

# A Closer Look at New Features for Clinicians

STREAMLINING CLINICAL WORKFLOWS



**Bobby Green, MD**  
Chief Medical Officer,  
Flatiron Health



**Elizabeth Dowd**  
Software Engineer,  
Flatiron Health



**Amila Patel, PharmD**  
Director of Clinical Product  
& Content, Flatiron Health

## Presenters



Bobby Green, MD  
Chief Medical Officer,  
Flatiron Health



Elizabeth Dowd  
Software Engineer,  
Flatiron Health



Amila Patel, PharmD  
Director of Clinical Product & Content,  
Flatiron Health

# Agenda

- Welcome

5 MINUTES

- A Peek Under the Hood: The Engineer Perspective

10 MINUTES

- A Closer Look at New Features for Clinicians

20 MINUTES

- Q&A

5 MINUTES

# OncoEMR Product Objectives

## Reliable



Bring dependable, reliable technology to OncoEMR users to build trust in our platform

## Simple



Bring consistent, easy-to-understand design patterns, and industry-standard content to OncoEMR

## Smart



Assist clinicians in providing the best possible care for patients, leveraging the scale of our network and our roots in technology



# Flatiron's team of clinicians work side by side with engineers throughout the product development process



Janet Donegan,  
ANP-BC AOCN



Nate Wade, PharmD,  
MSBA, BCOP



Kyle Ritter, PharmD,  
BCPS, BCOP



Amila Patel,  
PharmD, BCOP



Omar Lozano,  
PharmD



James Hamrick, MD



Bobby Green,  
MD



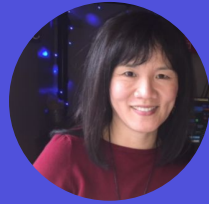
Ann Schwemm,  
PharmD, MPH, BCOP



Jennifer Miao,  
PharmD



Ali Fugaro,  
PA-C



Vivien Ekuan,  
PharmD



Leah Nida, MSN,  
NP, AOCNS



Rebecca Maniago,  
PharmD, BCOP

# Your feedback is central to our product development

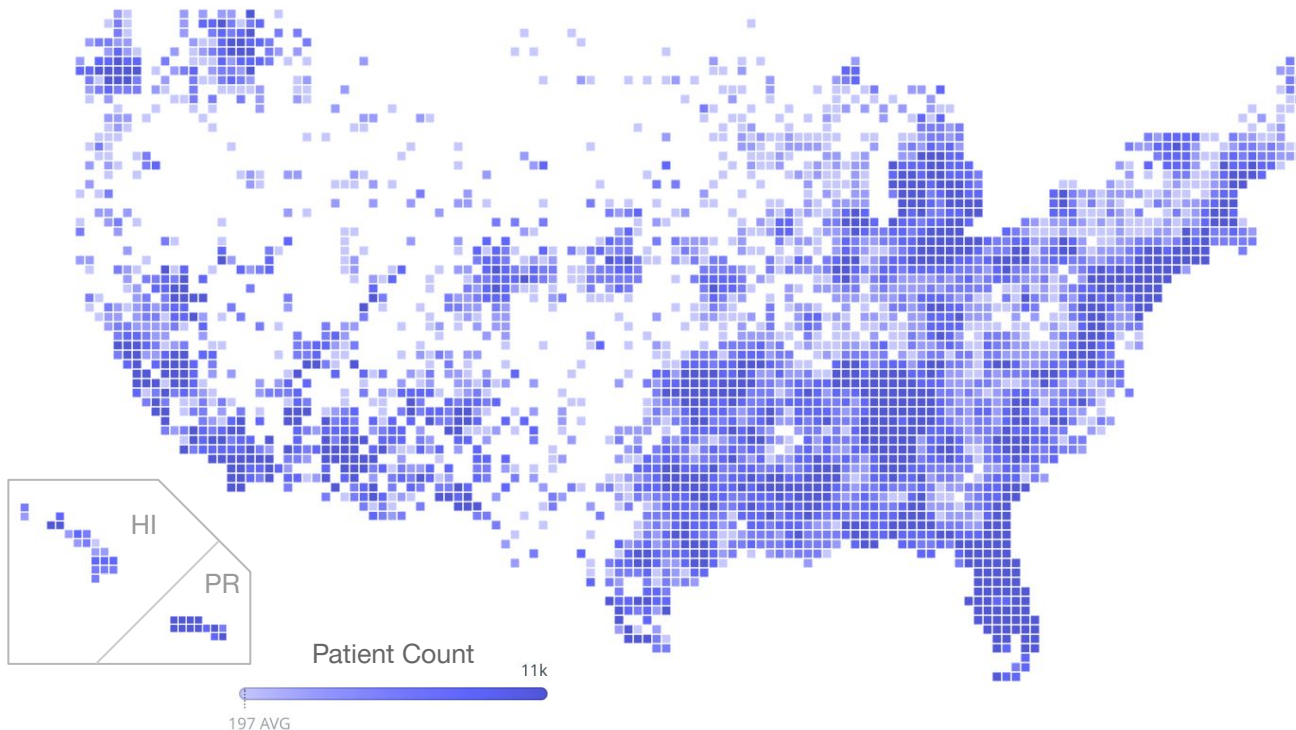
280  
Cancer Clinics

800+  
Unique Sites of Care

2,600+  
Clinicians

40+ hours  
1:1 User Interviews

24k+  
Cases and  
Suggestions



# New Features

Level 5

## FRIDAY

1:00pm – 3:45pm

## SATURDAY

7:45am – 1:00pm

2:45pm – 5:45pm

## SUNDAY

9:00am – 12:00pm



Stay informed  
with our  
newsletters



## Curbside

with Bobby Green, MD  
Chief Medical Officer



### Hi everyone!

We at Flatiron are trying something new—a newsletter geared for physicians, where I can share product updates, industry observations, and general medical musings. I'm hoping that this will be a way to share information that is most relevant to you.

This is our second issue of Curbside, and I'd love to know what you think of it. Please feel free to [email me](#) with any thoughts or feedback.

Have you noticed that the regimen search bar in OncoEMR now works more like Google?

Since an update the team rolled out last month, you can now search for



AUGUST 2019 NEWSLETTER

### CareSpace Launch Complete!

We have completed our transition from SeeYourChart to CareSpace with over 235 sites now live on CareSpace.

