

①

Give [ ] 111 000

APPOINTMENT RECEIPT: DR. KAREN 1/20

THANK YOU FOR \_\_\_\_\_

- APPOINTMENT TIME SCHED.
- INSURANCE.
- ESTIMATED COST.
- DOCTOR INFO.
- PATIENT CONFIRM #

WHAT YOU NEED:  
ECT TIME:  
ADDITIONAL DIRECTIONS

- view summary of  
concern  
MEDICAL HISTORY  
ONLINE ON  
YOUR ACCOUNT.

②

3 : 21

CONFIRMED:  
APPOINTMENT: DR. KAREN  
1/20, 6:00PM.

APPOINTMENTS?  
DATE/SCHED.  
(?) OVERALL CALENDAR?

ACCESS MEDICAL HISTORY  
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VIEW

A - - - - -

APPOINT TIME / DATE

D DOCTOR CONTACT INFO.  
PATIENT: REASON  
CONCERN: / FOR VISIT.  
WHAT YOU NEED.

CONFIRMED.

CANCEL.

- VIEW IN LIST  
- VIEW ON CAL.

③

2:15

NOTE:  
SUMMARY  
OF  
ENCOUNTER

Summary  
OF ENCOUNTER

DOCTOR  
CONCERN.

PROCEDURE  
DIAGNOSTIC  
IMAGING.

DOCTOR'S NOTES NOW AVAILABLE TO VIEW.  
BIOPSY.

BIOPSY: DEFINITION

INFORMATIONAL  
OR PROCEDURAL

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JANUARY 25, 2018.

6:00 PM  
LOCATION

REASON:  
~~REASON~~

PROCEDURE:

WHAT TO DO BEFORE:  
① (X) ② (X) ③ (X)

POSSIBLE OUTCOMES.

- ANTICIPATING  
- CONCERNED.  
WANT TO KNOW:  
- IS IT  
CANCEROUS?

③ BIOPSY: JANUARY 25, 2018  
TIME  
LOCATION

IN PREPARATION:  
① (X) ② (X) ③ (X)  
① (X) ② (X) ③ (X)

PROCEDURE DEF./ WHAT HAPPENS.

SUMMARY: 00/00/00 0:00  
CONCERN:  
DOCTOR INFO

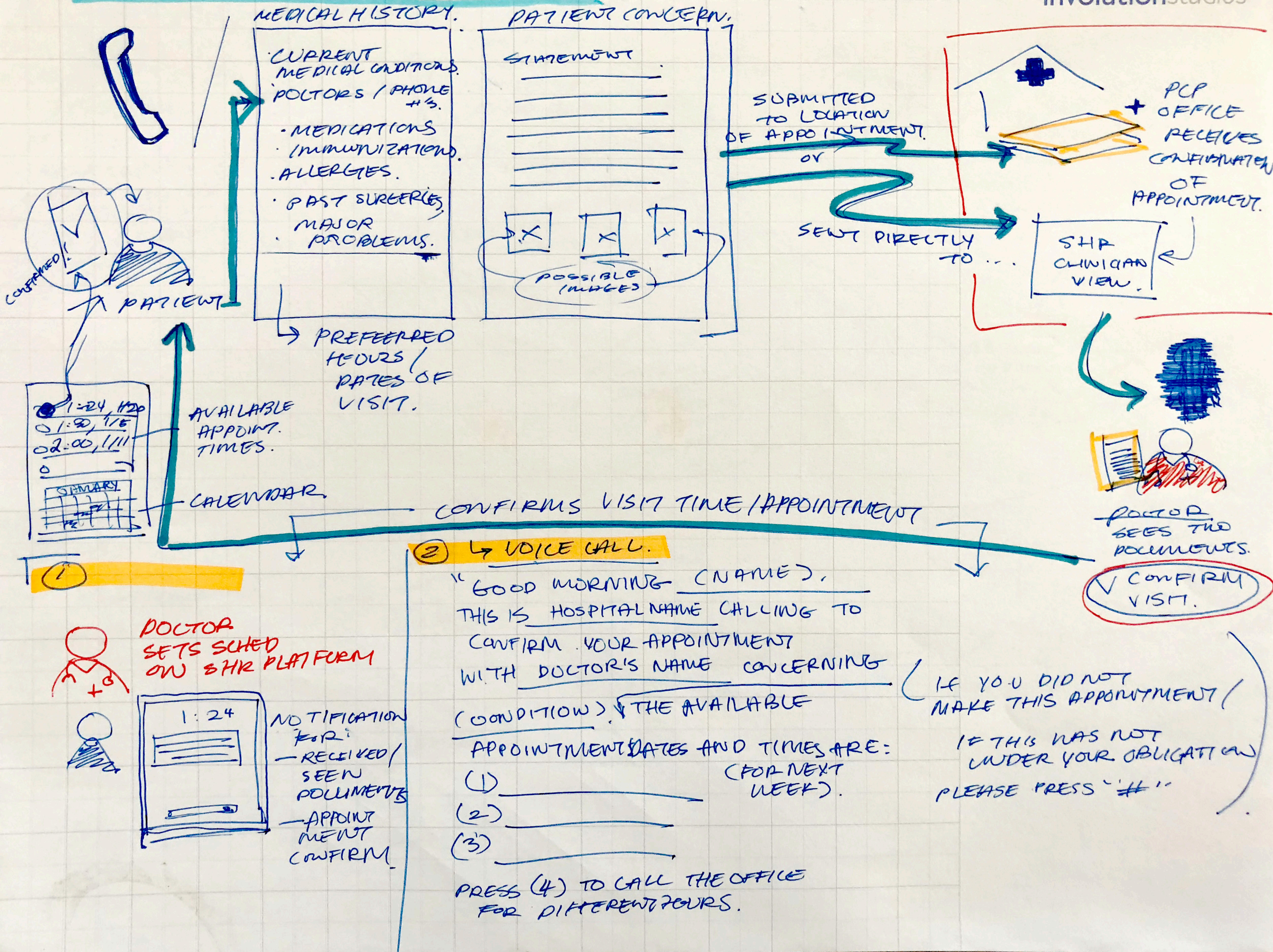
PROCEDURES COMPLETED: DATE/TIME  
① ② ③ link.

DOCTORS NOTES:  
BIOPSY.  
REASON FOR.  
THOUGHTS.

APPOINT: BIOPSY.

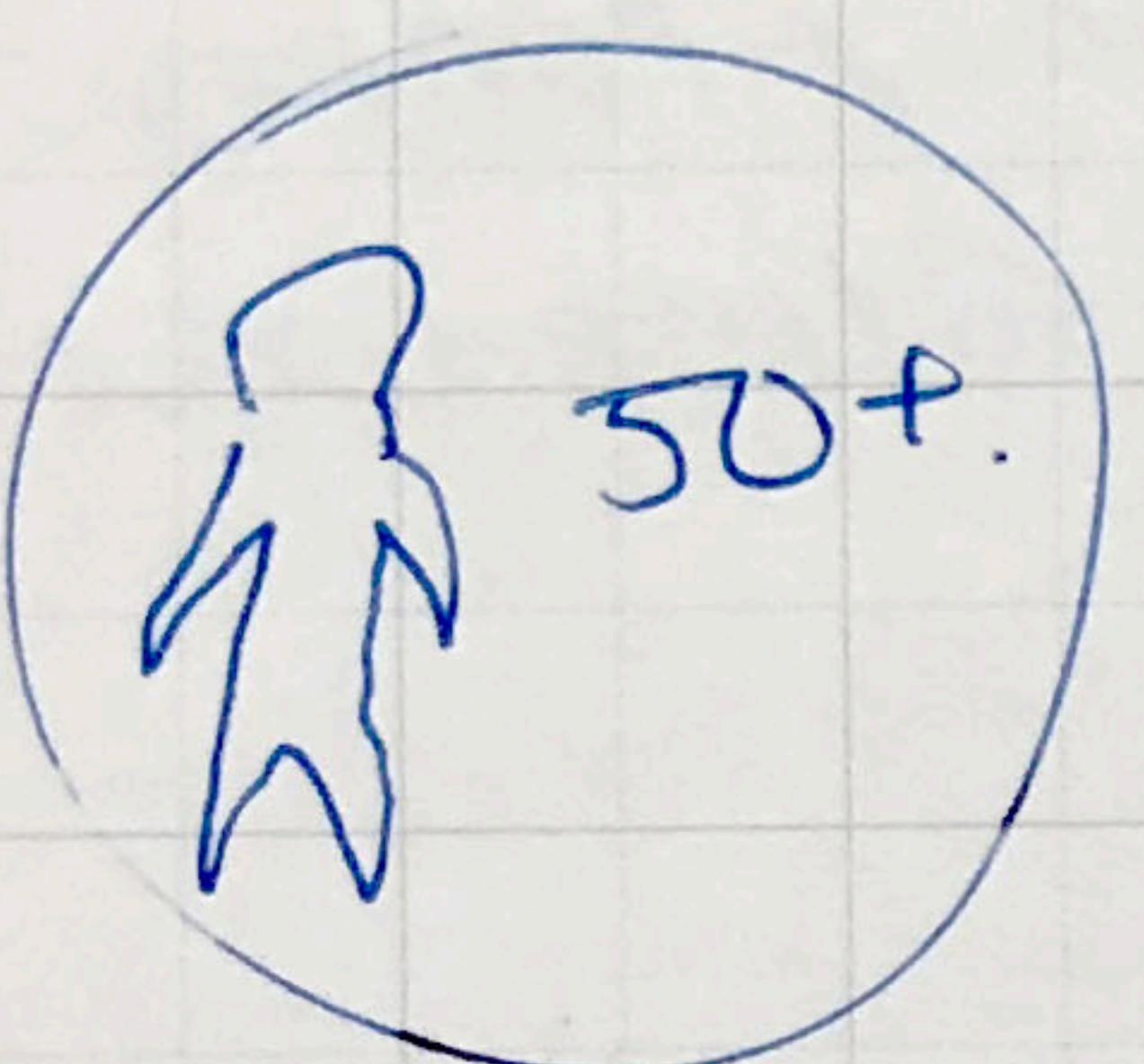
GIVE ME  
DO WE  
VIEW THE TMR?

# Goes for a yearly check up: Making an appointment.



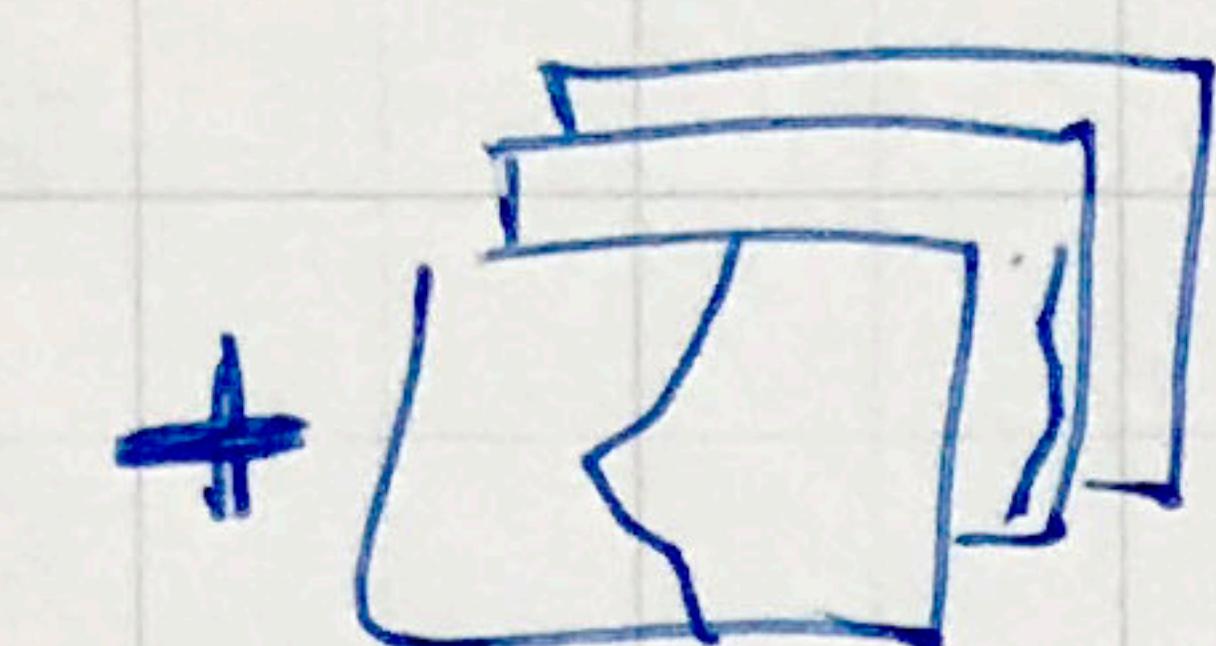


longer  
than  
screening  
name.

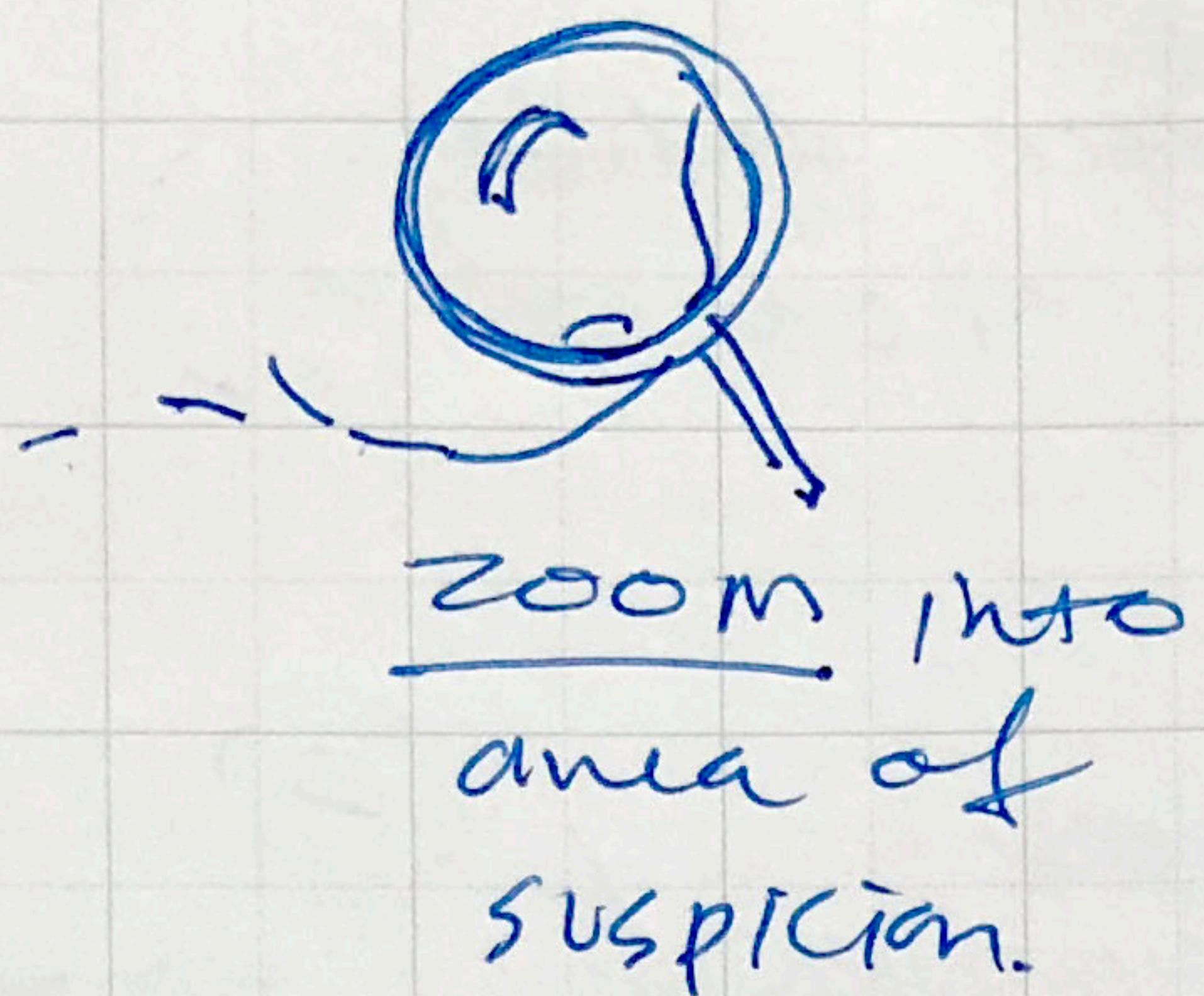


less likely to show  
for younger than 50  
because of denser  
breast tissue,  
will appear white.

tumor also appears  
white → harder to  
detect



+  
MORE  
X-RAYS/  
MULTI  
VANTAGE  
POINTS



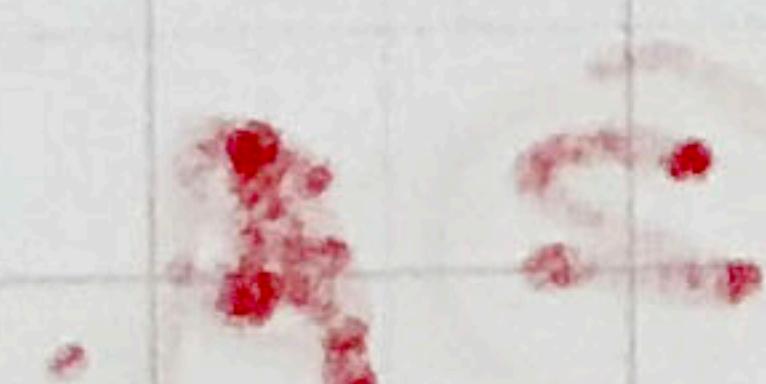
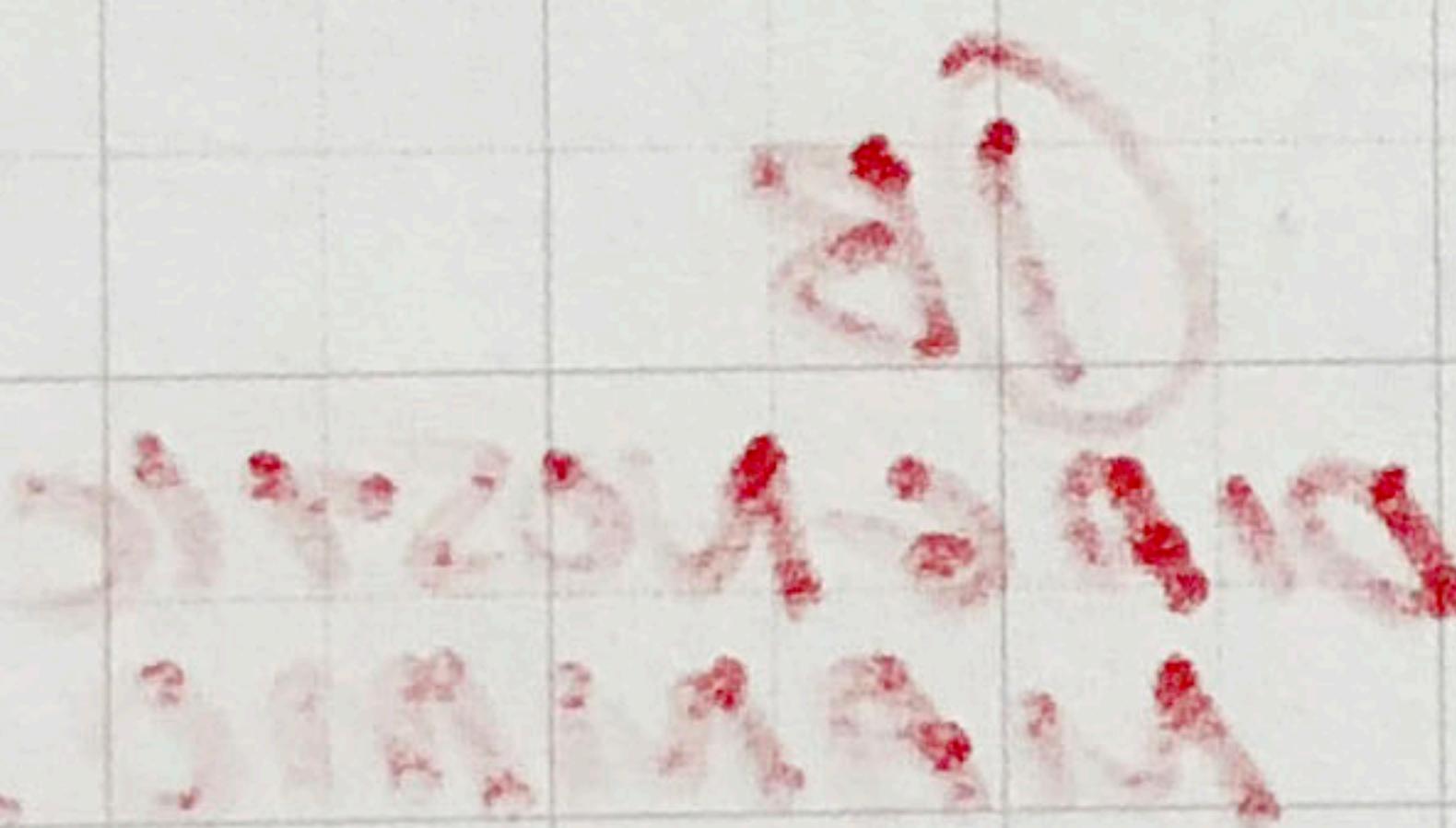
CAN DETECT

[DCIS]

Garnonal

cells in lining  
of breast duct.  
may become  
invasive  
cancer.

