MITRE / FLUX NOTES PRE ENCOUNTER EDWIN CHOI, JUHAN SONIN, 23.FEB.2018	CARCINOMA	OF BREAST	vI2.9 (SELEC	TED CONCEPTS) goinvo

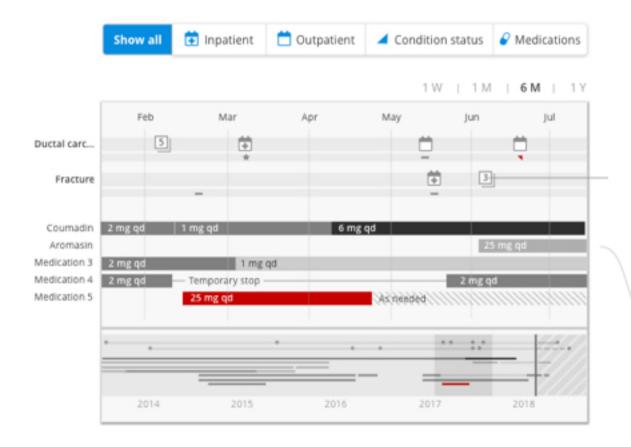
I FLUX NOTES FULL TIMELINE VIEWS

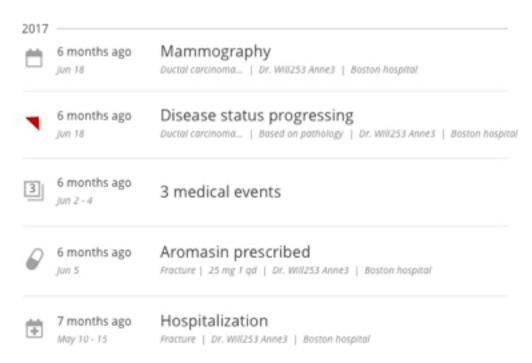
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FLUX NOTES FULL TIMELINE VIEWS

I.I FLUX NOTES FULL TIMELINE VIEWS

Timeline All conditions





Code Display Definition

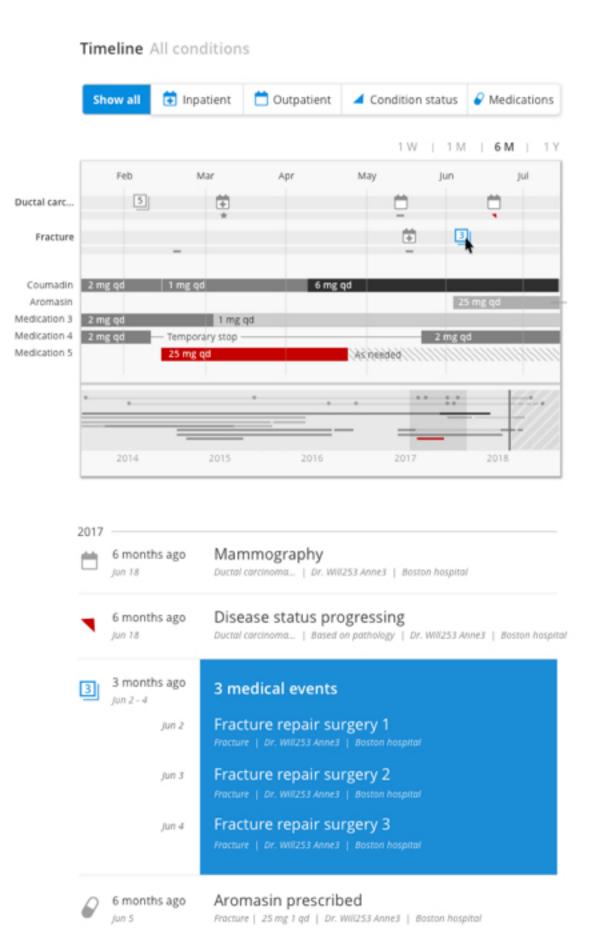
	,	
BID	BID	Two times a day at institution specified time
TID	TID	Three times a day at institution specified time
QID	QID	Four times a day at institution specified time
AM	AM	Every morning at institution specified times
PM	PM	Every afternoon at institution specified times
QD	QD	Every Day at institution specified times
QOD	QOD	Every Other Day at institution specified times
Q4H	Q4H	Every 4 hours at institution specified times
Q6H	Q6H	Every 6 Hours at institution specified times

