

This poster documents the data elements within the Flux Notes pre encounter view.
The items in blue are highest priority for the user, a clinical oncologist, to view.

DISCUSSION POINTS

What data should always be displayed regardless of user/use-case/condition?
What is all the necessary data for a pre-encounter oncologist view?
For this pre-encounter oncologist view, what data is High / Medium / Low priority?

GLOBAL / NAVIGATION

USER / MODE

Name of user

Current mode of user (view, clinical note)

Use case

Possible use cases:

- Pre-encounter
 - Pre-surgery
 - Post-surgery
 - Follow-up
- Review patient / consultation
- Encounter
- Post-encounter
- Population health

PATIENT SUMMARY

DEMOGRAPHIC / IDENTIFICATION

Patient name

MRN

DoB

Administrative gender

Location

Place of birth

Birth sex

Race

Ethnicity

Marital status

Mothers maiden name

Fathers name

Address

Telephone (home)

Telephone (mobile)

Language used

Chief complaint

RECENT LAB RESULTS

Hemoglobin

WBC

TIMELINE VIEW

BREAST CANCER TREATMENT DATA

Progression scale over time

Chemotherapy

- WBC over time
- Defined pathways
- % compliance with pathways

Prescriptions

- Name of prescription
- Time interval of prescription
- Dosage of prescription

Key events

- Hospitalizations
 - Location of hospitalization
 - Date of hospitalization
- Procedures
 - Name of procedure
 - Date of procedure

CONDITION

BREAST CANCER TREATMENT DATA

Name of condition

Current staging

- Tumor
- Node
- Metastasis

Disease status

- Status of disease
- Rationale

Event date

- Diagnosis date
- Recurrence date

Toxicity assessment

- Adverse event
- Grade
- Attribution

Pathology results

Oncotype DX recurrence score

Genetic testing

Best overall response

Target vs non-targeted lesion assessment

Radiology assessment

Risk factors

RELEVANT DATES

Procedures

- Name
- Date of procedure

PROTOCOL / PATHWAY

Clinical pathways

Protocol

- Current protocol
- Patients current place in protocol

Chemotherapy

- Dose
- Cycle

Regimen

- Current regimen
- Prior regimen(s)

Risk stratification for the patient