### X-RAY EXAM.



DIAGNOSTIC  
MAMMOGRAM.  
↳ (used after  
suspicious  
results on  
screening  
mammogram)  
or after signs

- more detailed x-ray / using specialized techniques.
- also used for special circumst. ie breast implants

- size of tumor.
  - density of breast tissue
  - skill of radiologist
  - administering contrast
  - reading the memo.

# MAKING AN APPOINTMENT:

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PATIENT:

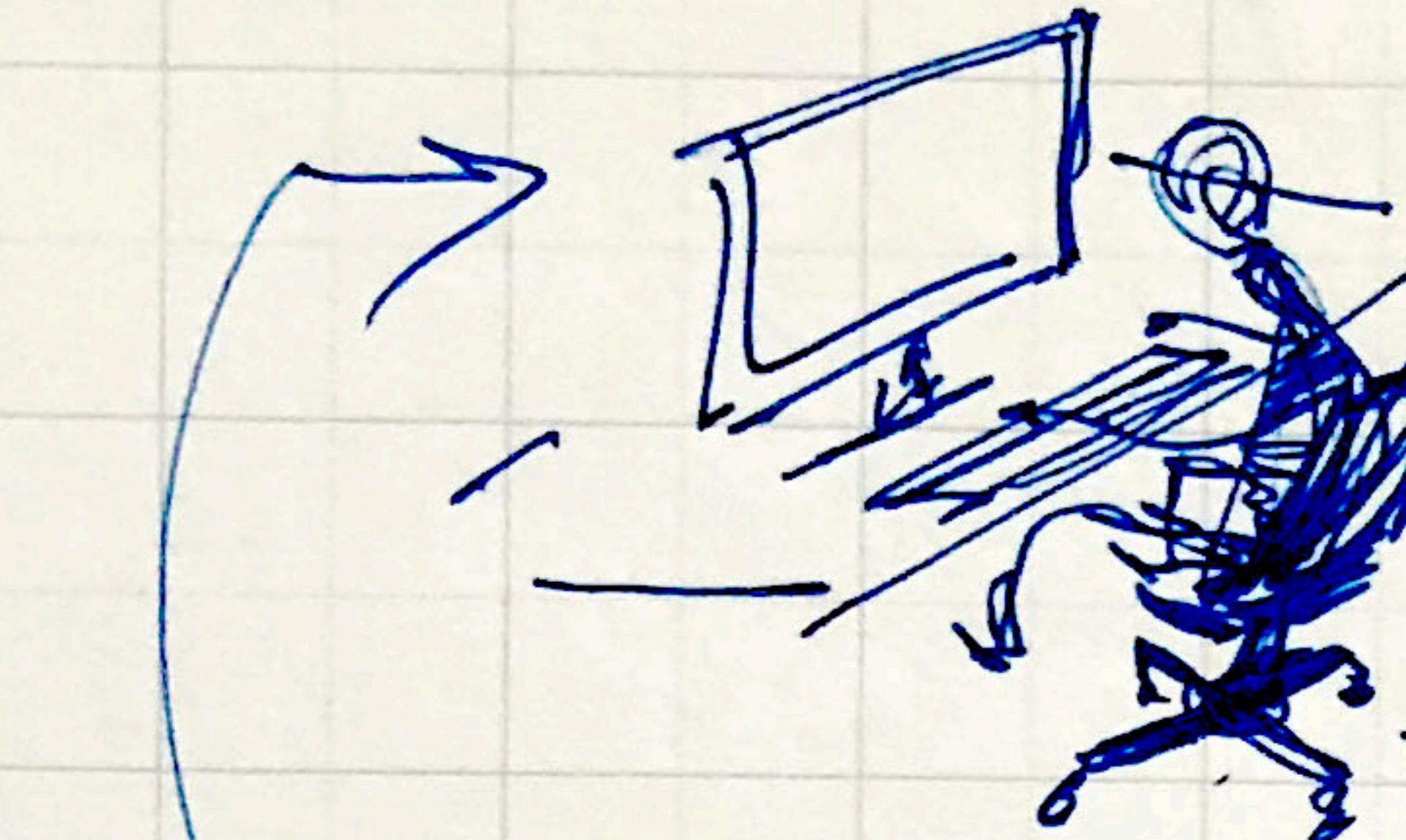
- KNOWLEDGE OF BREAST CANCER.
- FEELS A LUMP IN HER BREAST.



CASUALLY CALLS.  
HER SISTER IS ONCOLOGIST.

LIL KAREN,  
I FELT A LUMP  
IN MY ~~BREAST~~  
LAST NIGHT. WAS  
WONDERING IF I  
COULD MAKE AN  
APPOINTMENT W/  
YOU ASAP.

SURE  
THINK,  
HOW ABOUT  
NEXT WEEK  
MONDAY,  
1 PM?

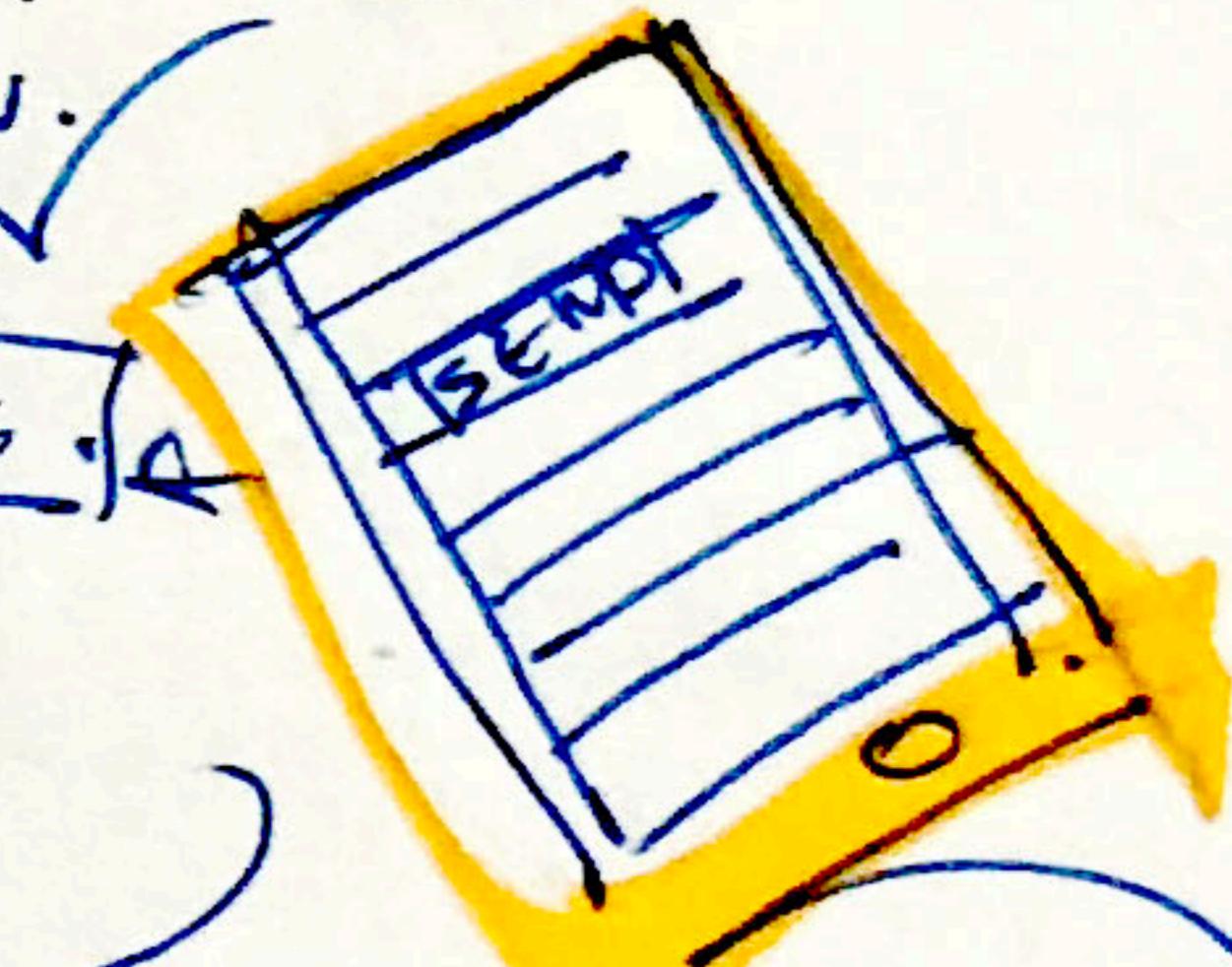


INPUTS APPOINTMENT INFORMATION

COULD YOU JUST QUICKLY ~~SHARE~~ ME YOUR MOST RECENT MEDICAL HISTORY?

GOT IT!

REQUEST:  
DR. KAREN PROV, RI ✓  
AUTHORIZE: ✓



THANKS SO MUCH.  
JUST SENT YOU THE  
CONFIRMATION.  
LET ME KNOW IF  
THE CONCERN  
PERSONAL INFO  
LOOKS GOOD  
TO YOU.

- EMAIL (?)
- CALL (?)
- ONLINE PLATFORM. (?)
- MOBILE TEXT (?)

GREAT!  
CONFIRMED  
NOW.  
YOU'LL  
GET YOUR  
RECEPTIONIST.



## EXPLANATION OF PRECAUTIONS (etc)

# LIST OF CHARGES.

Saint  
DAME,  
OUR LADY  
CHARLOTTE  
??

# LIST OF CHARGES.

TYPE.

Sort BY : ~~TYPE~~

11/20/00

MEDICAL SERVICE \$0.00  
SUPPLY \$0.00  
SUPPLY \$0.00

11/20/00

TOTAL \$0.00

! SAME  
PART,  
PURCHASE  
CHARGE?  
??

MEDICAL SERVICE \$0.00  
SUPPLY \$0.00  
SUPPLY \$0.00

TOTAL: \$00.0

MEDICAL SERVICE \$1.00  
SUPPLY \$0.00  
SUPPLY \$0.00  
TOTAL: 0.00

TYPE.  
SORT BY : ~~DATE~~

-DATE  
-TYPE

DEFAULT

DEFAULT

??  
.  
.  
POSSIBLY  
BE AN  
INCORRECT  
CHARACTER

PUNKICA  
incorrect  
answer  
?

Sort BY: <u>DATE</u>	
1/20/18	<input type="checkbox"/> M SERVICE \$1.00 <del>\$1.00</del> TOTAL \$1.00
1/20/18	<input type="checkbox"/> M SERVICE \$1.00 TOTAL \$1.00
01/00/00	— \$1 —
01/00/00	— \$1 —

Sort BY:  
PAGE

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AVOIDING  
INCORRECT /  
DUPLICATE  
CORRECTIONS. /

ANTI NAUSEA

+

HEMOTHERAPY COMBO

) 3-4 weeks x 8 times. > cause of chemo.

NEUTOPENIA AFTER CHEMO.  
FOR 6 DAYS - AFTER CHEMO  
EVERY DAY, SAME TIME

JAN 12, 2017.

FIRST CHEMO.  
+ 8 hrs sleep.

APRATHYACIN - burning feeling,  
nurse shoulder strapped +,  
leaked chemo, burned  
skin from inside.

2017

3 weeks for biopsy results.

NEXT CHemo A2 FEB 3, 2017

CANNABIS (helps  
oil. ml sweep)

"CRAZY, MOST TOXIC, DANGEROUS" - DR.

PORT. → Better than grabbing in arm.

PRE CHEMO MEPS - sleep, xerophagy x nausea

Blood test - tumor markers, → PET SCAN  
Recurrence  
(7 SCAN.)

RESULTS → 2048 hrs.

- emerited oncologist  
white blood ↑, stable nodules.

remain on same hormonal therapy

↓ smells.

OR SCAN . repeat.

↓ over 3 months  
sans bar chart (changes) + MRI

2013 YR PAY

↓  
(money)

annual  
results  
show abnormality.

DOSAGE ↓ WEIGHT  
HEIGHT

GENETIC  
FACTORS.

DRUGS CAN'T TELL  
DIFF

WEEKLY - TESTS  
almost everyday

~~4 mo.~~ 7m - PLASTIC  
16 AC / TAXOL surgery  
consult ↓

MISSECTOMY  
+  
BREAST  
RECONSTRUCTION

RADIATION  
THERAPY (20%).

- risks are "lower"  
to get cancer  
than non-treatment.
- DNA may damage  
to try & maintain  
that might  
not be  
there

every 2-3 days  
(depending)

Possible Leukemia (a development)

- AVOID SICK PEOPLE
- RAW MEAT

HEMOTHERAPY.

SEE THEM ONCE  
A WEEK,

EVERY 3-4 weeks  
to count blood  
cells.

HOME, ETC.

OFFICE, INFUSION CENTER

ATTACK ALL DIVIDING  
CELLS. (NOT TARGETED)

- DANGER: ALLERGIES.

BLOOD PRESSURE  
NAUSEA  
NAUSSA.

↓  
FEVER, DIARRHEA,  
↓ A PREGNANT  
MEMORY  
SEX DRIVE.

BLOOD PRESSURE

① POSITION PATIENT

→ (Prep: tattoo/stickers./PHYSICAL PLANNING)

② CT SCAN → SHAPE SCOPE OF RADIATION.  
target vol.

#(TIME)

③ RADIATION THERAPY (BRIEF). 5-7 weeks.

post  
Surgery      ↳ radiographer  
                supervised by  
radiation oncologist.

SIDE EFFECTS: FATIGUE, 3rd week

or month after

redness of skin.

doctor + physicist.

↳ radiation planning.

1 month after > oncologist

follow up.

↳ post-treatment plan.

+ BOOST RADIATION?

Radiation  
INTERDISCIPLINARY  
+ tumor  
CONFERENCE.  
↓  
all  
cases  
discussed.

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Radiation.

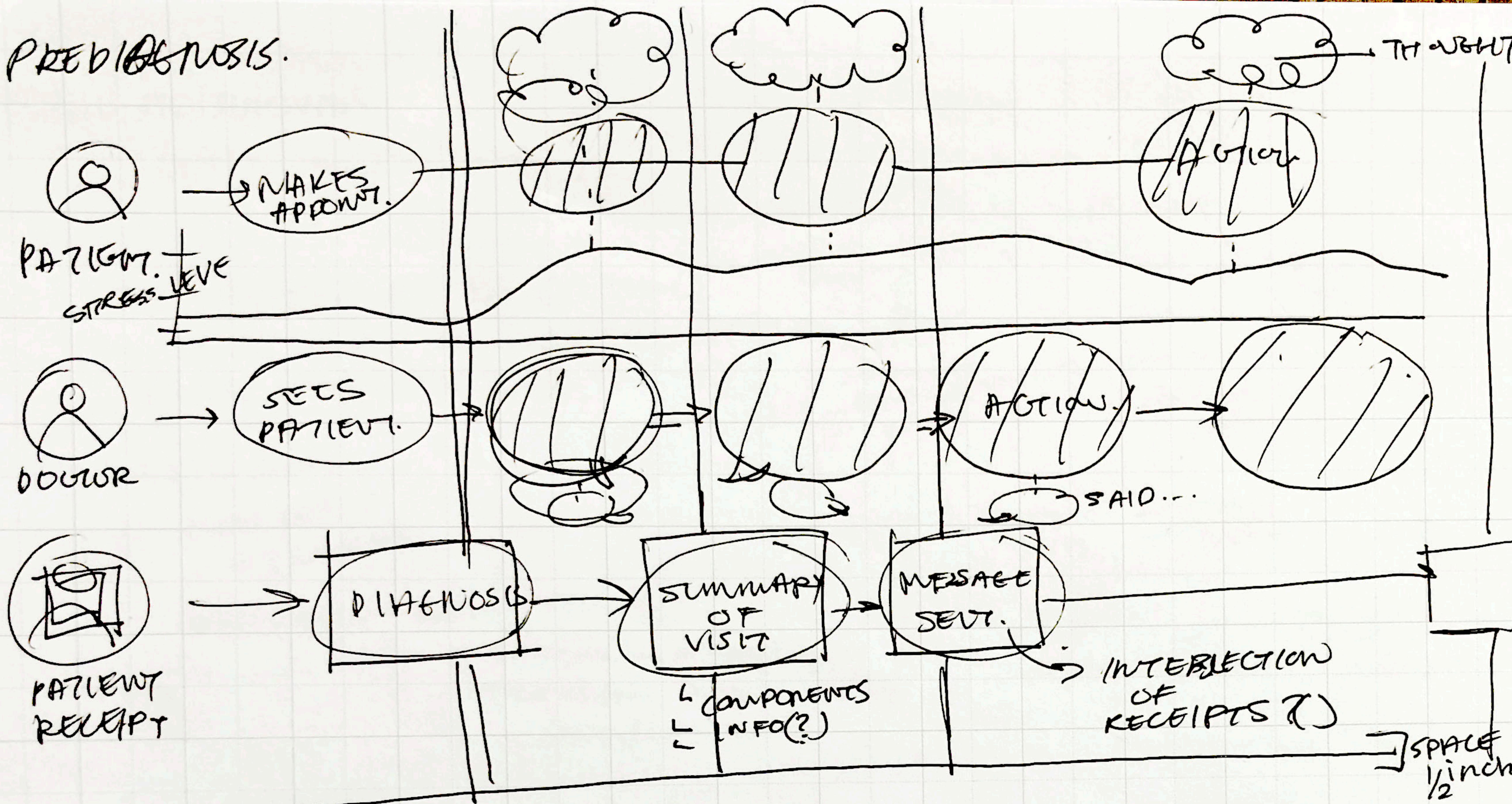
↳ GET RID / KILL  
CELLS.