Dose reduction and dose increase are more detailed elements separated by a subtle line, within the colors denoting total daily dose (less than maximum, maximum, over the maximum)

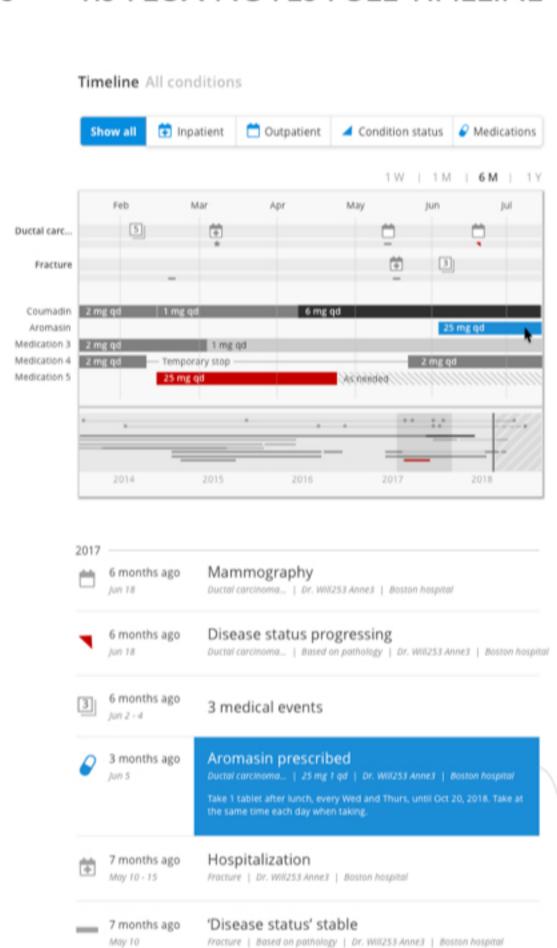
— Temporary stop — Medication temporarily interrupted

्रेक्ट्रेलेक्ट्रे!!!!! Take medication as needed

1.2 FLUX NOTES FULL TIMELINE VIEWS



WS 1.3 FLUX NOTES FULL TIMELINE VIEWS



Additional in medication.

1.4 FLUX NOTES FULL TIMELINE VIEWS

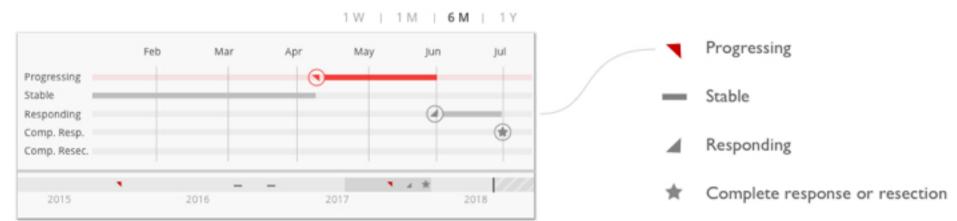
Disease status Ductal carcinoma of the breast

Current status

Progressing

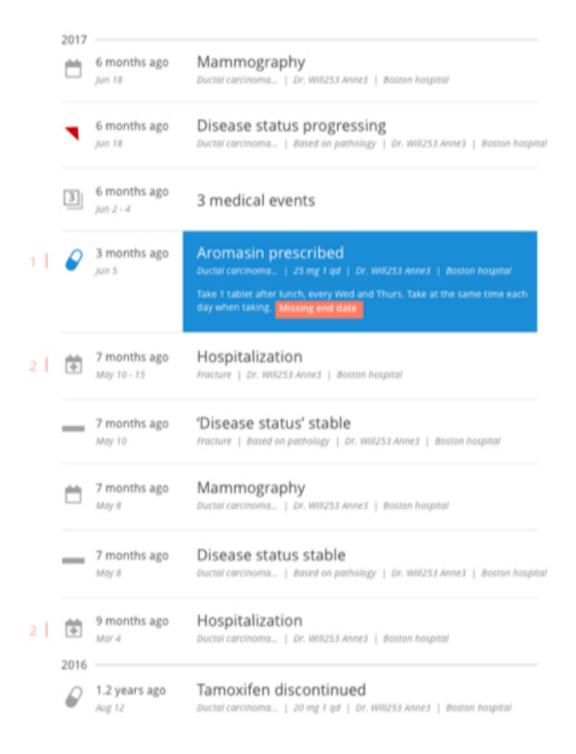
2 months ago | 10 Feb 2017 | Based on pathology | Dr. Will253 Anne3 | Boston hospital