Since our initial CareSpace launch in April, we have developed several new features to support practice productivity and improve patient access to information.

What's next for CareSpace? In September, we will make improvements to the SeeYourChart inbox in OncoEMR, adding a sortable column for "Demographic MD" and a new filter for "View All Locations." This is the first step towards a larger redesign of the SeeYourChart inbox.

*"It is super simple to navigate and use, and doesn't require a lot of training."*

- Paula Inches, RN, MSN, OCN

Director of Clinical Operations at Northwest Oncology and Hematology

### Flatiron and MIPSRO: 2018 MIPS Performance Success

Nearly 140 practices and over 700 clinicians in the Flatiron network partnered with



Elizabeth Dowd

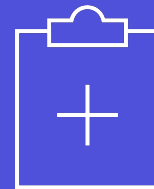
Software Engineer, Flatiron Health

# **flatiron** | Engineering & Clinical Expertise

---



World Class Software Engineers



Experienced Clinical Oncologists



“Finding ICD codes is hard.  
Make this work more like Google.”









elasticsearch

Patient Name: Doe, John (783647)      DOB: 1/1/1950      Gender: Male

## Diagnosis Lookup

### Filters

Coding System:    ICD-9    ☒ ICD-10

None selected

ckd

No results

### Additional Codes

(Select any that apply from the list below.)

Patient Name: Doe, John (783647)      DOB: 1/1/1950      Gender: Male

## Diagnosis Lookup

### Filters

Coding System:    ICD-9    ☒ ICD-10

None selected

cold

### Additional Codes

(Select any that apply from the list below.)

200 matches

- G83.82 - Anterior **cord** syndrome  
Nontraumatic anterior **cord** syndrome
- G83.83 - Posterior **cord** syndrome
- G95.20 - Unspecified **cord** compression  
Spinal **cord** compression
- G95.29 - Other **cord** compression
- P80.0 - **Cold** injury syndrome  
**Cold** injury syndrome of newborn
- J00 - Acute nasopharyngitis [common **cold**]  
Common **cold**

# Diagnosis Search Improvements

Improved search functionality for ICD-10 codes enables faster and easier diagnoses addition

- Save time with synonym matching to find the right diagnoses
- Drive efficiency with “frequently used” diagnoses, saving the need to search

The screenshot displays the 'Diagnosis Lookup' interface. At the top, it shows patient information: 'Patient Name: Morganstein, Andrew Benjamin (1234567)', 'DOB: 1/1/1945', and 'Gender: Male'. Below this is a 'Diagnosis Lookup' section with 'Cancel' and 'Save' buttons. The 'Filters' section includes a 'Coding System' dropdown set to 'ICD-10' and a search bar labeled 'None selected'. The 'Additional Codes' section, with the instruction '(Select any that apply from the list below.)', shows a search bar and a list of results. The first result is '1 frequently used' followed by 'J44.9 - Chronic obstructive pulmonary disease, unspecified'.