(early stages?).

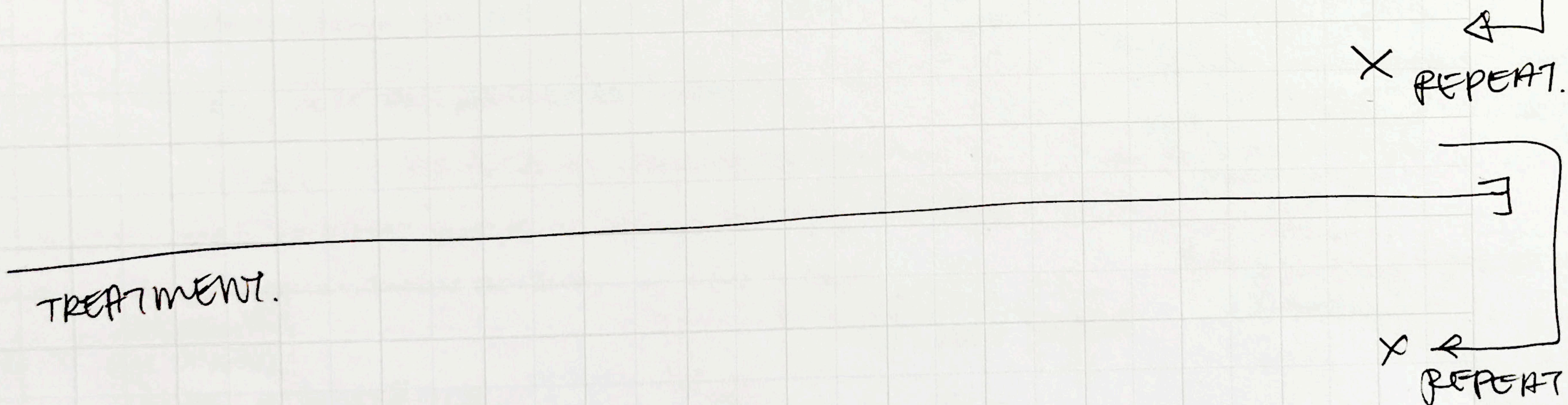
localized.

RADIOTHERAPIST.  
RADIOPHYSICIST  
CNC.  
PATHOLOGIST.  
GYN.

# PREDIAGNOSIS.



# DIAGNOSIS.



# TREATMENT.

PERSONA JOURNEY MAPS.  
↳ OF COLLECTED NARRATIVES.

IDEAL STANDARD (?)

- WHERE RECEIPT SHOULD GO.
- ↳ STREAMLINE.

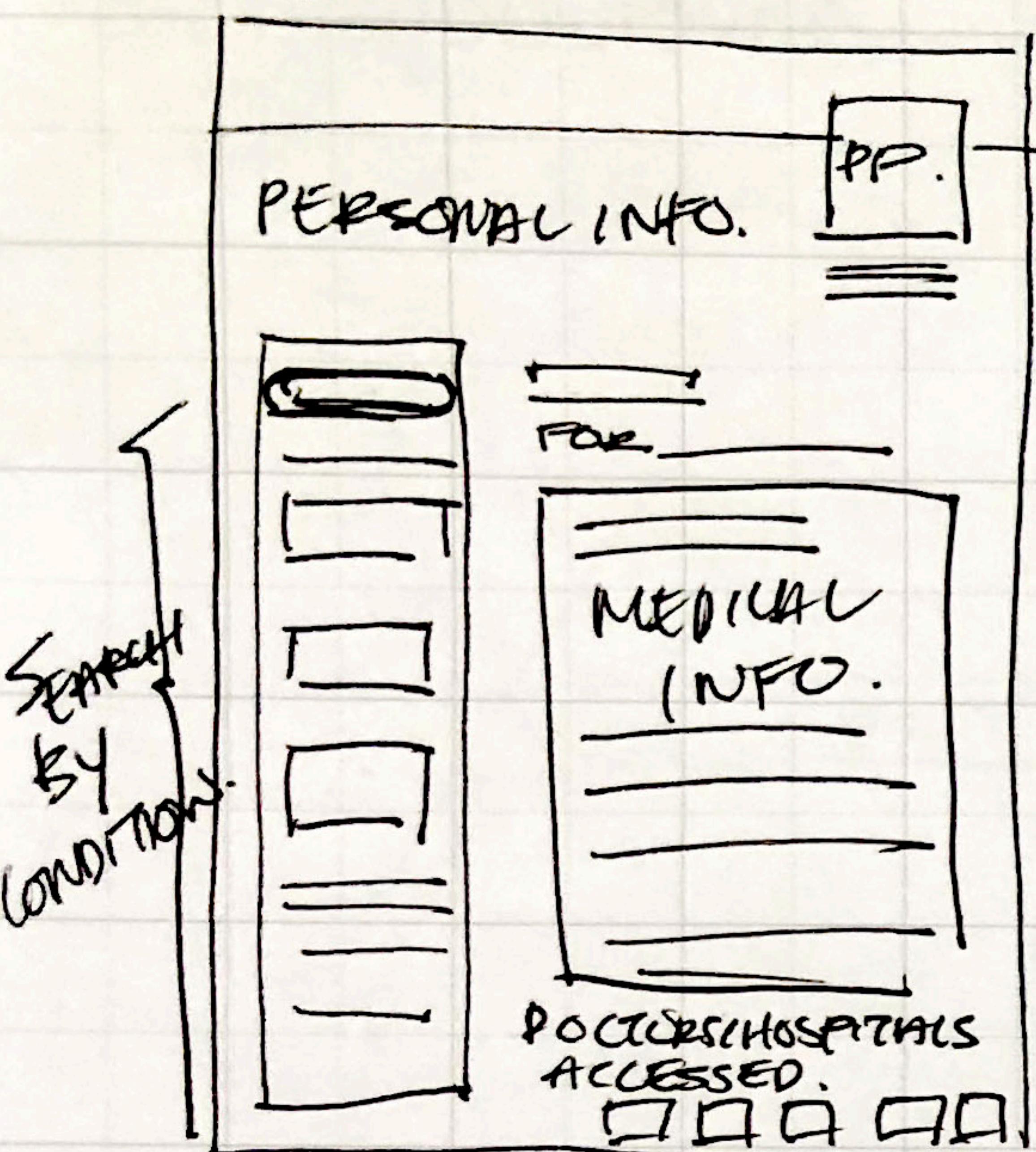
↳ STREAMLINED EXPERIENCE & REPETITION

↳ PROBLEMS?

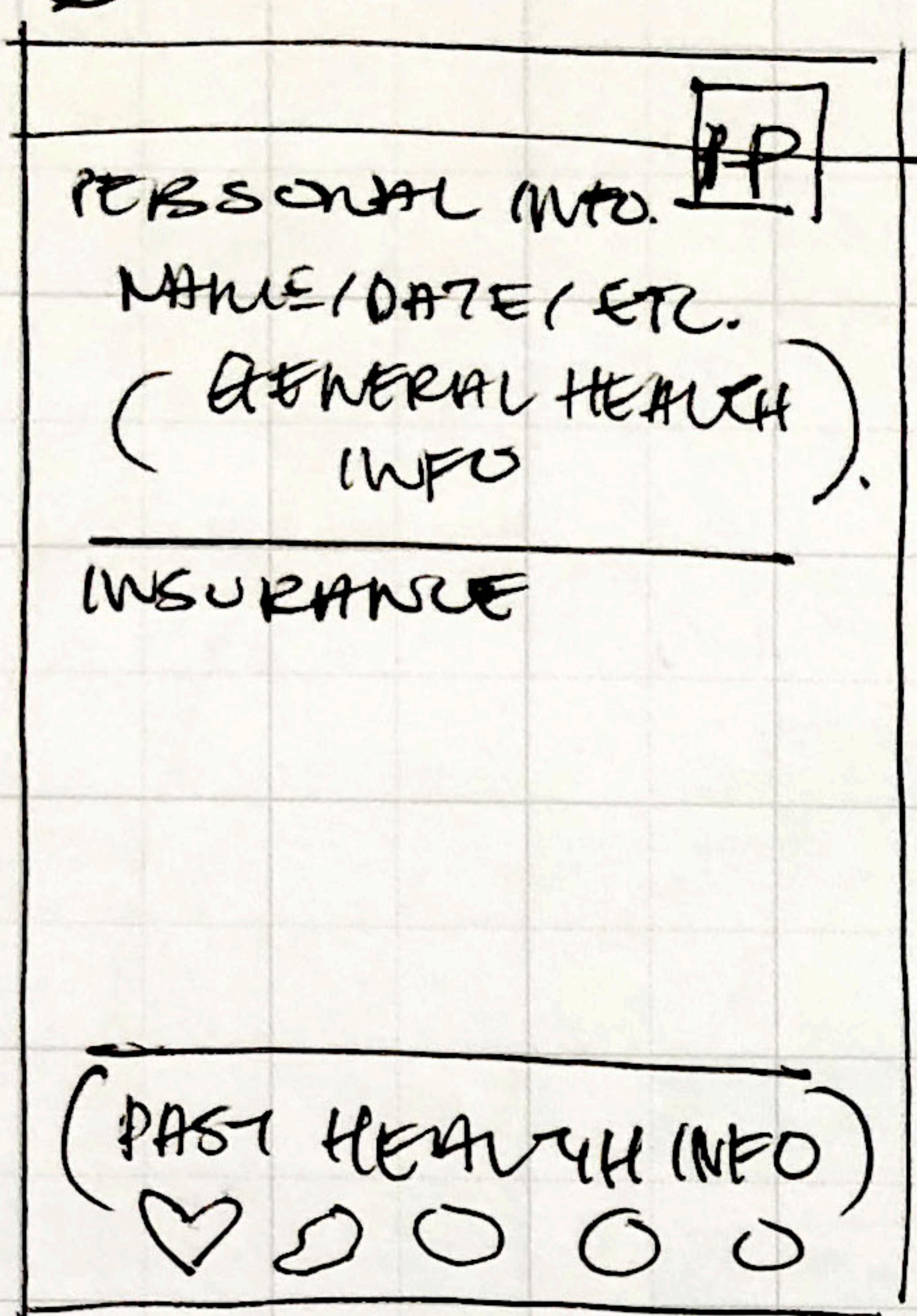
- UNSATISFACTORY DIAGNOSIS.
- ANXIOUS WAITING PERIOD.

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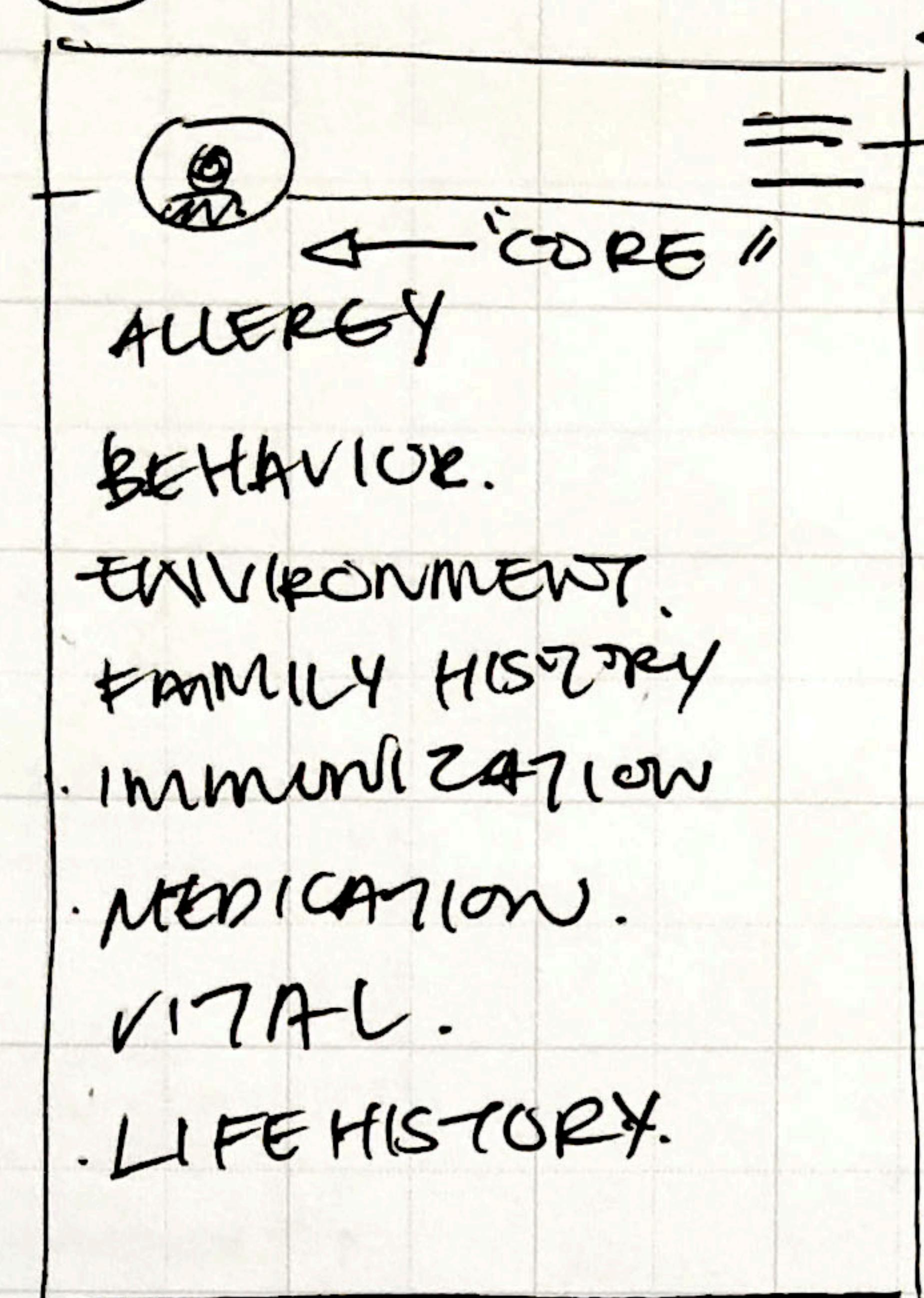
(A)



(B)



(C)



- INSURANCE
- GENERAL MEDICAL INFO
- PAST HEALTH INFO (?)
- ↳ BY CONDITION?
- ↳ BY DOCTOR (?)
- ↳ BY HOSPITAL (?)
- ↳ BY RATING (?)
- SETTINGS.
- ↳ WHO TO SHARE INFO WITH.