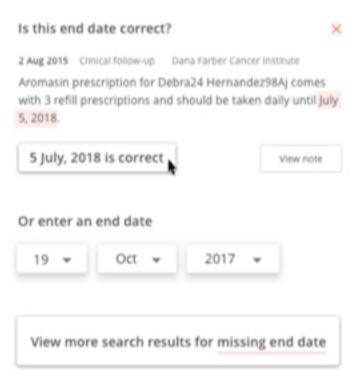
Disease status timeline

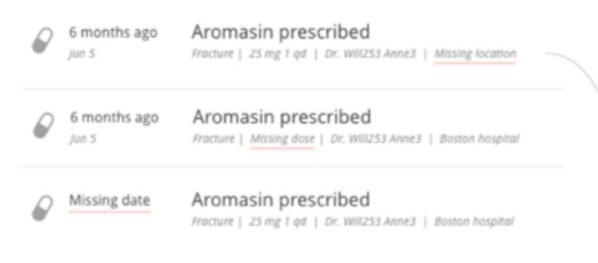


2017		
*	2 months ago	Disease status complete response Based on pathology Dr. Will253 Anne3 Boston hospital
4	3 months ago	Disease status responding Based on pathology Dr. Will253 Anne3 Boston hospital
016	5 months ago Apr 10	Disease status progressing Based on pathology Dr. WIIIZ53 Anne3 Baston haspital
_	1.2 years ago	Disease status stable Based on pathology Dr. WIII253 Anne3 Boston hospital
-	1.5 years ago Mar 12	Disease status stable Based on pathology Dr. WIII253 Anne3 Boston hospital
015 014		

2 MISSING DATA WITHIN VISUALIZATION







Missing data can be indicated directly onto the row entry, which is mapped to the points in the visualization. Indicating missing data directly on the visualization may produce visual clutter as space is limited.

3 FLUX NOTES FULL TABULAR VIEW

Other substances	None
Exercise hours per week	3 hours
Etc	

Environment	Environment value		
Household size	4		
Domestic violence	None		
Number of dependents	2		
Can afford food	Yes		
Can afford housing	Yes		
Etc			

Family history -

Relation	Name	Date of birth	Conditi
Father	Willie24 Hernandez98Aj	1 Jan 1945 (76)	Type II
Mother	Jan24 Hernandez 98Aj	1 Jan 1945 (76)	Type II
Sister	Jen82 Hernandez98Aj	1 Jan 1945 (76)	Type II
Brother	Dave30 Hernandez 98Aj	1 Jan 1945 (76)	Type II
Maternal grandmother	Jan24 Hernandez 98Aj	1 Jan 1945 (76)	Type II
Maternal grandfather	Jan24 Hernandez 98Aj	1 Jan 1945 (76)	Type II
Paternal grandmother	Jan24 Hernandez 98Aj	1 Jan 1945 (76)	Type II
Paternal grandfather	Jan24 Hernandez 98Aj	1 Jan 1945 (76)	Type II
Other relation	Jan24 Hernandez 98Aj	1 Jan 1945 (76)	Type II

Family history -

Relation		Date of birth	Conditions
Father	:98Aj	1 Jan 1945 (76)	Type II diabetes, high blood pr
Mother	8Aj	1 Jan 1945 (76)	Type II diabetes, high blood pr
Sister	ЗАј	1 Jan 1945 (76)	Type II diabetes, high blood pr
Brother	98Aj	1 Jan 1945 (76)	Type II diabetes, high blood pr
Maternal grandmother	8Aj	1 Jan 1945 (76)	Type II diabetes, high blood pr
Maternal grandfather	8Aj	1 Jan 1945 (76)	Type II diabetes, high blood pr
Paternal grandmother	8Aj	1 Jan 1945 (76)	Type II diabetes, high blood pr
Paternal grandfather	8Aj	1 Jan 1945 (76)	Type II diabetes, high blood pr
Other relation	8Aj	1 Jan 1945 (76)	Type II diabetes, high blood pr

First column is fixed. The current width of the content area is based on the $\sim\!12$ word per line guideline for optimal text length.