“Revolutionized my life, and better than Google.”

— Dr. Tran, Tennessee Oncology



Amila Patel, PharmD, BCOP

Director of Clinical Product & Content,  
Flatiron Health

# A Closer Look at New Features For Clinicians

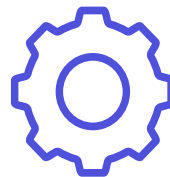


## In Development

Visit Notes

Inbox

Flatiron Assist



## Coming Soon

Drug Search

NGS Orders

Dose Calculation

# Drug Search Improvements

Simplified drug search experience.  
It's faster and easier to find the drug  
you're looking for.

- Search across brand and generic names
- Search across drug name and active ingredient
- Minimize script writer to easily navigate to the patient's chart
- New link to "Write Script" from the Patient Chart from navigation bar

The screenshot displays the ONCOEMR patient chart for Benjamin Finch. The interface includes a navigation bar on the left with options like Inbox, Search, GENERAL, PATIENT CHART, LABS & VITALS, and NURSE. The main content area shows the patient's clinical summary, including allergies, oncology/hematology diagnoses, and other medical problems.

**Clinical Summary**

Print Import ☒ Show patient-education icons

**Allergies** New Verify Selected ☐ Show Inactive

	Allergy	Type	Reaction (Severity)	Active	Inactive Reason	Last Verified	
Edit	shellfish derived	Drug	Hives (Moderate)	Y			

**Oncology/Hematology Diagnoses** New ICD-10 Diagnosis Verify Selected ☐ Show History ☐ Show Related Additional Codes Verify All Diagnoses

	Diag Date	Type	ICD-9	ICD-10	Stg Date	Description	Tx Setting	Status	Sts Date	Behavior	Last Verified	
Edit	1/7/2019	Primary	162.9	C34.90	1/14/2019	Non-Small Cell Lung Cancer (Thorax) - Pathologic Stage IVA (AJCC v8) TNM: pT3, pN3, cM1a				Malignant, primary site		

\* Indicates that the ICD Code has related Additional Codes.

**Other Medical Problems** New Show Active Only Verify Selected ☐ Show Related Additional Codes

	Date	Type	ICD-9	ICD-10	Problem	Comment	Status	Status Date	Last Verified	
Edit	9/6/2019	Diagnosis	405.99	I15.9	Secondary hypertension, unspecified		Active	9/6/2019		

\* Indicates that the ICD Code has related Additional Codes.

**Patient Status** New ☐ Show History

**Previous Treatment History** New  
No previous treatment history has been entered for this patient

**On-Going Treatment Events** New New Hospitalization  
No on-going treatment events have been entered for this patient

“

---

All the technology in the world is not going to help you if it's not intuitive and if the end user can't use it.”

**Robert Wachter**

The Digital Doctor: Hope, Hype, and Harm  
at the Dawn of Medicine's Computer Age

---

”



# Dose Calculation Redesign

Enable providers to safely, accurately, and more transparently calculate and confirm drug dosing for patients receiving chemotherapy

Make it easier for providers to:

- Visualize medication dosage inputs
- Get alerted when doses need to be updated or checked
- Easily change doses

**Steven Wilson** **SYC**  
 ROOM: None SEX: M MRN: 88888 DOB: 9/5/1974 (45) MD:  
 MEMO: No memo currently set for patient

Back Print w/ Options Print Goto MAR/Nurse Note Approve All Change Hx Patient Education ☒ Show medication-specific patient-education icons

**New:** Drug , Test , Radiology , Activity , Multiple Orders , Orderset  
**Actions:** Delay/Move , Delete , Print Labels , Cancel  
**Diagnoses:** 9/5/2019 Primary C18.9 Malignant neoplasm of colon, unspecified  
**Allergies:**  
**Regimens:** 1) NCCN\_COL2: Fluorouracil IVP(400)D1-Fluorouracil CI(1200)D1-2-Leucovorin(400)D1-2-OXALiplatin(85)D1 Q14D (mFOLFOX6) (1:1)