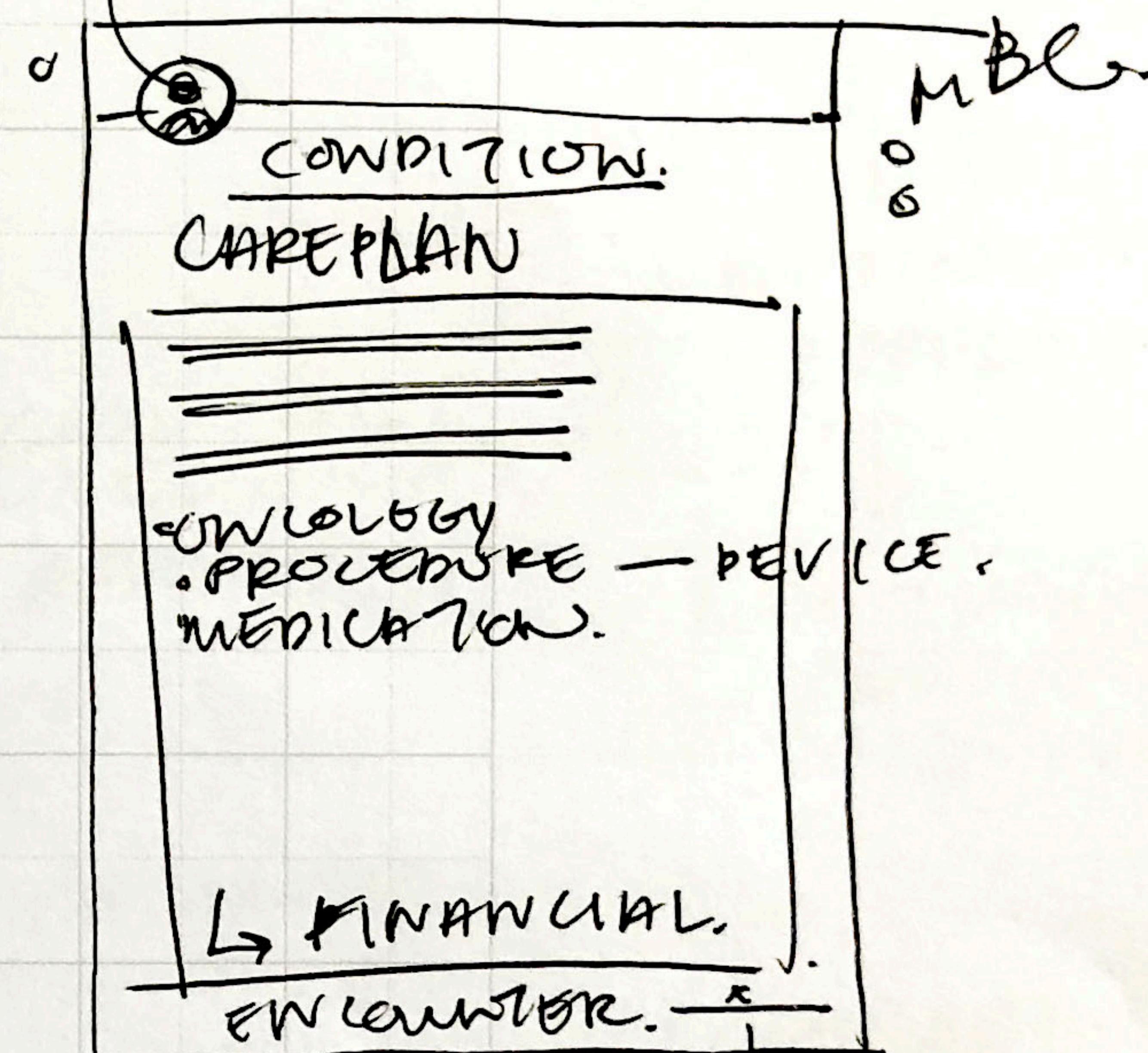
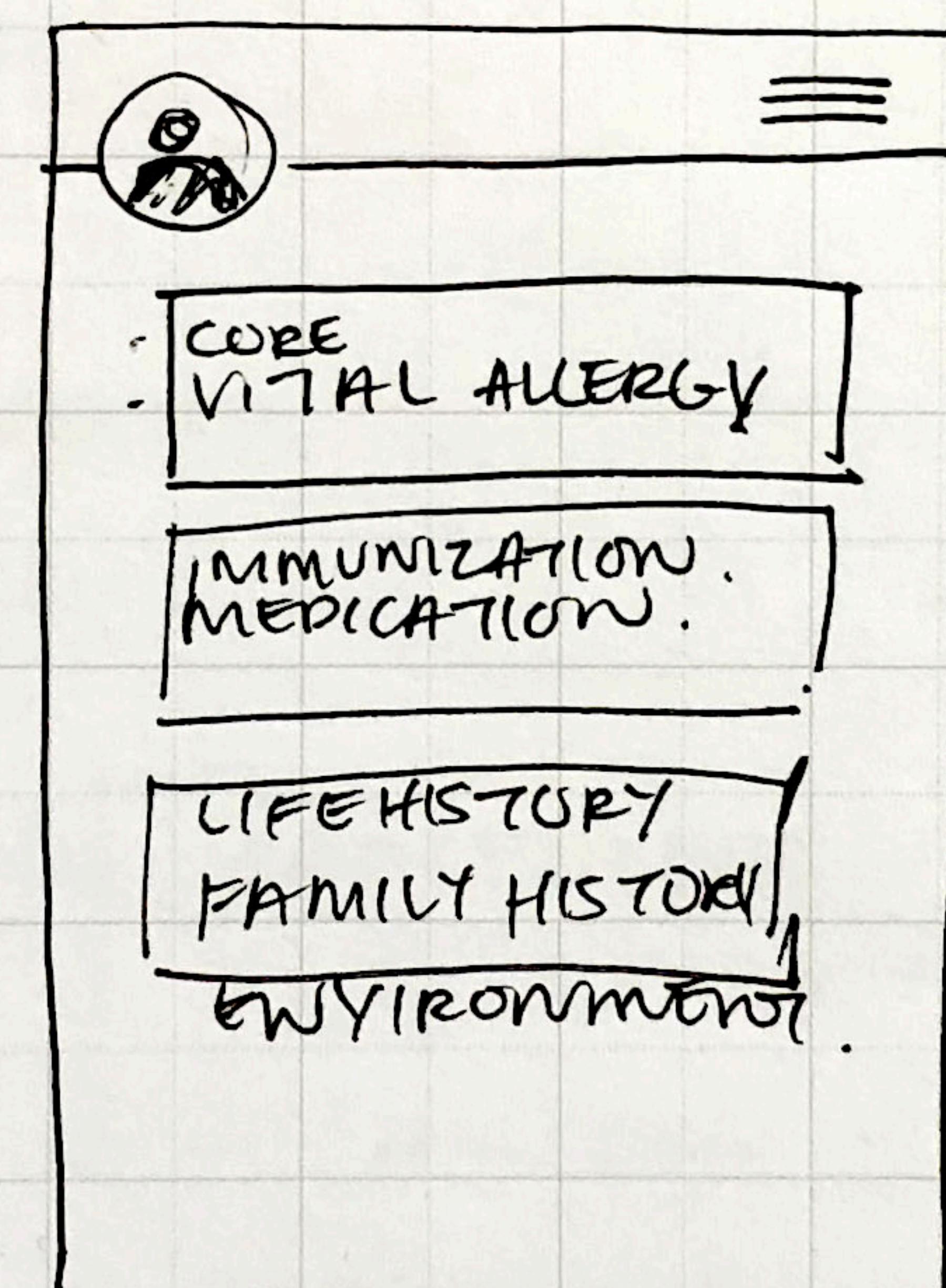
(Home?).

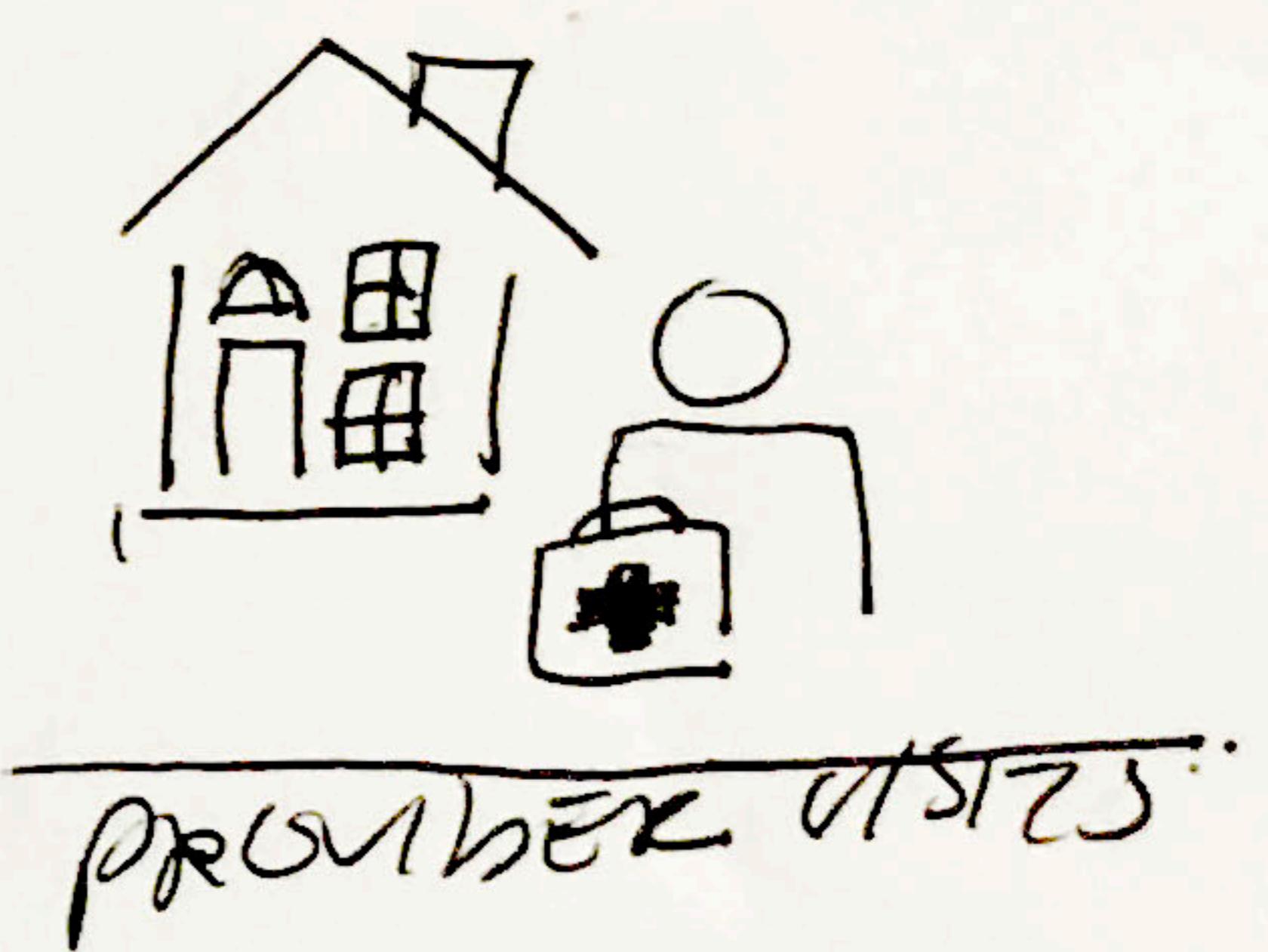
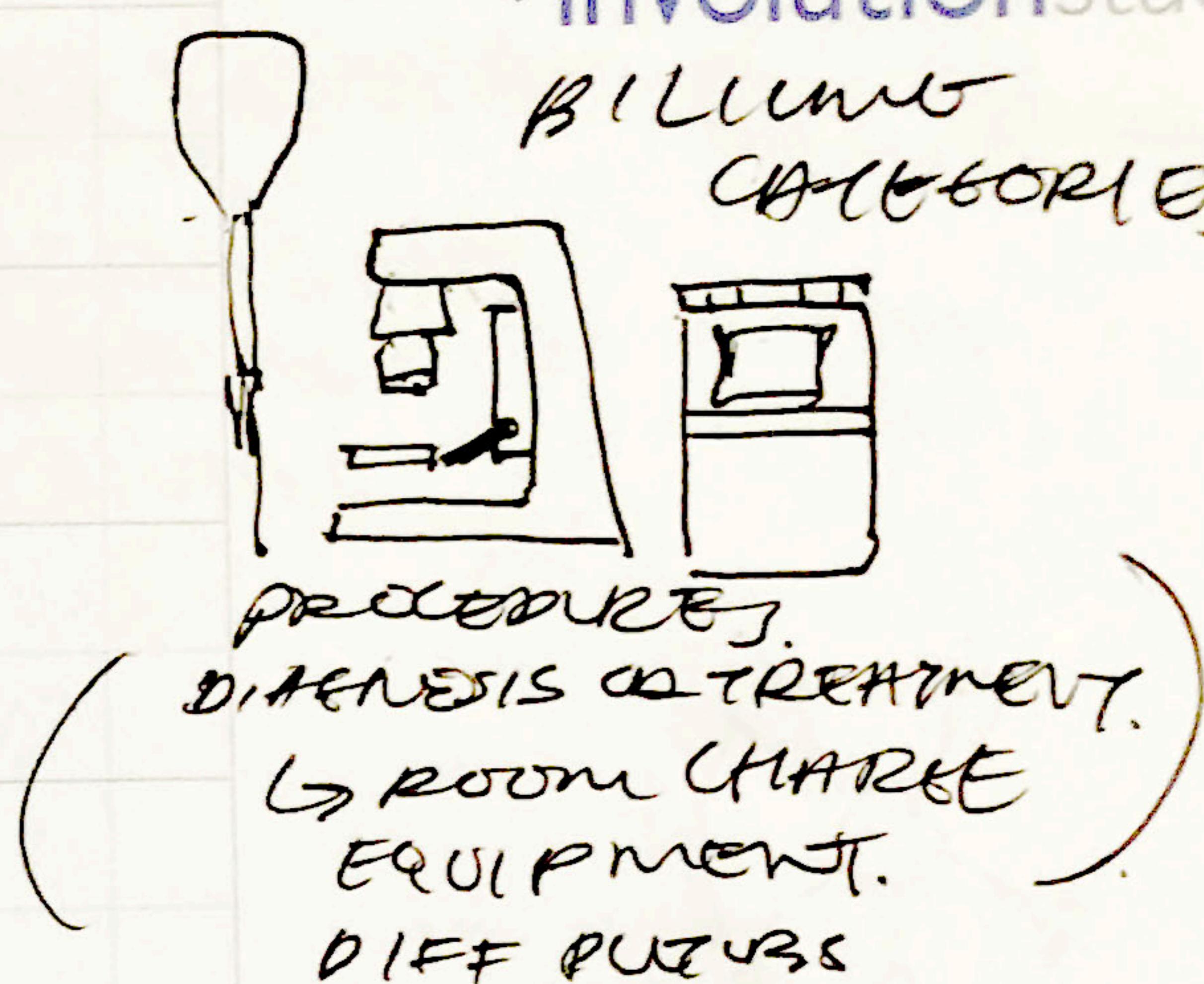
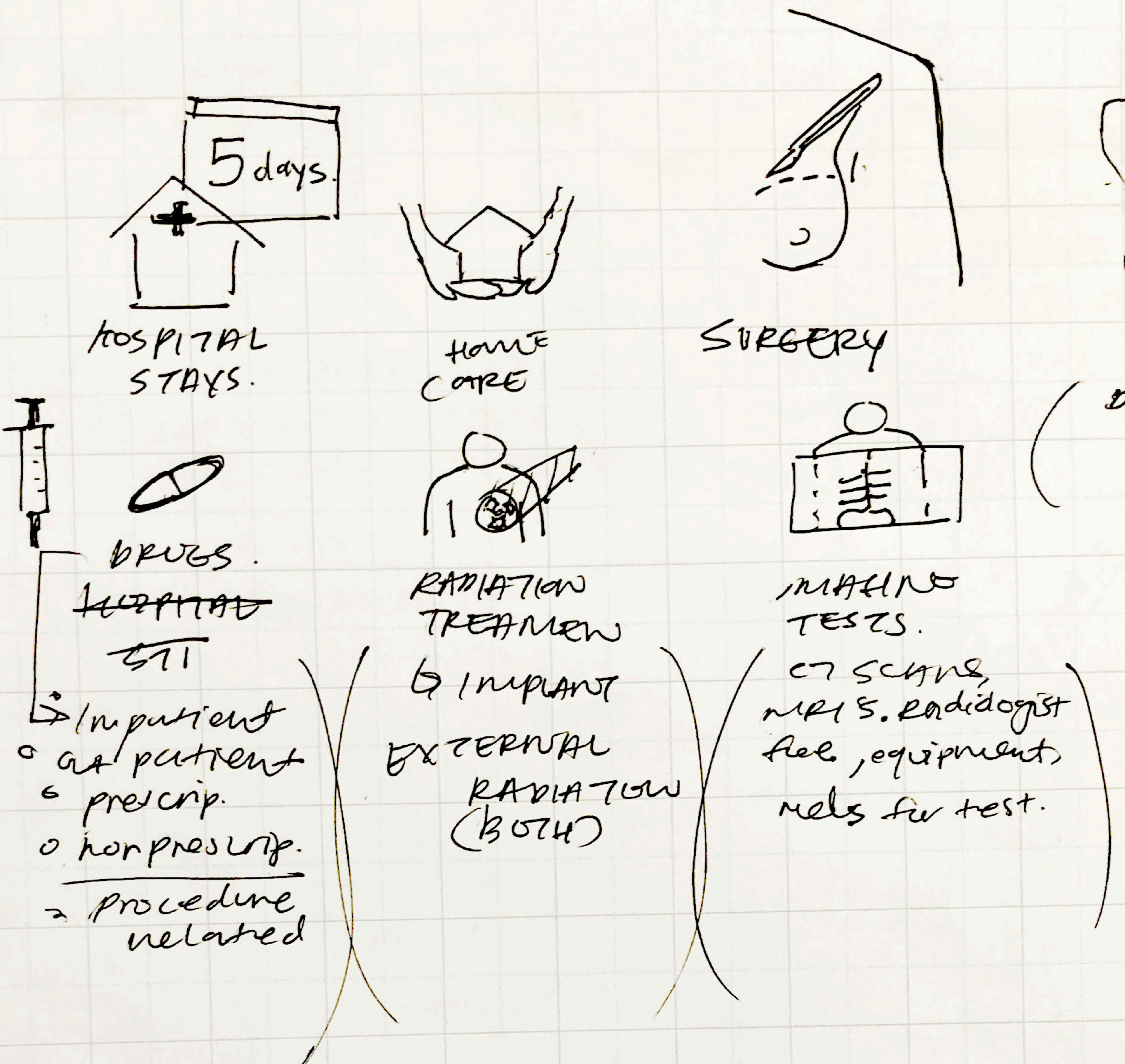
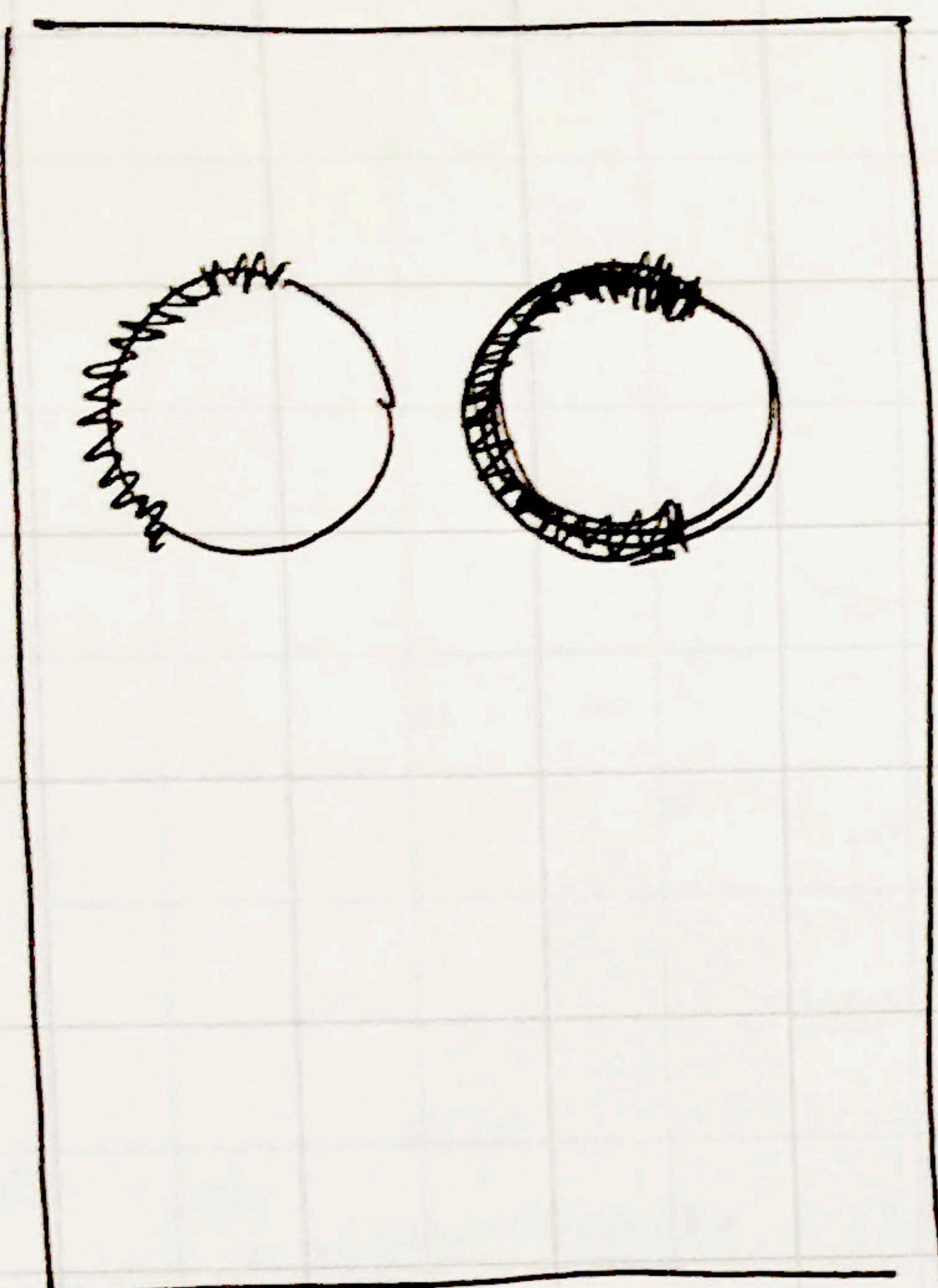
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① DASHBOARD PERSONAL INFO PAGE

• HEALTH RECORD SECTIONS.