3.2 FLUX NOTES FULL TABULAR VIEW 3.3 FLUX NOTES FULL TABULAR VIEW

Disease status Invasive ductal carcinoma of breast

 77 77 7	 all for to had to	Section	5-11-15-0	 20.0	Date:	See Self and Se	

Status	Date	Rationale
Progressing	10 Feb 2017	Pathology
Responding	10 Feb 2014	Pathology
Progressing	10 Feb 2017	Pathology, imaging
Responding	10 Feb 2014	Pathology
Progressing	10 Feb 2017	Markers, imaging
Complete resection	10 Feb 2014	Pathology
Progressing	10 Feb 2017	Symptoms, imaging, pathology
Stable	10 Feb 2014	Pathology, imaging, symptoms, exam
Progressing	10 Feb 2017	Pathology
Responding	10 Feb 2014	Pathology

< 1 2 3 4 5 6 >

1-10 entries of 120

Pagination will allow the vertical space of the section to remain the same. The number of entries or rows to be shown will depend on clinician needs for each section/ category of information.

Red text denotes a warning (whether it's a progressing disease status, medication dosage over the maximum, severe allergic reaction, etc), similar to the red used in the visualization modes.

Medications /	All conditions
Medicalions	all conditions



Medication	Dosage	Timing	Start	End
Adriamycin	6 10°/L	6 cycles	10 Feb 2012	20 Aug 2012
Cyclophosphamide	10 mg	6 cycles	10 Feb 2012	30 Aug 2012
Tamoxifen	20 mg	qd	1 Nav 2013	13 Aug 2016
Letrazole	2 mg	qd	5 Sep 2015	1 Jun 2017
Coumadin	2 mg	qd	5 Sep 2015	1 Jun 2017
Aromasin	25 mg	qd	5 Oct 2017	1 May 2018

Current schedule

Medication	Instructions
Letrazole	Take 1 tablet with breakfast
Aromasin	Take 1 tablet after breakfast
Tamoxifen	Take 1 tablet with dinner
Coumadin	Take 1 tablet an hour before sleeping

Not all subsections will require pagination. Some subsections will tend to have fewer rows than others (current medications vs medication timeline for example)

Previous medications -

Medication	Dosage	Timing	Start	End
Tamoxifen	20 mg	qd	1 Nov 2013	13 Aug 2016
Letrazole	2 mg	qd	5 Sep 2015	1 Jun 2017
Coumadin	2 mg	qd	5 Sep 2015	1 Jun 2017
Aromasin	25 mg	qd	5 Oct 2017	1 May 2018
Tamoxifen	20 mg	qd	1 Nov 2013	13 Aug 2016
Letrazole	2 mg	qd	5 Sep 2015	1 Jun 2017
Coumadin	2 mg	qd	5 Sep 2015	1 Jun 2017
Aromasin	25 mg	qd	5 Oct 2017	1 May 2018
Coumadin	2 mg	qd	5 Sep 2015	1 Jun 2017
Aromasin	25 mg	qd	5 Oct 2017	1 May 2018

3.4 FLUX NOTES FULL TABULAR VIEW

Allergies All conditions

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6 total allergies

Allergy	Severity	Effects
Peanut butter	Severe	Hives, swelling of the throat
Acetyl salicylic acid	Severe	Drowsiness, ringing in ears, wheezing
Docetaxel anhydrous	Moderate	Itchy skin, swelling in mouth
Pollen	Moderate	Watery eyes, scratchy throat
Amoxicillin	Mild	Flushing, lightheadedness
lodinated contrast	Mild	Hives

No known ___ allergies

No recorded data for ____ allergies

Allergy tests

Allergy

Allergy panel test on 10 May 2017

Severity

0,7	
Acetyl salicylic acid	Severe
lodinated contrast	Mild
Milk	No reaction
Bee venom	No reaction
Pet dander	No reaction
Bee venom	No reaction
Pet dander	No reaction
Bee venom	No reaction
Pet dander	No reaction
Bee venom	No reaction
Pet dander	No reaction
Bee venom	No reaction
Pet dander	No reaction
Bee venom	No reaction
Pet dander	No reaction

The history of patient allergies is organized by:

Panel tests

Standalone events in which allergies were inadvertently discovered

Panel tests can test up to dozens of allergens. There may not be a need to display many of the panel test entries all at once (unlike more frequent tests like blood panels)

Severity
Severe
Mild
No reaction

< 1 2 3 4 5 6 >

1 entry of 6

Allergy timeline

Allergy	Severity	Effects
Peanut butter	Severe	Hives, swelling of the throat
Acetyl salicylic acid	Severe	Drowsiness, ringing in ears, wheezing
Docetaxel anhydrous	Moderate	Itchy skin, swelling in mouth
Pollen	Moderate	Watery eyes, scratchy throat
Amoxicillin	Mild	Flushing, lightheadedness
lodinated contrast	Mild	Hives
Peanut butter	Severe	Hives, swelling of the throat
Acetyl salicylic acid	Severe	Drowsiness, ringing in ears, wheezing
Docetaxel anhydrous	Moderate	Itchy skin, swelling in mouth
Pollen	Moderate	Watery eyes, scratchy throat

< 1 2 3 4 5 6 >

1-10 entries of 150

The history of patient allergies is organized by:

Panel tests

Standalone events in which allergies were inadvertently discovered

Panel tests can test up to dozens of allergens. There may not be a need to display many of the panel test entries all at once (unlike more frequent tests like blood panels)

3.5 FLUX NOTES FULL TABULAR VIEW

Labs Invasive ductal carcinoma of breast

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Panel tests

Lipid panel on 7 Dec 2017

Test	Value	
Total cholesterol	150 mg/dl	
HDL cholesterol	35 mg/dl	
LDL cholesterol	46 mg/dl	

Lipid panel on 12 Oct 2016

Test	Value
Triglycerides	112 mg/dl
Total cholesterol	150 mg/dl
HDL cholesterol	35 mg/dl

Metabolic panel...

Test	Value
Triglycerides	112 mg/dl
Total cholesterol	150 mg/dl
HDL cholesterol	35 mg/dl

Lipid panel on 12 Oct 2016

Test	Value
Triglycerides	112 mg/dl
Total cholesterol	150 mg/dl
HDL cholesterol	35 mg/dl

Metabolic panel...

Total cholesterol	150 mg/dl
HDL cholesterol	35 mg/dl

1 2 3

1-5 panel test entries of 15

Labs

White blood cell count	Date
8.12 10 ⁹ /L	2 Jan 2018
6.75 10 ⁹ /L	27 Dec 2017
4.72 10 ⁹ /L	19 Dec 2017
1.86 10 ⁹ /L	12 Dec 2017
3.37 10 ⁹ /L	5 Dec 2017
6.75 10 ⁹ /L	27 Dec 2017
4.72 10 ⁹ /L	19 Dec 2017
1.86 10 ⁹ /L	12 Dec 2017
3.37 10 ⁹ /L	5 Dec 2017
1.86 10 ⁹ /L	12 Dec 2017

Neutrophil count Date 4.3 109/L 2 Jan 2018 2.6 10⁹/L 27 Dec 2017 1.9 10⁹/L 19 Dec 2017 1.2 10⁹/L 12 Dec 2017 2.3 10⁹/L 5 Dec 2017 2.6 10⁹/L 27 Dec 2017 1.9 10⁹/L 19 Dec 2017 1.2 10⁹/L 12 Dec 2017 5 Dec 2017 2.3 10⁹/L 2.6 10⁹/L 27 Dec 2017