☐ 0 Adjust doses Recalculate doses

The patient variables used to calculate 4 medications have changed significantly since they were last calculated. Recalculate to ensure safe doses. Recalculate affected doses

Medication	Regimen dose	Adjustment	Patient value used	Dose to be given	Last updated	Reason	Approve All
<input type="checkbox"/> Cycle 1, Day 1 - NCCN_COL2: Fluorouracil IVP(400)D1-Fluorouracil CI(1200)D1-2-Leucovorin(400)D1-2-OXALiplatin(85)D1 Q14D (mFOLFOX6)							
<input type="checkbox"/> Palonosetron hcl (Aloxi) IV	0.25 mg	None	N/A	0.25 mg	Sep 18, 2019 by zAltos-Patel, A.	No data	Planned
<input type="checkbox"/> Dexamethasone Inj (Decadron, Dexa) IV	12 mg	None	N/A	12 mg	Sep 18, 2019 by zAltos-Patel, A.	No data	Planned
<input type="checkbox"/> Dexamethasone oral (Decadron, DexPak) PO	8 mg	None	N/A	8 mg	Sep 18, 2019 by zAltos-Patel, A.	No data	Planned
<input type="checkbox"/> OXALiplatin (Eloxatin) IV	85 mg/m <sup>2</sup>	-20% (68 mg/m <sup>2</sup> )	1.92 m <sup>2</sup>	130.56 mg	Sep 18, 2019 by zAltos-Patel, A.	Fatigue	Planned
<input type="checkbox"/> Leucovorin calcium IV	400 mg/m <sup>2</sup>	-20% (320 mg/m <sup>2</sup> )	1.92 m <sup>2</sup>	614.4 mg	Sep 18, 2019 by zAltos-Patel, A.	Fatigue	Planned
<input type="checkbox"/> Fluorouracil (5-FU) IVP	400 mg/m <sup>2</sup>	-20% (320 mg/m <sup>2</sup> )	1.92 m <sup>2</sup>	614.4 mg	Sep 18, 2019 by zAltos-Patel, A.	Fatigue	Planned
<input type="checkbox"/> Fluorouracil (5-FU) CI	2400 mg/m <sup>2</sup>	-20% (1920 mg/m <sup>2</sup> )	1.92 m <sup>2</sup>	3686.4 mg	Sep 18, 2019 by zAltos-Patel, A.	Fatigue	Planned

# Dose Calculation Redesign

Enable providers to safely, accurately, and more transparently calculate and confirm drug dosing for patients receiving chemotherapy

Make it easier for providers to:

- Visualize medication dosage inputs
- Get alerted when doses need to be updated or checked
- Easily change doses

### Adjust doses for 4 drugs

Steven Wilson M - #88888 - 09/05/1974 (45)

Adjust all to

%
 Adjust

Medication	Regimen dose	Dose adjustment		Dose to be given	
Cycle 1, Day 1 - NCCN COL2: Fluorouracil IVP(400)D1-Fluorouracil CI(1200)D1-2-Leucovorin(400)D1-OXALiplatin(85)D1 Q14D (mFOLFOX6)					
OXALiplatin (Eloxatin) IV	85 mg/m <sup>2</sup>	80 %	68 mg/m <sup>2</sup>	463 mg →	130.56 mg
Leucovorin calcium IV	400 mg/m <sup>2</sup>	80 %	320 mg/m <sup>2</sup>	768 mg →	614.39 mg
Fluorouracil (5-FU) IVP	400 mg/m <sup>2</sup>	80 %	320 mg/m <sup>2</sup>	768 mg →	614.39 mg
Fluorouracil (5-FU) CI	2400 mg/m <sup>2</sup>	80 %	1920 mg/m <sup>2</sup>	4608 mg →	3686.4 mg

Reason \*

Other ⌵

Other Reason \*

Fatigue

Apply changes to \*

All days (with a value) in t... ⌵

Cancel

Apply changes

# Dose Calculation Redesign

Enable providers to safely, accurately, and more transparently calculate and confirm drug dosing for patients receiving chemotherapy

Make it easier for providers to:

- Visualize medication dosage inputs
- Get alerted when doses need to be updated or checked
- Easily change doses

### Recalculate doses for drugs

Steven Wilson M - #88888 - 09/05/1974 (45)