PAST HEALTH INFO BY CONDITION.





RESULTS.

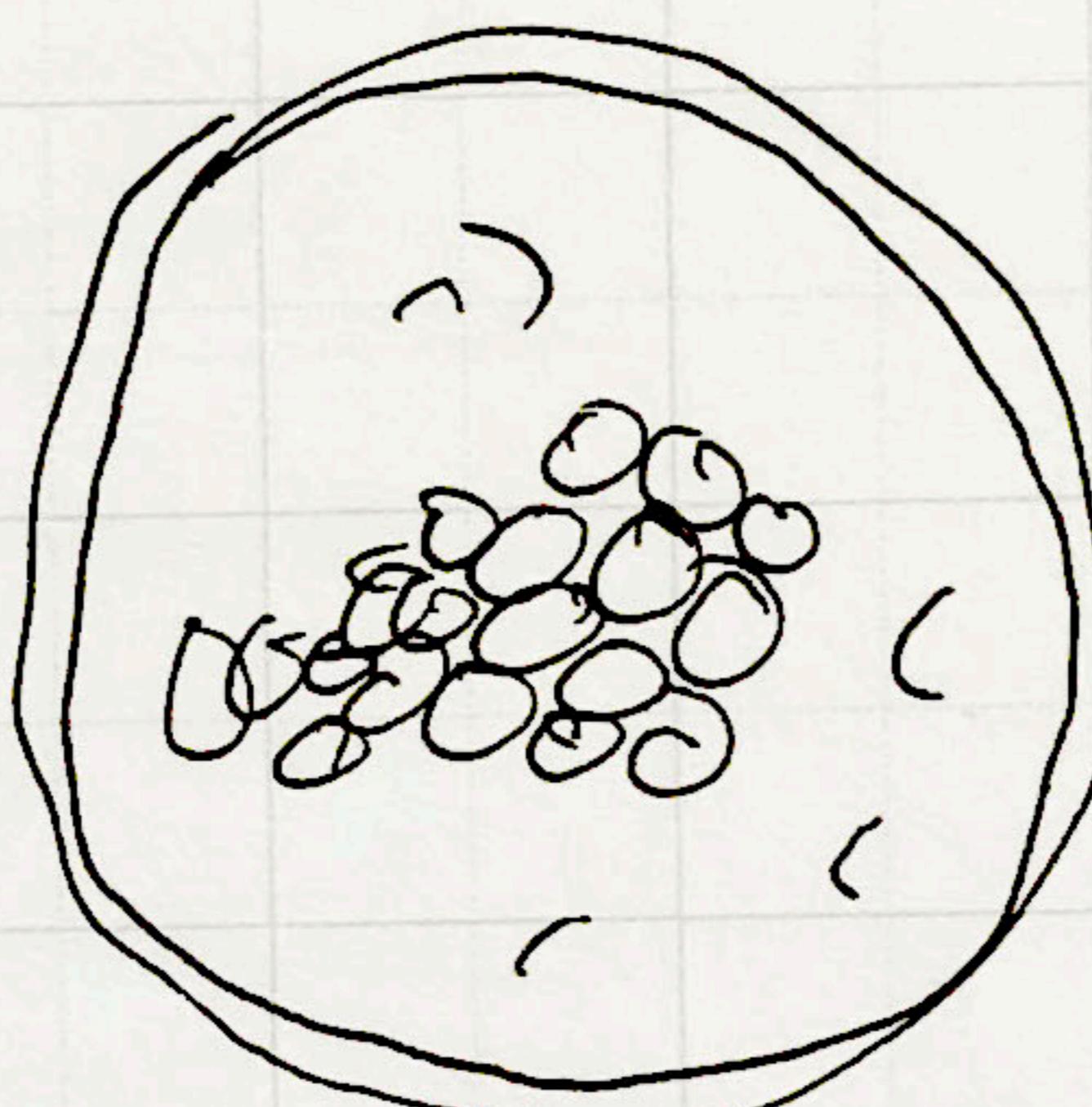
TYPE  
GRADE  
RECEPTOR STATUS OF  
TUMOR  
DISTANCE BETWEEN  
SURROUNDING NORMAL  
TISSUE & EXCISED TUMOR

MARGIN INDICATES  
WHETHER SITE  
IS CLEAR OR  
NOT OF CANCER

POST SURGICAL  
BIOPSY.

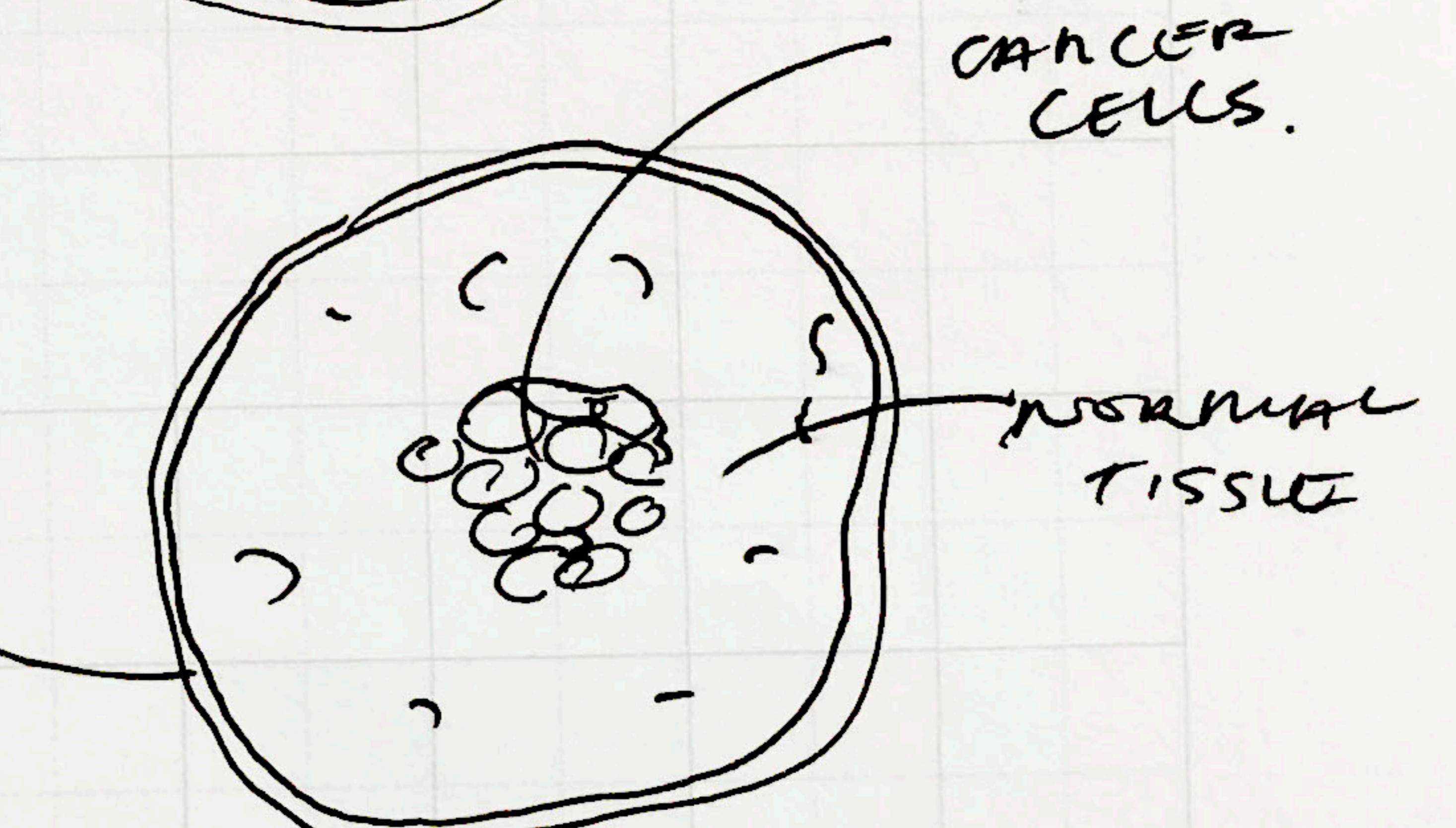
A.) CLOSE  
~~MARGIN~~

close to the  
edge.



B.) NEGATIVE MARGIN.

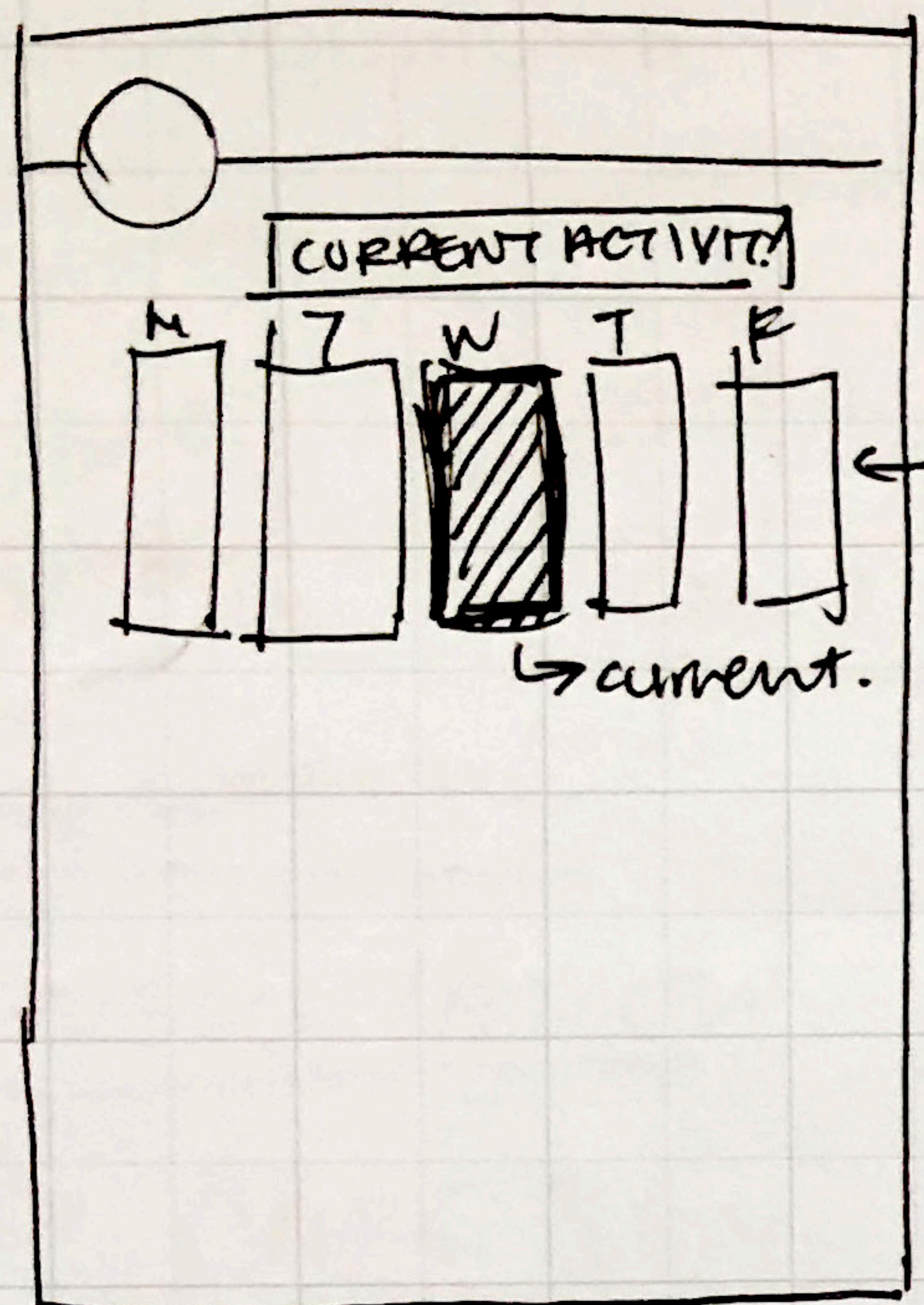
none at  
inner edge  
EDGE



C.) A ~~MARGIN~~.  
POSITIVE

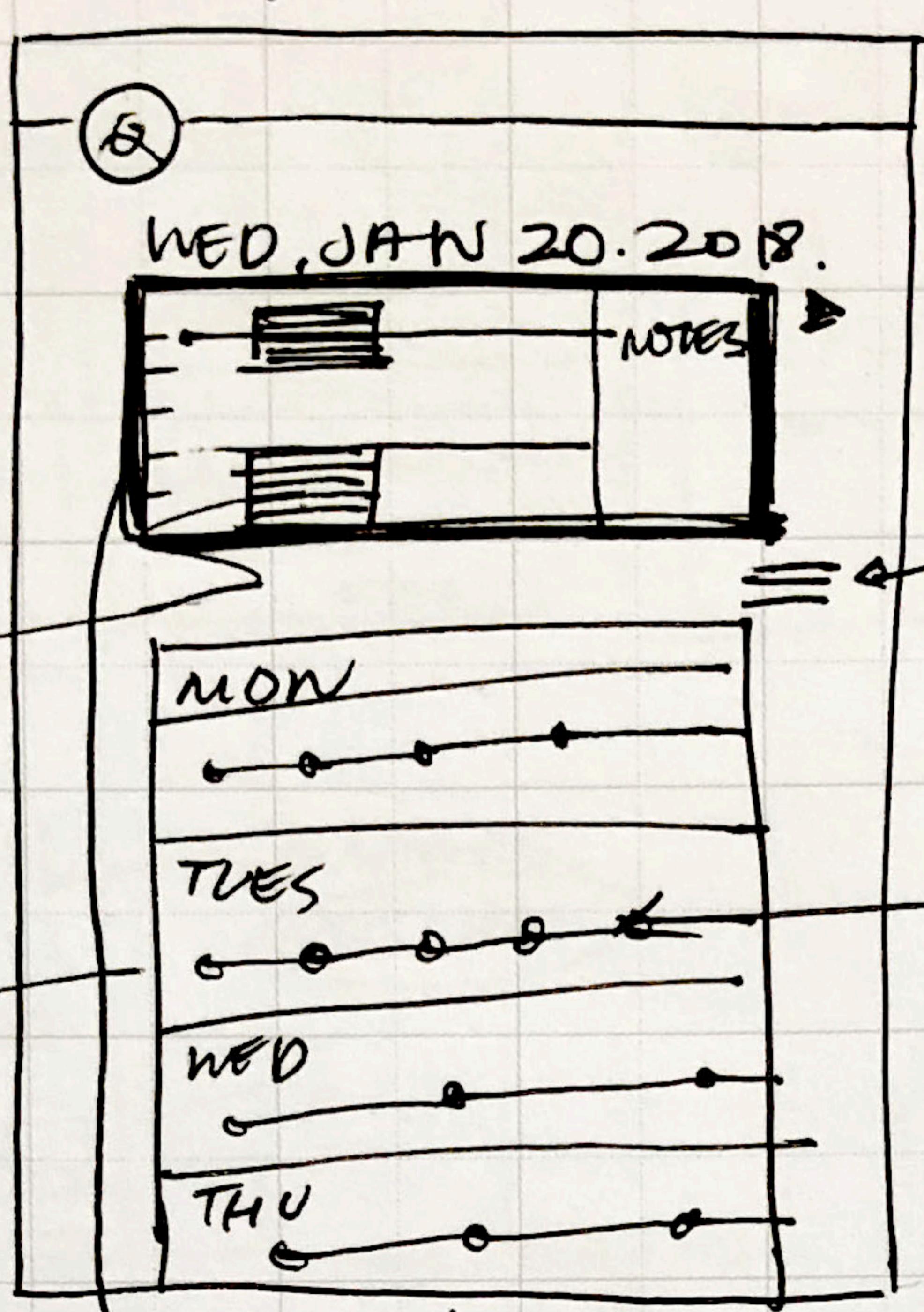


# CARE PLAN / MANAGEMENT.



SCHEDULED REGIMENS / APPOINTMENTS (PAST / FUTURE).  
EVENTS?

VIEW BY DATE.



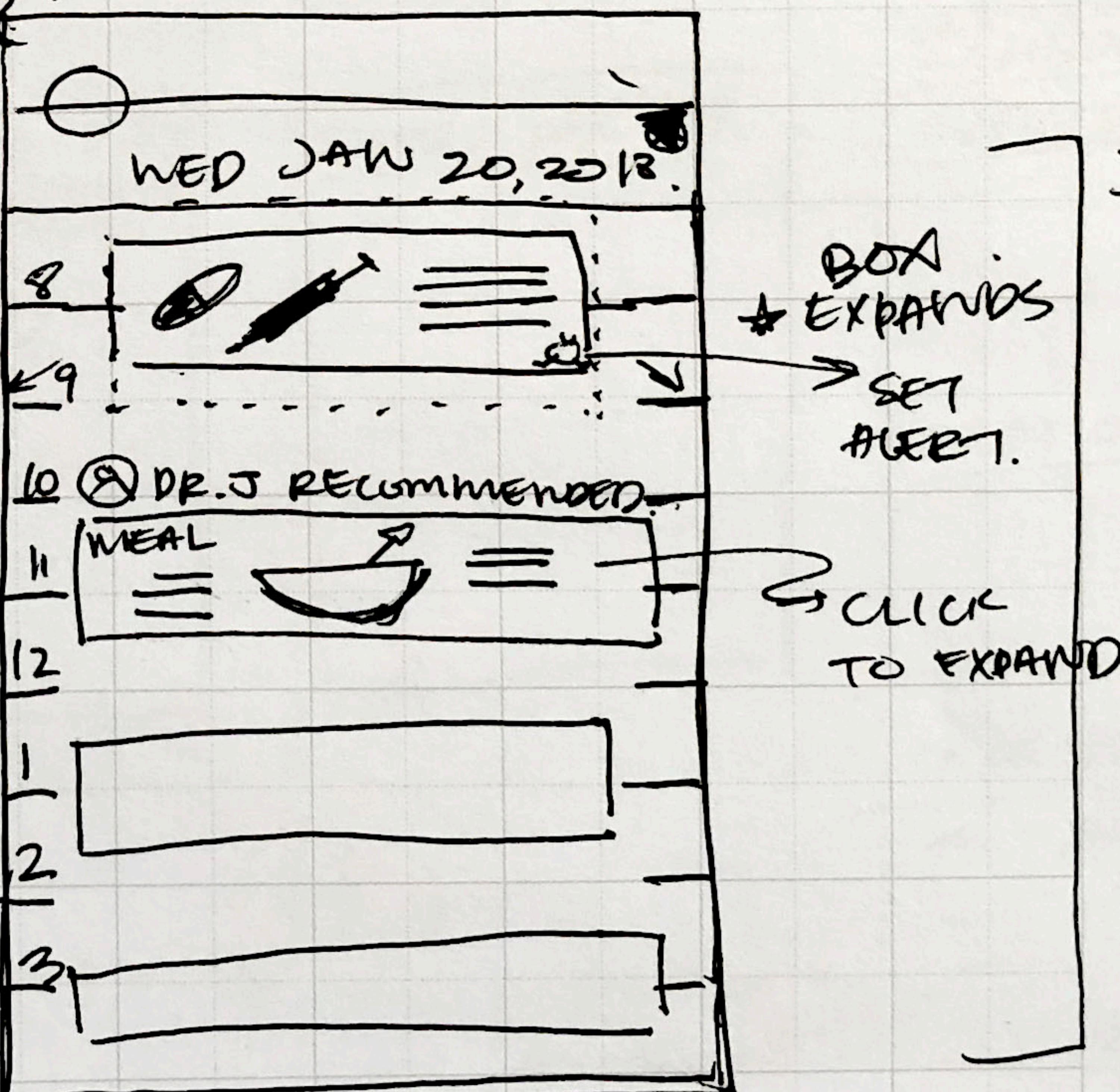
- VIEW BY
- WEEK /
- MONTH /
- DAY -

VIEW BY  
~~CONDITION~~

- TIMELINE OF ALL MED DATA.
- VIEW TIMELINE BY CONDITION.
- VIEW BY DOCTOR.
- VIEW BY MY PATNO.
- VIEW BY DATE.

