gastric cancer s/p surgery and peri-operative chemotherapy presents for follow-up 10 months post-treatment. He is clinically and radiographically without evidence of recurrence. Will continue ongoing surveillance.

Patient message:

I've been experiencing persistent heartburn and indigestion for the past two weeks. I'm concerned that my cancer might be coming back. Should I schedule an appointment to discuss my symptoms?

Type response here: Yes we can go ahead and schedule an appointment so that I can take a look

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input: EHR Context:

Age: 53 years

Gender: Female

Cancer diagnosis: Stage IIIC endometrial cancer

PMH: hypertension, obesity

Prior cancer treatments: chemoradiotherapy (completed 1 year ago)

Current cancer treatments: None

Current medication list: lisinopril, metformin, aspirin

Summary of most recent oncology visit (3 months ago): 53-year-old female with a history of Stage IIIC endometrial cancer s/p chemoradiotherapy presents for follow-up 1 year post-treatment. She is clinically and radiographically without evidence of recurrence. Will continue ongoing surveillance.

Patient message:

I've been experiencing pelvic pain and some vaginal bleeding for the past week. I'm concerned that my cancer might be coming back. Should I schedule an appointment to discuss my symptoms?

Type response here: yes I'll see you in clinic and I'll have the front office reach out to you.

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

=================== New example ======================

Input: EHR Context:

Age: 57 years

Gender: Male

Cancer diagnosis: Stage IIB testicular cancer

PMH: asthma, seasonal allergies

Prior cancer treatments: orchiectomy and chemotherapy (completed 2 years ago)

Current cancer treatments: None

Current medication list: montelukast, fluticasone propionate, cetirizine

Summary of most recent oncology visit (6 months ago): 57-year-old male with a history of Stage IIB testicular cancer s/p orchiectomy and chemotherapy presents for follow-up 2 years post-treatment. He is clinically and radiographically without evidence of recurrence. Will continue ongoing surveillance.

Patient message:

I've noticed some swelling and discomfort in my remaining testicle. It's been going on for about a week now. Is this something I should be concerned about? Do I need to come in for an examination?

Yes, you should absolutely come in for an exam and some basic testing so that we can see what’s going on?

**How challenging was it to respond to this message?**

| Very trivial | Trivial | Neutral | Challenging | Very challenging |
| --- | --- | --- | --- | --- |
|  |  | x |  |  |

**Do you believe this patient is experiencing a severe medical event?**

| Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree |
| --- | --- | --- | --- | --- |
|  |  |  | x |  |