Medication	Regimen dose	Adjustment	Patient value used	Dose to be given
Cycle 1, Day 1 - NCCN_COL2: Fluorouracil IVP(400)D1-Fluorouracil CI(1200)D1-2-Leucovorin(400)D1-OXALiplatin(85)D1 Q14D (mFOLFOX6)				
OXALiplatin (Eloxatin) IV	85 mg/m <sup>2</sup>	None	1.92 m <sup>2</sup> → 1.82 m <sup>2</sup>	463 mg → 154.76 mg
Leucovorin calcium IV	400 mg/m <sup>2</sup>	None	1.92 m <sup>2</sup> → 1.82 m <sup>2</sup>	768 mg → 728.27 mg
Fluorouracil (5-FU) IVP	400 mg/m <sup>2</sup>	None	1.92 m <sup>2</sup> → 1.82 m <sup>2</sup>	768 mg → 728.27 mg
Fluorouracil (5-FU) CI	2400 mg/m <sup>2</sup>	None	1.92 m <sup>2</sup> → 1.82 m <sup>2</sup>	4608 mg → 4369.61 mg

Reason \*

Recalculated using latest vitals and labs ↕

Apply changes to \*

All days (with a value) in ... ↕

Cancel
Apply changes

# Support the growing shift in personalized care

FDA NEWS RELEASE

## FDA finalizes guidances to accelerate the development of reliable, beneficial next generation sequencing-based tests

For Immediate Release: April 12, 2018

The U.S. Food and Drug Administration today finalized two guidances to drive the efficient development of a novel technology that scans a person's DNA to diagnose genetic diseases, which are usually hereditary, and guide medical treatments. The guidances provide recommendations for designing, developing, and validating tests that use the technology called next generation sequencing (NGS), and will play an important role in...

**Targeted Oncology**  
The Community Resource in Targeted  
Driving Knowledge. Empowering Change. Optimizing Outcomes.

NEWS CONFERENCES VIDEOS PUBLICATIONS

ONCAIert | Upfront Therapy for mRCC

Specialties >>>  
AML  
Bladder Cancer  
Breast Cancer  
CLL  
Colorectal Cancer  
DLBCL  
EGFR+ Lung Cancer  
Follicular Lymphoma  
Genomic Testing  
GLI Oncology

### Researchers at Sarah Cannon Show Increase in NGS Utilization in Community Practice

Danielle Terrilla  
Published Online: 4:21 PM, Tue August 6, 2019

Next-generation sequencing increasingly become more...

**YAHOO! FINANCE**

Search for news, symbols or companies

Next Generation Sequencing Market to Hit \$15 Billion by 2025: Global Market Insights Inc.

PR Newswire April 24, 2019

North America next generation sequencing market surpassed USD one billion in 2018 and is expected to register a lucrative CAGR from 2019 to 2025, driven by increasing prevalence of cancer and genetic diseases.

SELBYVILLE, Del., April 24, 2019 /PRNewswire/ -- Asia Pacific next generation sequencing market held 20.2 percent revenue share in 2018 and regional market growth is driven by rising prevalence of genetic diseases. People have become aware regarding benefits of early detection of genetic diseases that should augment adoption of NGS instruments in hospitals. Also, industry players such as Illumina having a strong foothold in this region adopt several initiatives that support development in the next generation sequencing techniques, ensuring its adoption and thereby proving beneficial for the regional industry growth.

Global next generation sequencing market is poised to surpass USD 15 billion by 2025, according to a new research report by Global Market Insights Inc. Research institutes and biotechnology companies undertake extensive R&D activities that will foster demand for next generation sequencing instruments over the forecast timeframe.

**CYRAMZA**  
ramucicab injection  
trastuzumab

### Next-Generation Sequencing Proves Cost-Effective in Metastatic NSCLC

May 17, 2018

CYRAMZA + docetaxel is the first and only FDA-approved antiangiogenic agent in the 2nd-line post-platinum setting in mNSCLC.

An economic model comparing different types of genetic testing in metastatic non-small cell lung cancer (NSCLC) showed that next-generation sequencing (NGS) is more cost-effective than testing for one or a limited number of genes at a given time.

The economic model in its entirety will be presented at the American Society of Clinical Oncology (ASCO) Annual Meeting (June 1-5, 2018, Chicago, IL).

Nathan A Pennell, MD, PhD, co-director, Cleveland Clinic Lung Cancer Program, and colleagues created an economic model to determine which gene testing approach is most cost-effective and time-efficient. The model utilized data from the Center for Medicare and Medicaid Services (CMS) and US commercial health plans to estimate costs. Patients with...