I & JANET  
WANTS TO SEE  
TODAY'S SCHEDULE.

COLLABORATIVE  
CALENDAR  
FORMAT.

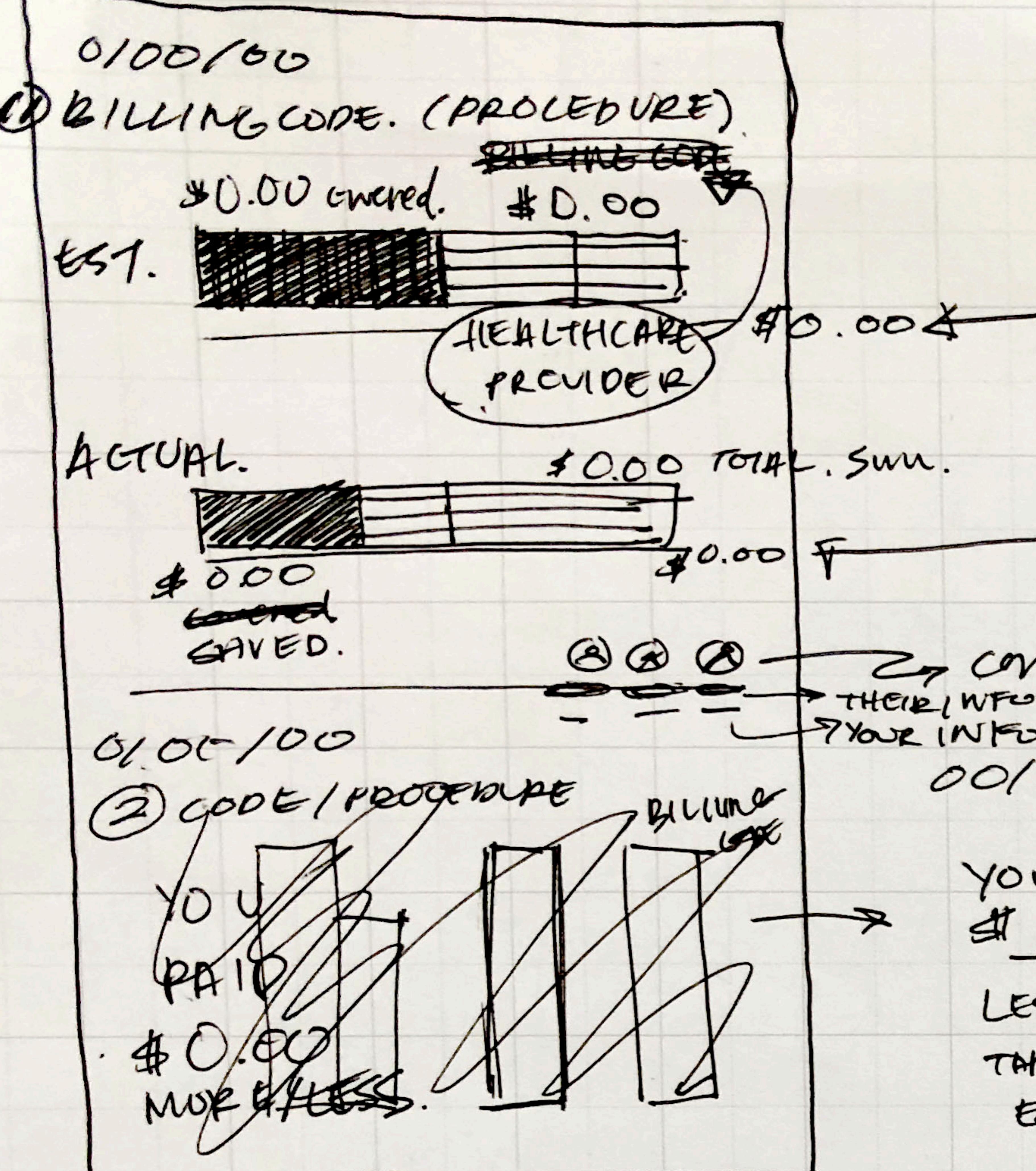


CARE PLAN.

- REGIMENT
- MANAGEMENT
- CLINICIAN - PATIENT  
COMMUNICATION.

Comparing estimates to final bill.

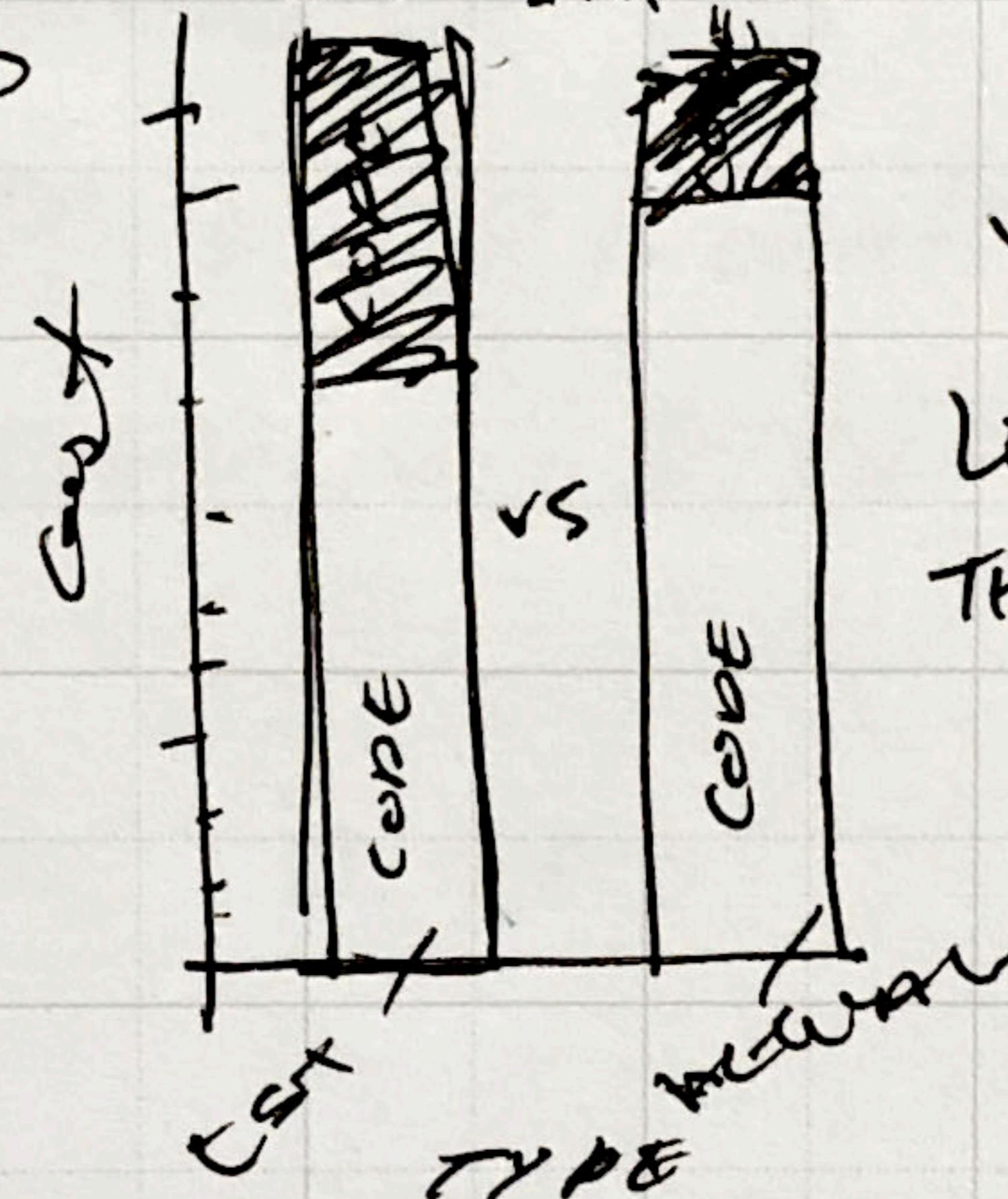
HEALTH PROVIDER.  
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COMPARE EST. # VS.  
ACTUAL.

For contractors.  
Call WFCO  
or INFO  
00100100

YOU PAID.  
~~\$~~  
—  
LESS/MORE  
THAN YOUR  
ESTIMATE

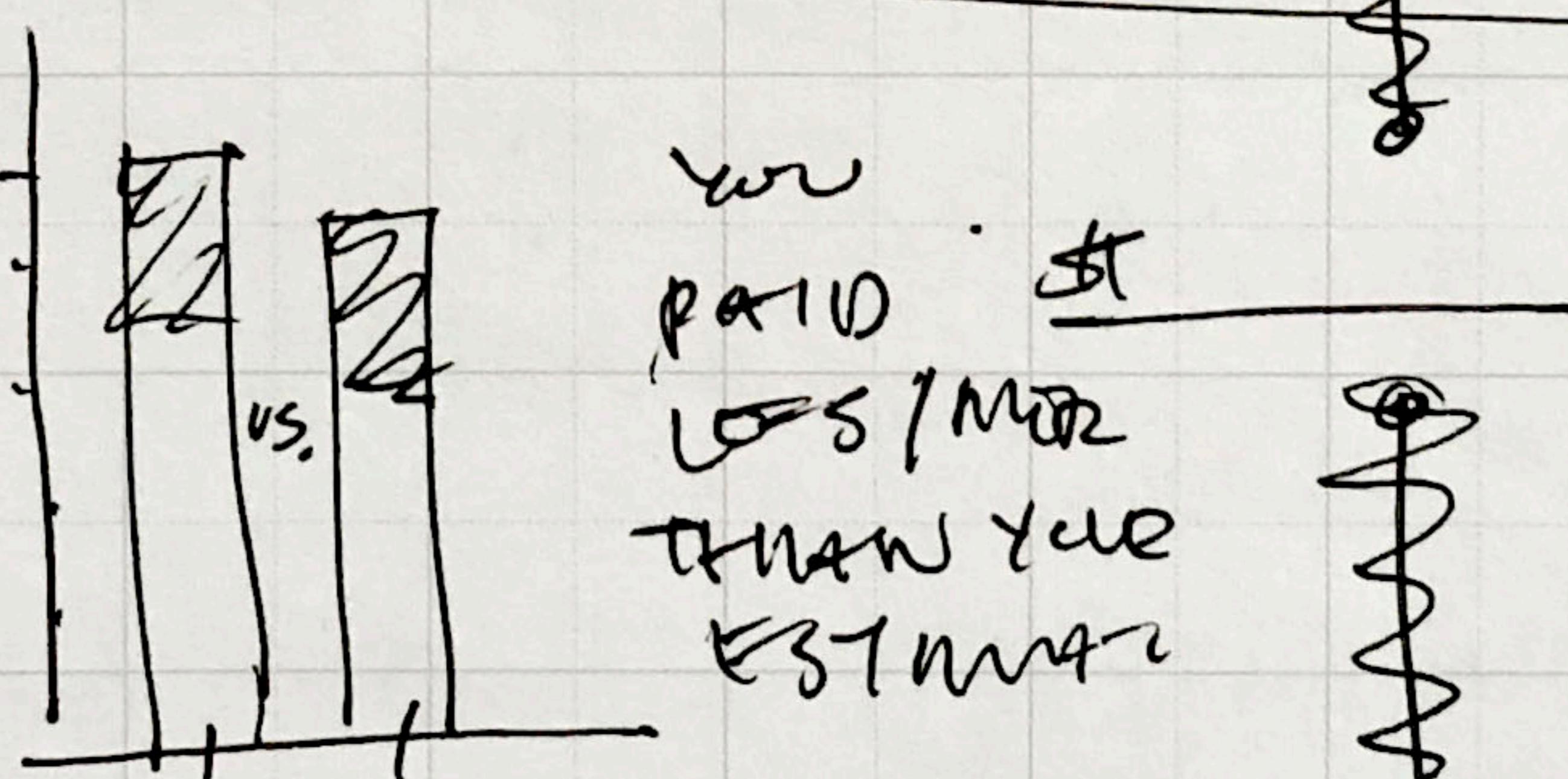


YOU PAID \$  
LESS/MORE  
THAN YOUR  
ESTIMATE

> contact.

- vegan
- creative  
list of  
changes

OF  
PROCEDURE



you  
ratio st  
less 1 MDR  
than you  
ESTIMATING

→ por u card?

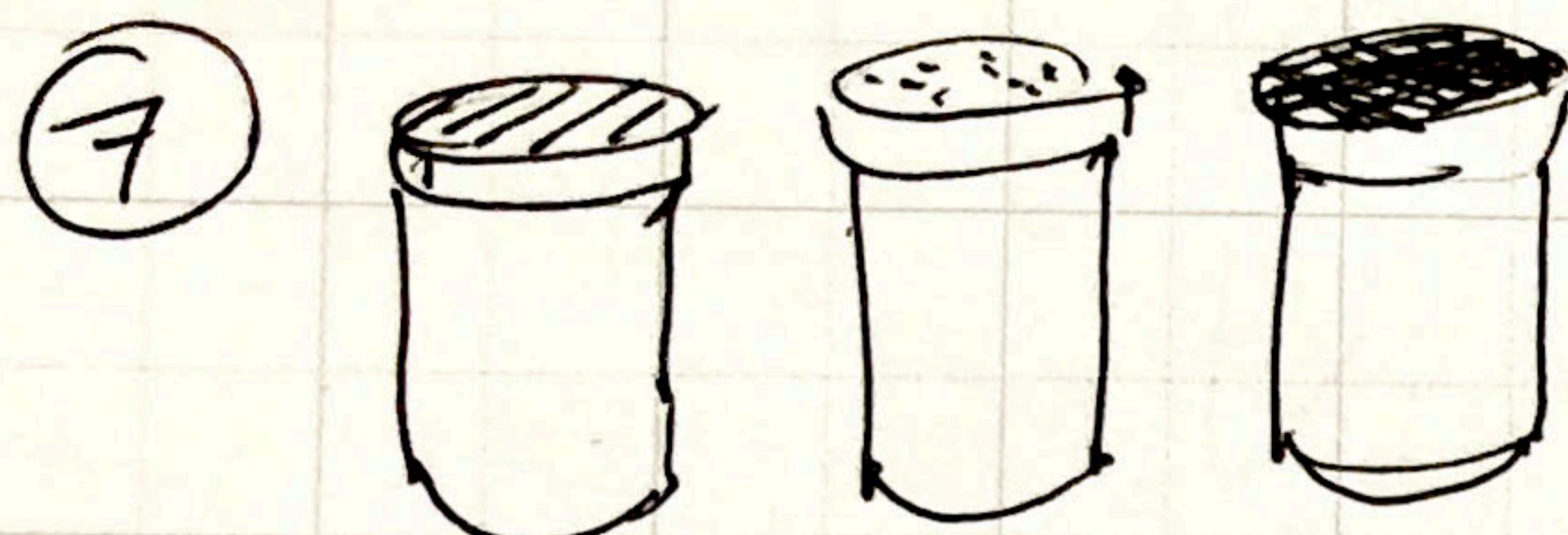
8.  
TOTAL \$  
TOTAL ADVERTISING  
YOU PAY \$

STAGE 0.

## PROCEDURES.

→ DEF.

## REASON FOR PROCEDURE



- 11: DAY 1
- 12: DAY 2
- 13: DAY 3.

## COST.

- CHARGES.
- ADJUSTMENT

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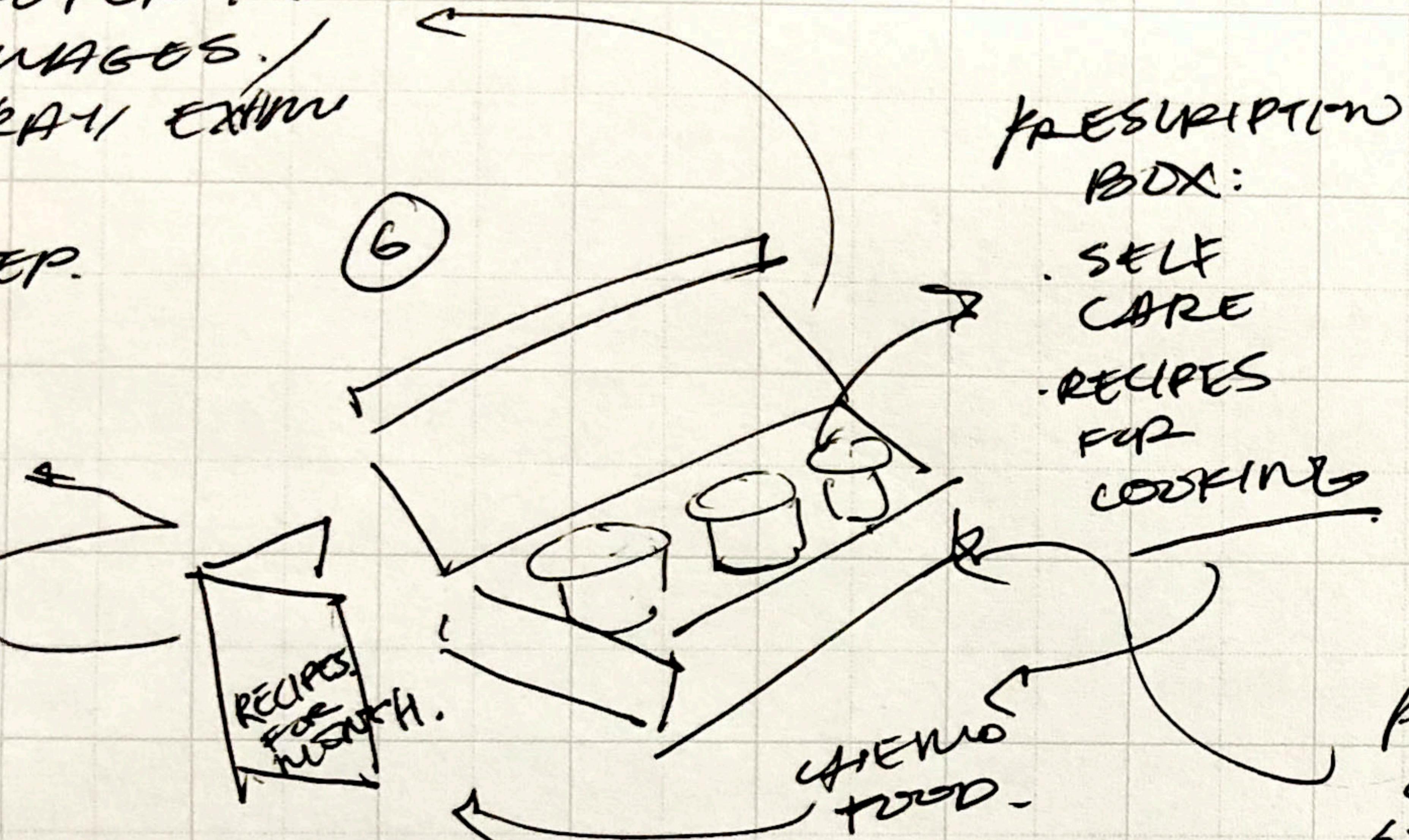
## CAREGIVER.