1 2 3 4 5 6

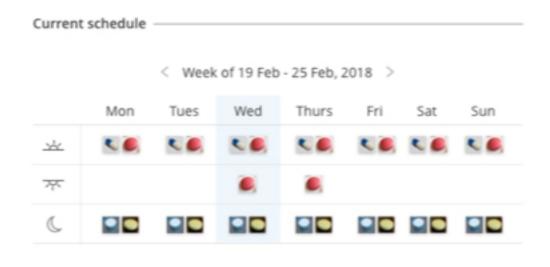
1-10 entries of 120

4 MEDICATION SCHEDULE VIEW

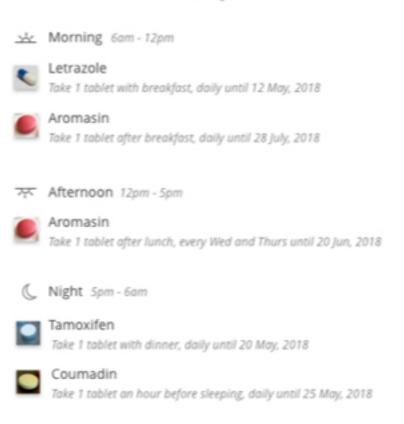


MEDICATION SCHEDULE VIEW

4.1 MEDICATION SCHEDULE VIEW



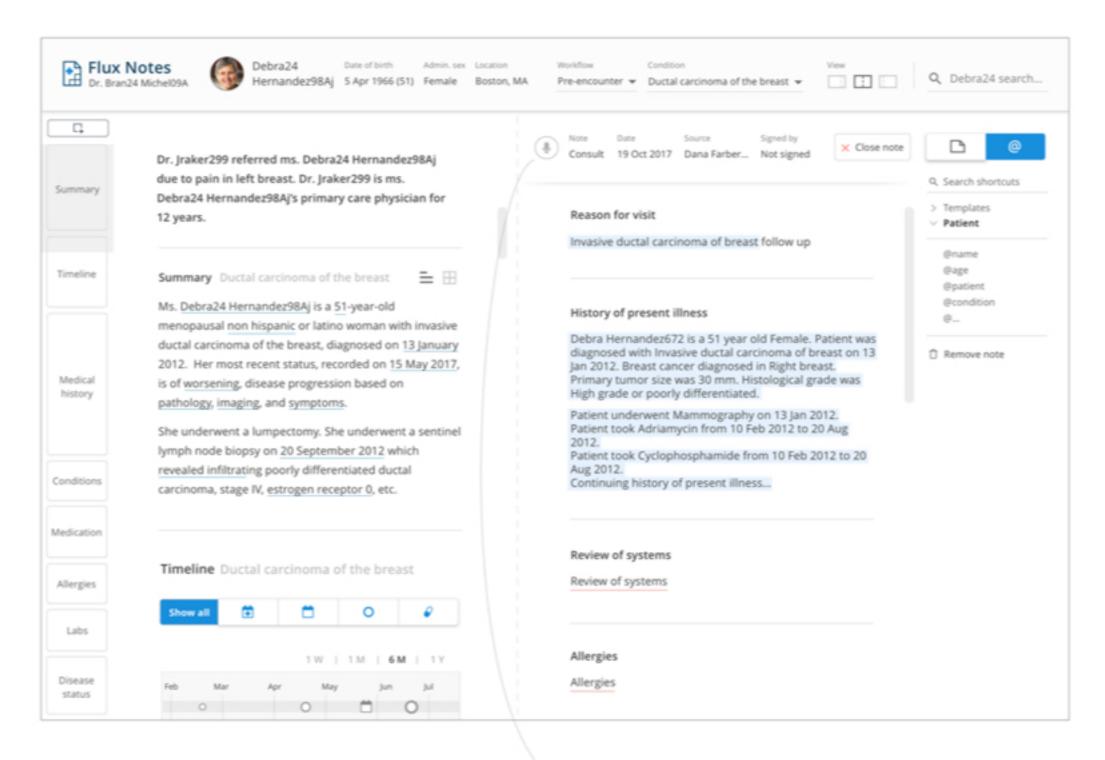
Schedule for Wednesday, 21 Feb 2018



4 NOTE AUTHORING MODE CONCEPTS

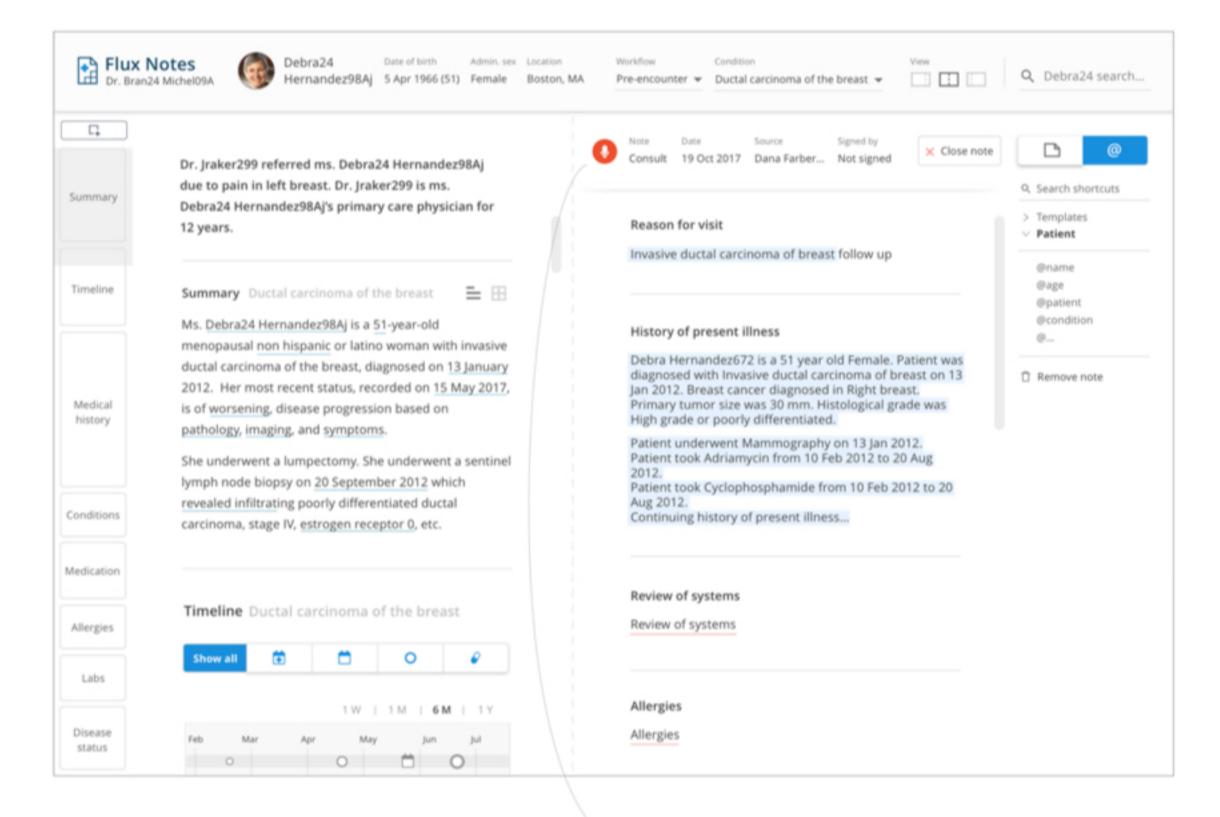
NOTE AUTHORING MODE CONCEPTS

5.1 NOTE AUTHORING MODE CONCEPTS



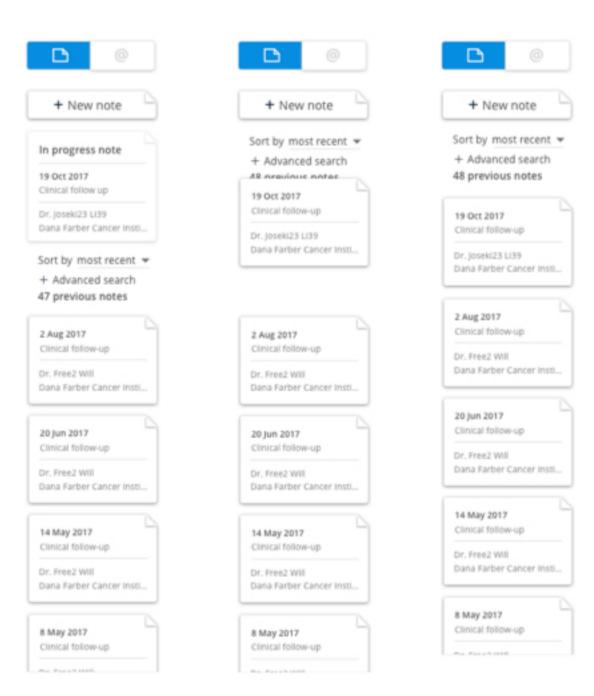
Visual icon denotes that the clinician can begin dictating

5.2 NOTE AUTHORING MODE CONCEPTS



During dictation, the icon turns red (recording) to show that it is listening

5.3 NOTE AUTHORING MODE CONCEPTS



Once a clinical note has been signed, the right context tray returns to showing a list of clinical notes. A quick animation occurs in which the in progress note moves down to the 'previous notes' area to provide a temporary indication that it has in fact been saved in the system.