**CYRAMZA**  
ramucicab injection  
trastuzumab

See data

Full Prescribing Information

Indication and Important Safety Information, including Baseline Testing for Metastatic, Squamous Non-Small Cell Lung Cancer, and Impaired Wound Healing. CYRAMZA (ramucicab) is contraindicated with docetaxel, is contraindicated for the treatment of patients with metastatic non-small cell lung cancer (NSCLC) with disease progression on or after...

**Latest Issue**

**August 2019**

Current State of Myelodysplastic Syndromes: Standard Treatment Practices and Therapeutic Advances  
The Value of a Transparent, Inclusive Assessment Tool in Health Care

# NGS Orders and Results

Streamlined NGS ordering workflow allows providers to place NGS orders, track status, and view results without leaving OncoEMR

- Easy process for ordering NGS tests, monitoring order status, and viewing the results
- Simplify data entry and practice coordination

The screenshot displays the OncoEMR interface for a patient named Andrew Benjamin Morganstein. The left sidebar contains navigation options: Inbox, Search, GENERAL (Visit lists, Scheduler, Reports, New task), PATIENT CHART (Demographics, Summary, Documents, Treatment plan, In-house Rx, Orders, Visit notes, Referrals, Text note), LABS & VITALS (Collection record, Lab results, Vital signs), and NURSE (MAR, Superbill). The main content area is titled 'FoundationOne CDx' and shows the following information:

- Billing information:** On-record coverage: United Healthcare
- Payment method:** ☒ On-record coverage, ☐ Self-pay, ☐ Facility
- Coverage type:** ☒ Original Medicare, ☐ Medicare Advantage, ☐ Non-Medicare
- Patient status:** ☒ Inpatient - hospital, ☐ Outpatient - hospital, ☐ Non-hospital
- Inpatient status:** ☐ Remains admitted, ☒ Discharged
- Discharged date:** 07/20/19
- Disease information:**
  - Diagnosis:**
    - ☒ Non-Small Cell Lung Cancer (Thorax)
      - ☒ C34.01 - Malignant neoplasm of right main bronchus
      - ☐ Stage IV
    - ☐ Prostate Cancer (Genitourinary)
      - ☐ C61 - Malignant neoplasm of prostate
      - ☐ Stage IIA
  - Disease status:** Select all that apply
    - ☒ Metastatic
    - ☐ Recurrent
    - ☐ Refractory
    - ☐ Relapse
- Specimen information:**
  - Pathology report:** This helps ensure the right specimen is tested.
    - ☒ Path report chest 07/19/19 [View](#)
    - ☐ Path abdomen 03/02/18 [View](#)

# Surface evidence-based treatment options



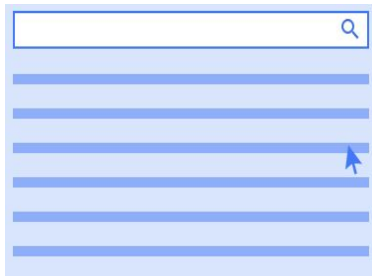
Choose the right treatment for each patient



Prove concordance to payers



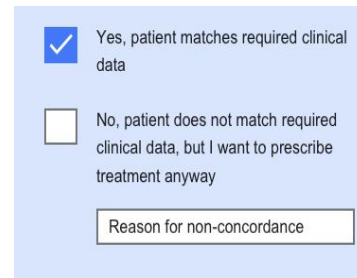
Reduce burden of documentation



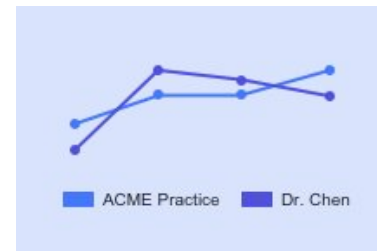
Clinician **selects**  
a regimen in  
OncoEMR



Flatiron Assist  
**displays data**  
**points** required for  
guideline  
concordance



Clinician **attests all**  
**data points are true**  
or provides reason for  
non-concordance