### SERVICE

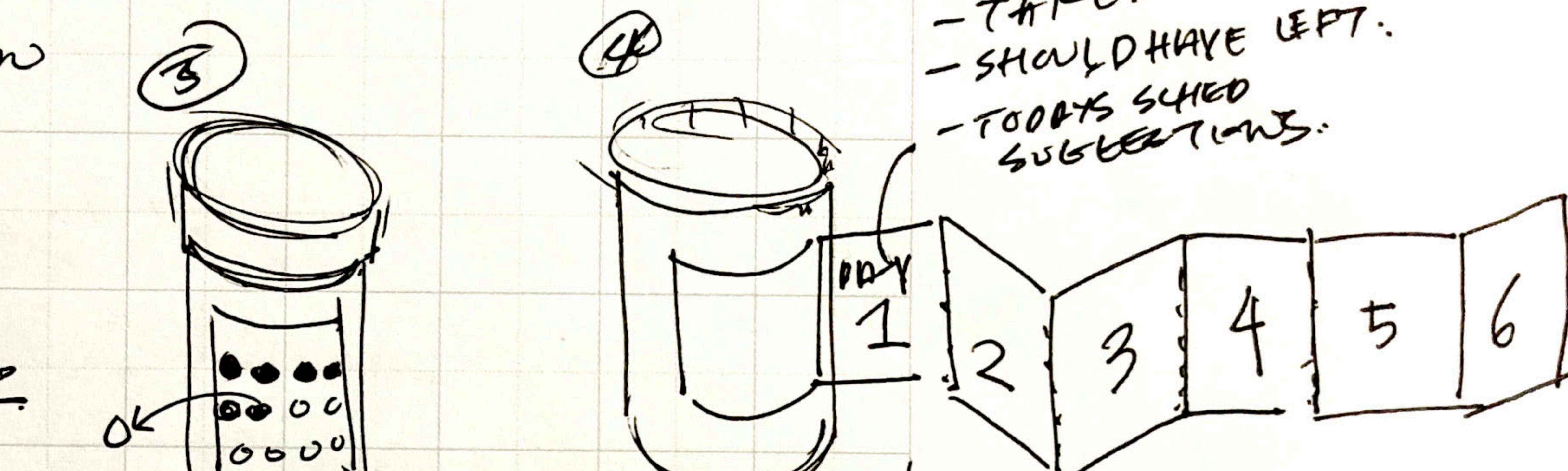
— MEDICATION /  
THE BOTTLE

PROGRESS  
REPORT:  
IMAGES /  
XRAY EXAM

MEAL PREP.  
15 MIN.  
FANCY  
DINNER.



ANCESTORY cont. → k17:  
23 and me.



- TAKE:
- SHOULD HAVE LEFT.
- FOODS SCHED SUGGESTIONS.

→ TAKE UP ONE.  
↳ RECIPE.  
↳ SIDE EFFECTS & CARE.  
↳ DOSAGE.

## POST VISIT SIDE EFFECTS & CARE.

①

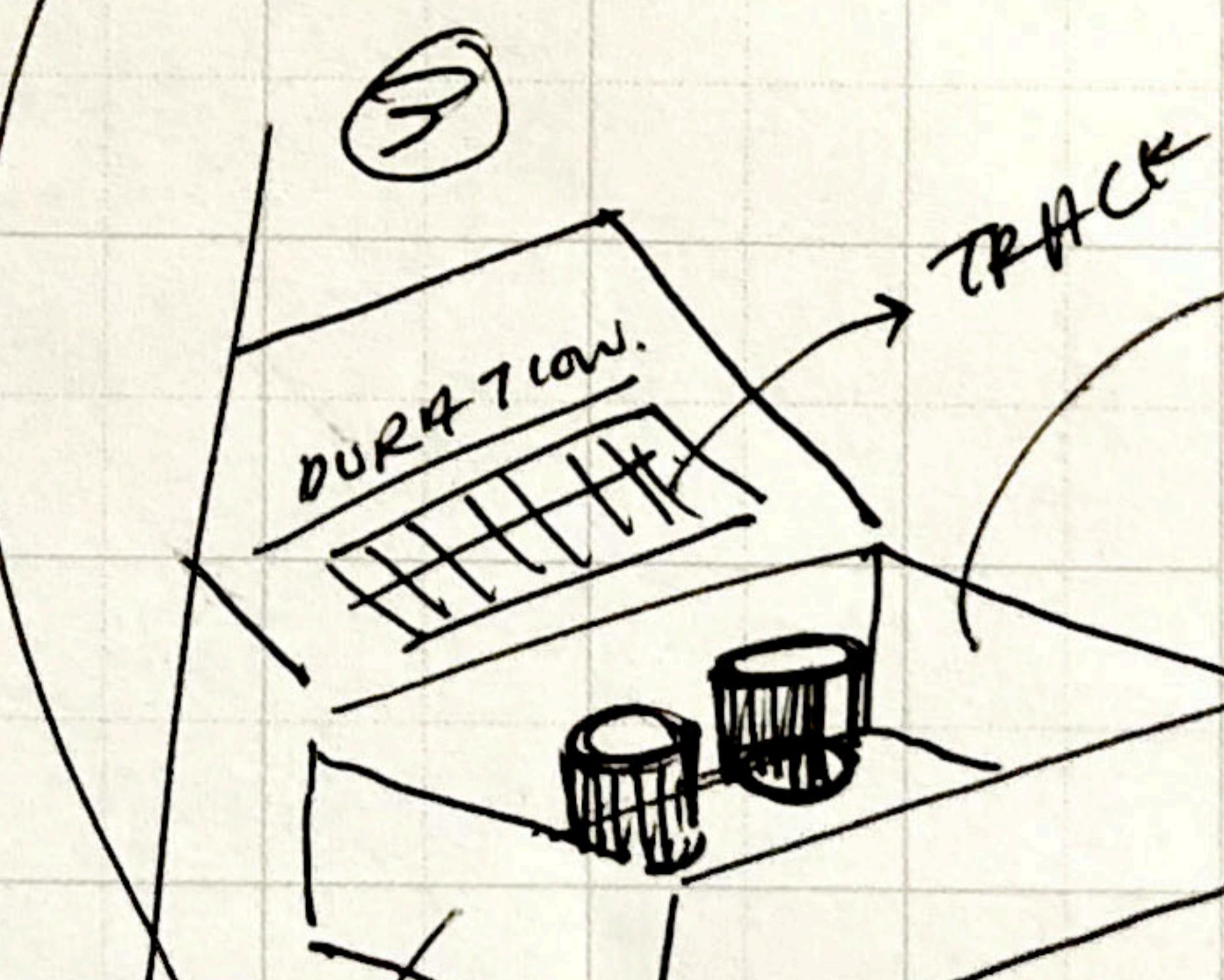
→ TAKE — my  
OXYCONTIN.



↳ MESSED DAILY  
AUTOMATED TIME/SCHED.  
HELPS KEEP  
TRACK OF  
REGIMENT.  
SEND ALERTS.



FLASHES LIGHTS  
FOR BEGINNING  
OF THE DAY




→ DISPLAY?  
↳ HOW TO UNPACK.

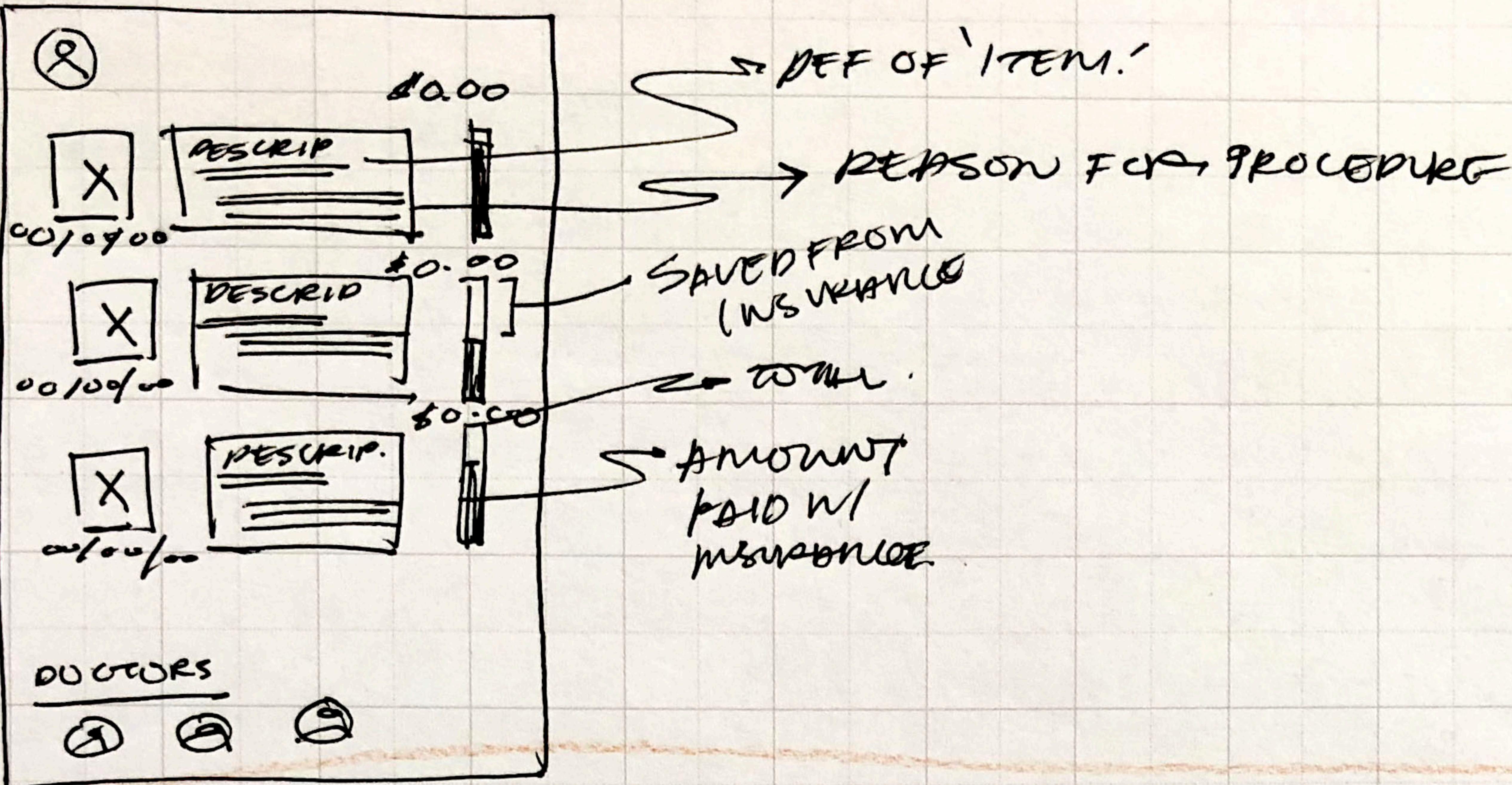
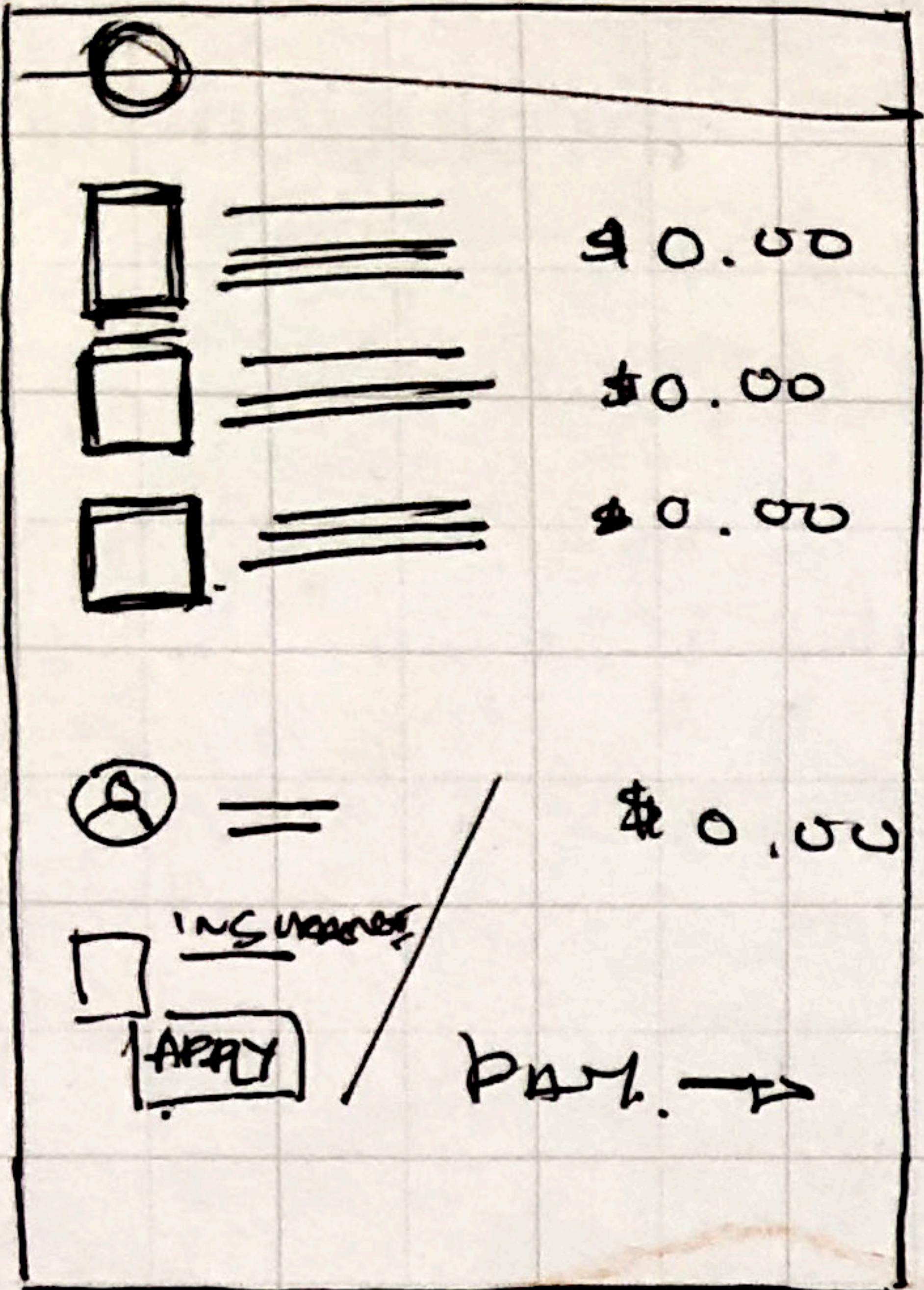
→ SUBSCRIPTION  
BOX OF MEDICATION  
FOR THE MONTH.

— LESS  
DOCTOR  
VISITS.  
— STAY AT HOME.

→ DIRECTIONS  
MUST BE  
CLEAR.  
→ SCHEDULED  
PR.CALS?  
TEXT /  
INSTRUCTION MANUAL.

CHEMO, ETC.





PAY.  
↳ TREATMENT  
↳ MEDICATION.

Eliminate Billing error.

To promote RECEIPT LITERACY.

- Comparing estimates to final bill.

BILLING CODE  
+  
COST  
HEALTHCARE PROVIDER

PROCEDURE COVERED?

EST FOR COVERED COST:

EST. \$ FOR PROCEPURE VS. PLAIN DUE POST APPNT.

- Create a list of charges.

MEDICAL SERVICES + SUPPLIES + CORRESPONDING CHARGES → TO IDENTIFY INCORRECT CHARGE

HISTORY OF CHARGES TO SPOT ANY INCORRECT FUTURE CHARGES.

MEDICAL SERVICE. \$0.00 BY DATE, OUTSTANDING CHARGES(?)

MEDICAL SUPPLY. \$0.00 BY DATE, OUTSTANDING CHARGES(?)

- "DUPLICATE" CHARGES = SAME CHARGE X2

ERROR DURING DATA ENTRY.  
DATE | DESCRIPT | QTY.

QUANTITY & DATE?

BY TYPE + QUANTITY?

DATE | TYPE | QTY. ? QUANTITY.

- Beware of "UPCODING" (PRAUD REPORT OF INCORRECT DIAGNOSIS FOR PROFIT.)

(CPT CODE (Current Procedural Terminology) + COST.  
ASSUMED.

