Clinical decision support (CDS) is a key process for enhancing health-related decisions and actions with pertinent, organized clinical knowledge and patient information to improve health and healthcare delivery. CDS pathways can supply timely information at the point of care to inform Oncology Nurse Navigator (ONN) decisions about symptom management.

The objective of this pilot study is to implement and evaluate an electronic, interactive oncology CDS pathway tool in a real-world setting to provide ONN support in supplying dynamic, algorithm-driven, evidence-based care recommendations to patients experiencing cancer treatment side effects.

The PROmpt® pathway can supply timely information at the point of care to inform Oncology Nurse Navigator (ONN) decisions about symptom management. The PROmpt® tool was designed to be used as a Proactive Health Questioning (ePRO) tool and be embedded in electronic health record systems. The PROmpt® platform is composed of symptom screening and symptom assessment tools. The PROmpt® platform was integrated into the community based oncology clinic to provide evidence-based recommendations to patients experiencing cancer treatment side effects.

The PROmpt® tool was utilized by 80% of patients enrolled in PROmpt®. The majority of patients were breast (n=20), and lung (n=20), and the most commonly reported symptoms (by both number and severity) were fatigue (n=20), and lung (n=20), and the most commonly reported symptoms (by both number and severity) were fatigue (n=20), and lung (n=20). Eligible patients had breast, colorectal, head and neck, lung or other cancers. Using the PROmpt® platform, patients communicated symptoms weekly and were asked if they wanted to receive follow-up reporting of symptoms and health measures to their care teams. The PROmpt® platform is an ePRO and health reporting tool that allows proactive weekly reporting of symptoms and health measures to their care teams. Patients can view their reported symptoms over time, receive both automated and care-team specific responses and self-care plans throughout their cancer care experience.

CONCLUSION

CDS for addressing oncology symptom presentation and mitigation can be effectively incorporated into clinical workflows. NN completed comprehensive assessments and delivered evidence-based recommendations in a few minutes and were supported in working to the top of their licensure with confidence via the CDS system. Acceptance of recommendation rates show usefulness. Consistent, standardized data inputs allowed for workflow and population insights. Evaluation of the tool will be expanded to include other nursing roles (triage or clinic nurse) and added oncology clinical workflows.