Physician-level  
**concordance**  
**reporting** available to  
practices

ONCOEMR
Home
Group Inboxes
Los Altos
J. Smith

flatiron ASSIST

**Ruth Beacon** Female – #123456 – 12/31/1956 (63)

**About this patient:** [Unselect all](#)

- ☒ **DISEASE:** NSCLC [EHR](#) ✓
- ☒ **pM:** pM1a [EHR](#) ✓
- ☒ **EGFR STATUS:** Positive
- ☒ **SETTING:** Metastatic
- ☒ **HISTOPATHOLOGY:** Adenocarcinoma (with mixed subtypes)
- ☐ Add additional clinical factors

**Resources**

- [NCCN Guidelines® Homepage](#)
- [UpToDate®](#)
- [What version of NCCN content are we using?](#)

### NSC66: Osimertinib PO(80 QD)D1-28 Q28D

NCCN guidelines state that this regimen must be used within one of the following recommended use cases in order to be guideline concordant. Please select the use case that accurately represents this patient.

NCCN recommended use cases:

- ☒ **Line of therapy: First Line**

This regimen is one of the payor preferred regimens for this patient.
- ☐ **Line of therapy: Continuation**  
**Progression:** Yes  
**Previous Treatment:** Osimertinib  
**Other:** Asymptomatic disease, symptomatic brain lesions, or isolated symptomatic systemic lesions
- ☐ **Line of therapy: Subsequent**  
**Progression:** Yes  
**EGFR T790M Status:** Positive  
**Previous Treatment:** Erlotinib, Afatinib, Gefitinib, Dacomitinib
- ☐ **Line of therapy: Subsequent**  
**Progression:** Yes  
**Previous Treatment:** Erlotinib, Afatinib, Gefitinib, Dacomitinib  
**Other:** Progressive leptomeningeal disease

☐ This patient does not fall into one of these NCCN recommended use cases, and therefore this regimen is off-guideline.

Back
☒ Store all clinical factors in patient chart
Select regimen



Clean up the inbox to help manage your work



# Inbox Improvements for Clinicians

Inbox Improvements designed to reduce noise and improve communications

## Inbox Bypass

- Paper documents signed by providers can now skip the inbox

## Redesigned Tasking Includes:

- Multiple recipients
- Assignment, status and due date
- Threaded messages

The 'Import a document' form is for patient **Andrew Benjamin Morganstein** (M - 123456 - 09/06/1944 (75)). It includes fields for:

- File\***: A file named 'CBC-AndrewBenjamin-08/25/2019.PDF' is selected.
- Category\***: 'Lab Result' is selected from a dropdown.
- Document name\***: 'CBC 08/27/2019' is entered.
- Document date\***: 'Thurs, 08/27/2019' is selected from a date picker.
- Route document to\***: 'McCauley M.D., Christopher' is selected from a dropdown.
- A checkbox is checked: 'This document has a handwritten signature by the selected physician.'
- Comment**: A text area for additional notes.

The 'Task' interface shows a task for **Andrew Benjamin Morganstein** (Male - #123456 - 12/31/1956 (63)).