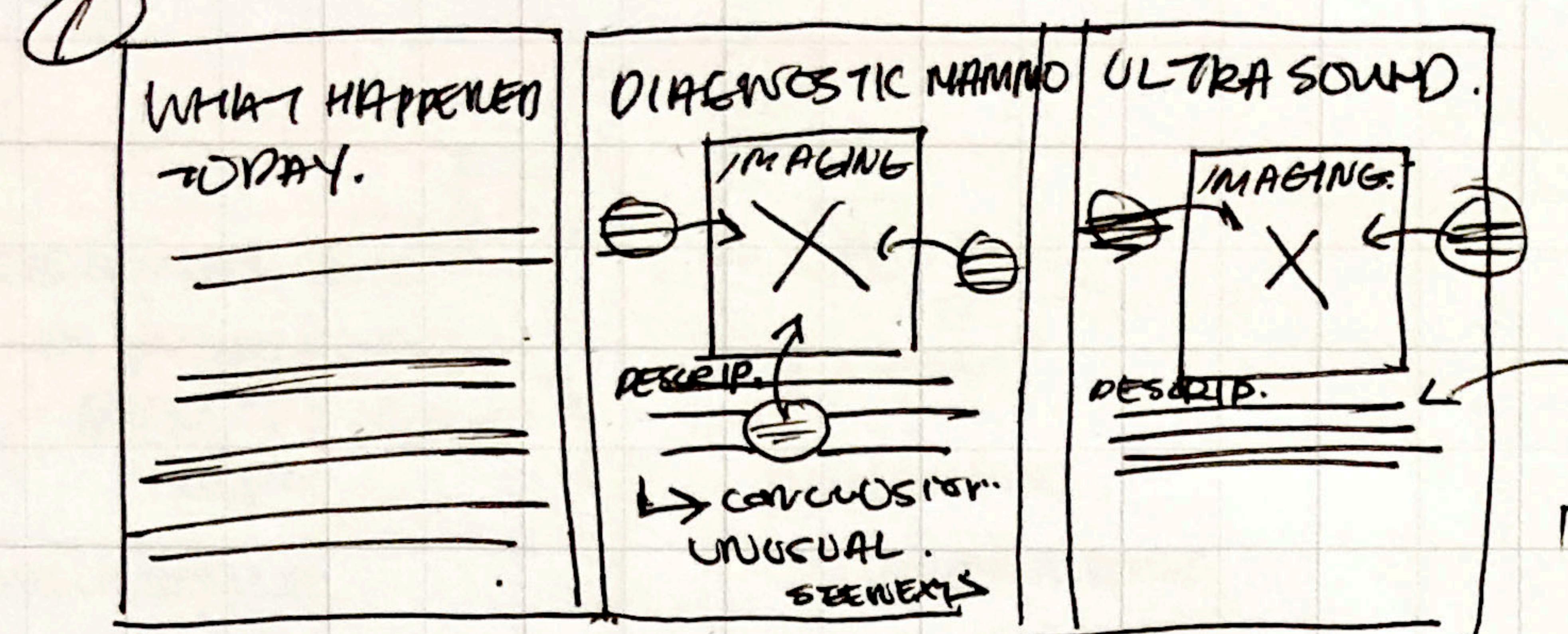
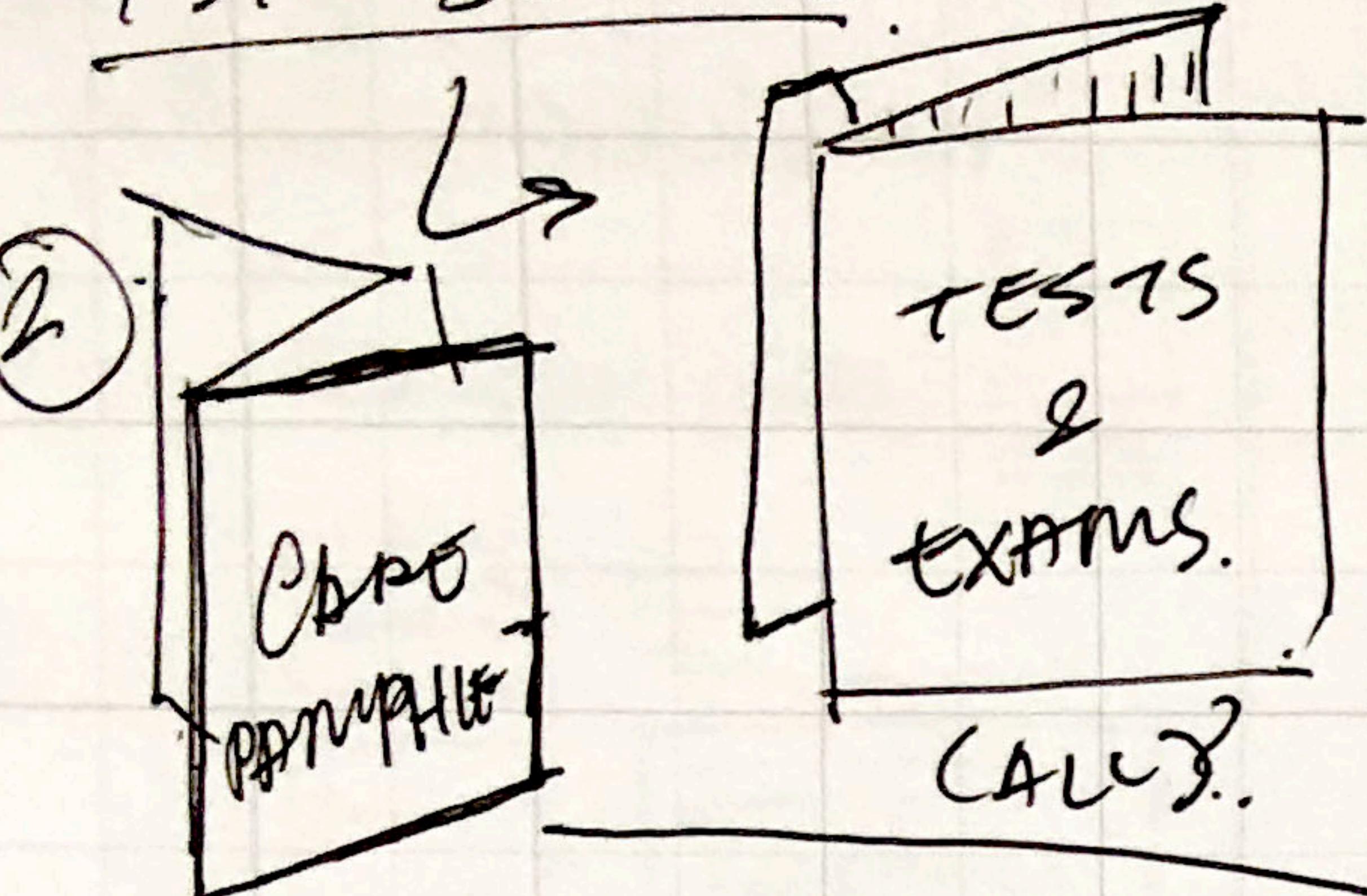
VS. AMOUNT CHARGED BY HEALTHCARE PROVIDER  
\$ + CPT.

- CHECK IDENTIFICATIONS.

NAME / IDENTIFICATION #1 HIERARCHY.

medicalbillingandcoding.org

## 1ST SESSION.



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PROCEDURE.  
REASON. (PERSONALIZED).

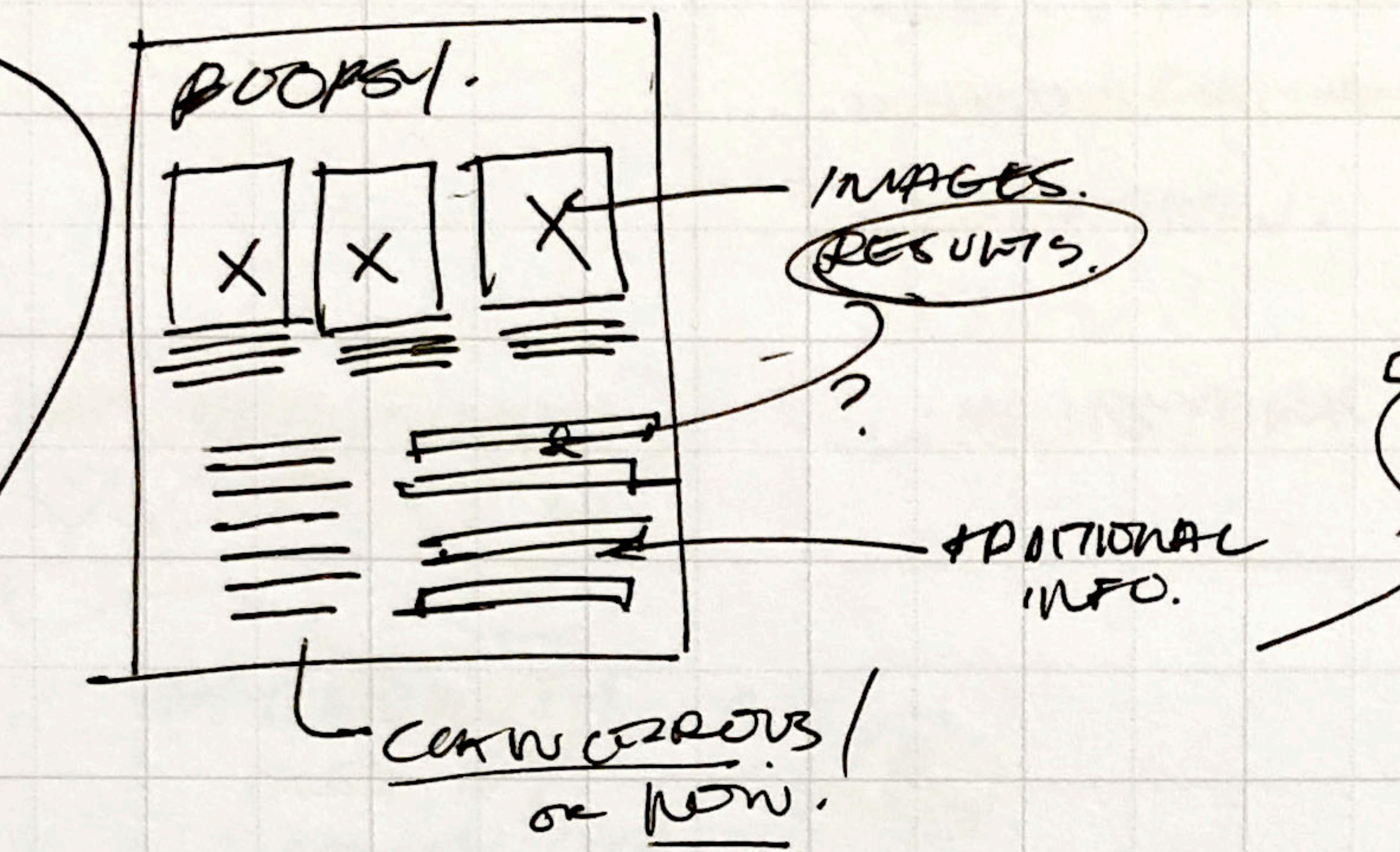
## 2ND SESSION.

### CONSULTATION

↳ CARE PLAN.

↓  
how to  
PERSONALIZE?

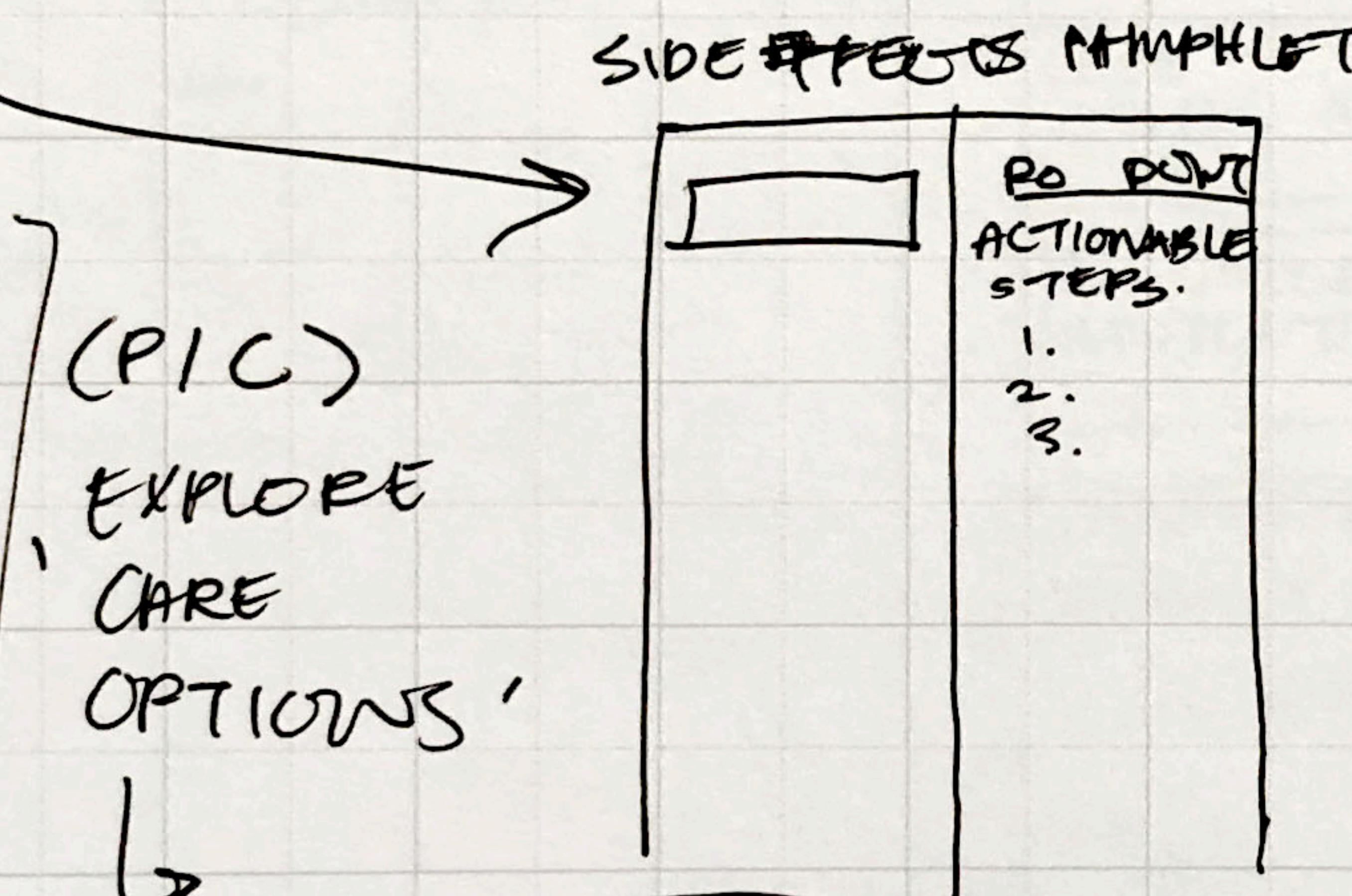
↳ CURRENT PATIENT  
(INPUT).



COST. (?)

SENT THROUGH  
PHONE (?)  
MOBILE (?)  
↳ APP.  
↳ ELECTRIC  
TRANSACTION.

↳ PATIENT INPUT.



ROLE OF THE  
FAMILY IN  
MAKING TREATMENT DECISIONS

PALLIATIVE CARE

HOSPICE CARE



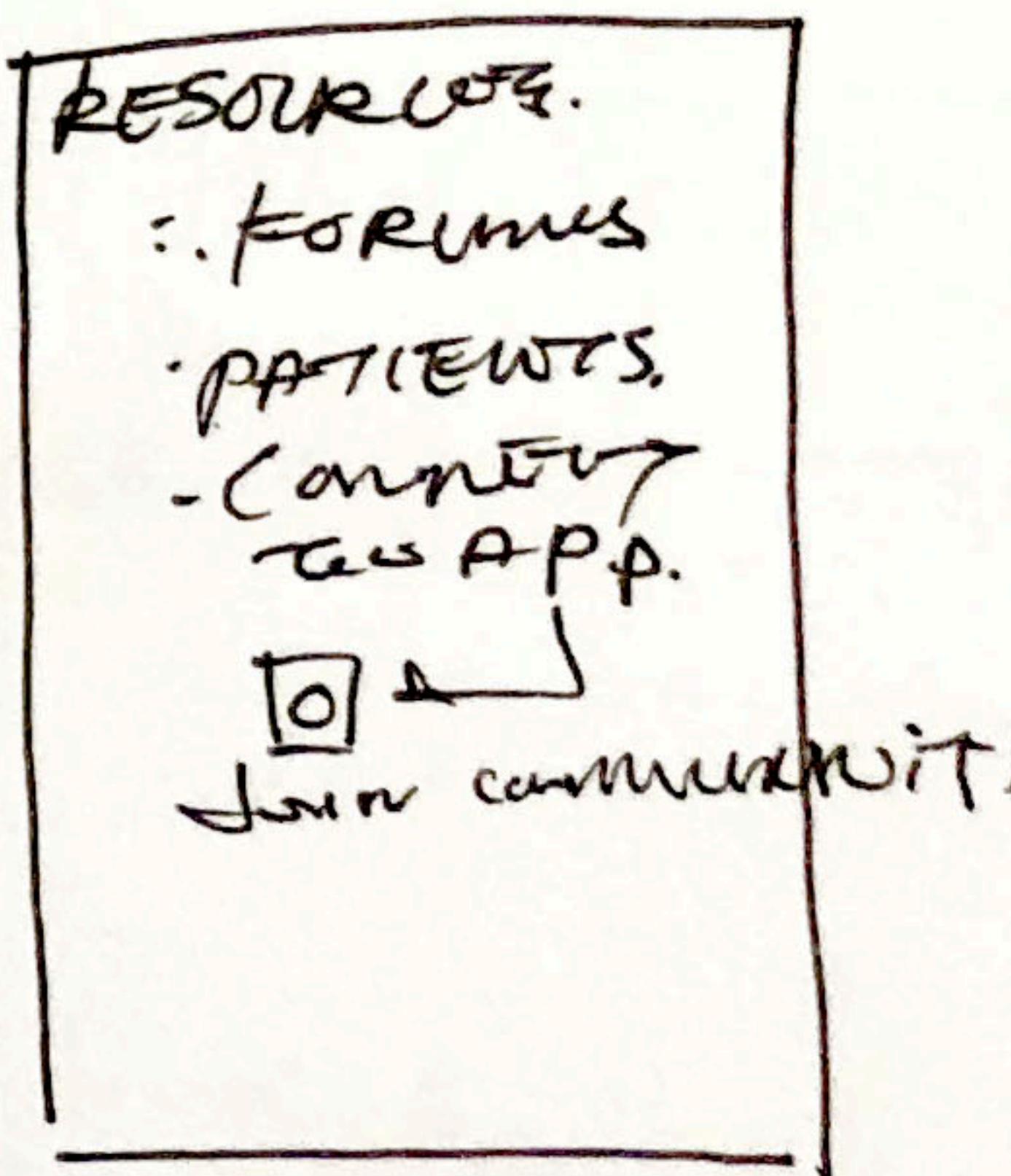
FOOD & RECIPES.

SCHEDULE.

RECOMMENDED  
SCHEDULE.

EVERY DAY:

EVERY OTHER DAY.



FORUMS  
PATIENTS  
- Connect to app.  
Join community.

NEEDS → TREATMENT /  
SIDE EFFECTS.

- PHYSICAL
- EMOTIONAL
- SPIRITUAL
- PRACTICAL

→ HOW TO DEAL  
WITH DIFFICULTY  
OF MANAGEMENT

→ WORK  
CHILDREN,  
FOOD.

- Preparation
- Emotional support
- Community
- Dignity
- Meaning

OPENING / END OF LIFE.

- ARRANGING AFFAIRS.
- REVIEWING YOUR LIFE
- RELIGION & SPIRITUALITY.

(P)

- RIGHT TO CHANGE ANY TIME
- PERSONAL
- GOALS / PRIORITIES.
- VALUES
- UNDERSTANDING RISKS & CONSEQUENCES.