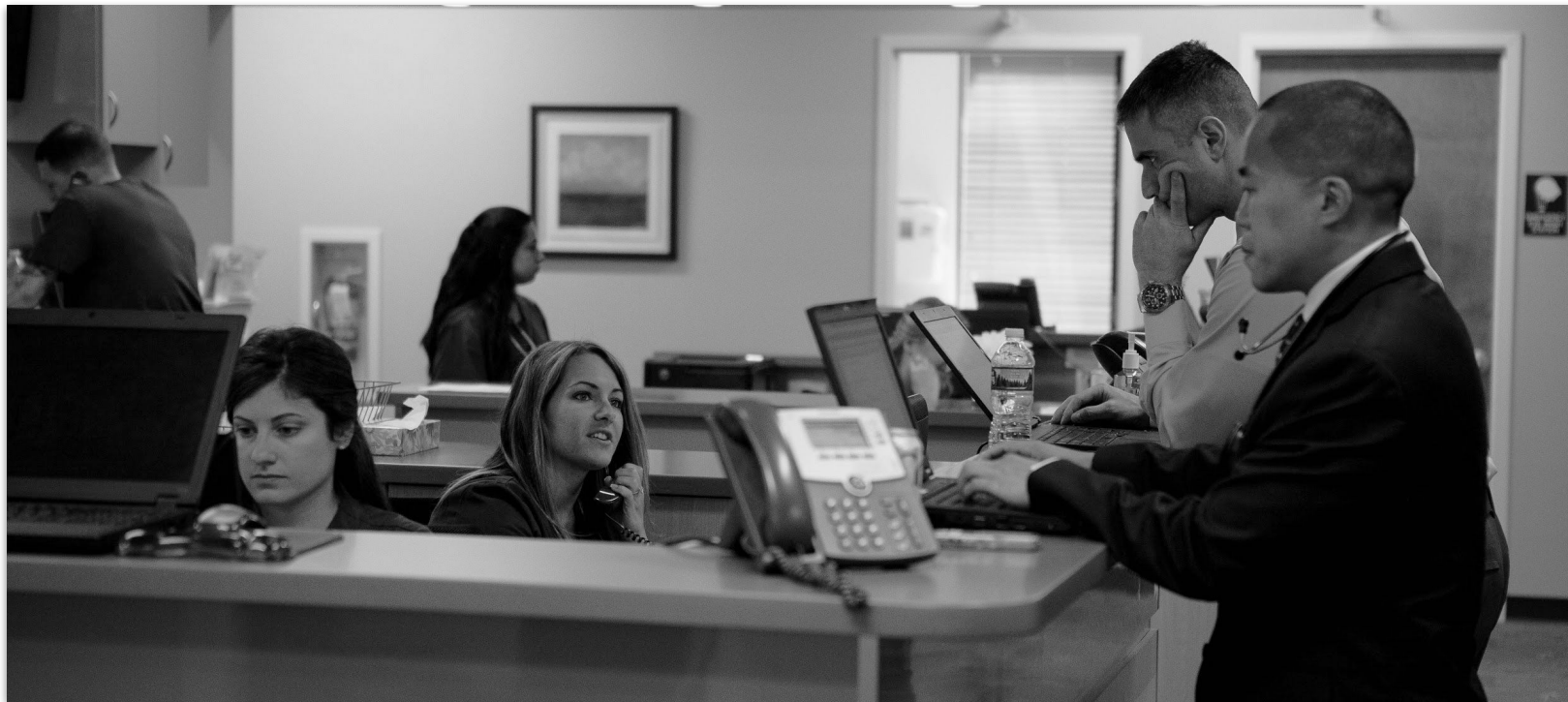
**Task Details:**

- Show in chart**: Checked.
- Assignee**: Ali Fugaro (dropdown).
- Status**: In progress (dropdown).
- Due Date**: ASAP (dropdown).
- Recipients**: Ali Fugaro, Coulton Bunney, Jane Jones. [+ Add recipient](#)
- Task Description**: Appointment scheduled for next Tuesday.
- Actions**: [Send and Complete](#), [Send](#)

**Task History:**

- Ali Fugaro** Today, 7/11/2019, 12:34 PM: Assigned to self. Status changed to In Progress.
- Coulton Bunney** Today, 7/11/2019, 9:34 AM: Pls call patient and schedule an MD visit. CBC lower than expected. Due date set to ASAP.

# Support care team collaboration



# Visit Notes Redesign

- Focusing on simplicity and speed for physician documentation
- Tightly integrated with the overall physician workflow
- Enables real time collaboration

Document visit

Janet Green Female - #123456 - 12/31/1957 (62)

**MD Follow up**  
July 20, 2019 at 5:30 PM  
Hamrick, James

[Visit summary](#)

[Patient history](#) 2

**Assessment and plan \***  
Choose the problems relevant to this visit.

**Diagnoses**

Non-Small Cell Lung Cancer (Thorax)

Describe your assessment and plan...

[+ Add diagnosis](#)

**Visit findings**

Review of systems: Psychiatric abnormalities

Describe your assessment and plan...

Review of systems: Gastrointestinal abnormalities

Describe your assessment and plan...

Physical exam: Skin abnormalities

Describe your assessment and plan...

Physical exam: Mental/behavioral abnormalities

Describe your assessment and plan...

All changes saved

4/5 [Next](#) >

# A Closer Look at New Features For Clinicians

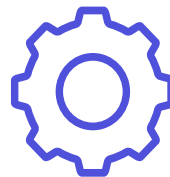


## In Development

Visit Notes

Inbox

Flatiron Assist



## Coming Soon

Drug Search

NGS Orders

Dose Calculation

# A Closer Look at New Features for Clinicians

STREAMLINING CLINICAL WORKFLOWS



**Bobby Green, MD**  
Chief Medical Officer,  
Flatiron Health

**Elizabeth Dowd**  
Software Engineer,  
Flatiron Health

**Amila Patel, PharmD**  
Director of Clinical Product  
& Content, Flatiron Health

# Thank you