Oncology Patient Journey Map

Participant Profile:

Patient Name:
Tammy

Age: **37** Location: **USA** Sex: **Female**

Occupation:
Executive Assistant for a regional Insurance company

Patient Background:

- **Single mother**
- **Two children**
- **Works part time** as executive assistant
- **Lives 45 miles from a major academic medical center** in Western NY.
- **Diagnosed with Non-Hodgkin Lymphoma** after extended low grade illness, mass found on diagnostic X RAY, single inflamed node in left side of neck, below collar bone, at last clinical visit.

Key Considerations from interviews with patient:

- **Needs flexibility** to address care coverage for children, closest family members are 1000 miles away
- **Needs to be able** to continue working
- **Will need to take time off** for treatment, work is schedule driven
- **Concerns about insurance** coverage and costs for any treatment
- **Concerns about "down time"** - how long will medicine affect ability to work, "live life"

Telehealth visit
Smart pill bottle
Home health nurse visit
Diary
Study-related technology portal
Additional diary on medication ingestion

Journey Stage

Pre-trial / Prescreening

Enrollment/Consent

Study Participation - Schedule of Activities

Study Closeout - Schedule of Activities

Key considerations

Patients will be newly diagnosed.

Patients learn about their diagnosis through workup with oncology team (not a "self diagnosed" condition), some precipitating event typically leads to diagnosis of lymphoma, staging/biopsies.

Potential participants learn about the study and related advocacy groups through social media, oncology care team, other participants, other patient advocates.

Visit 0

Informed consent discussion will take place with study team. Family members may participate. Participant may want to share with oncology team (if not PI). Provide and train on study-related technology portal, diary, smart pill bottle

Visit 1

On site at study location, initial dose of medication will be delivered.

Study medication will also be given to patient at this visit (**one smart medication bottle**)

Visit 2-4

Telehealth visit on day of medication ingestion.

After telehealth visit, patient will be prompted to fill out additional diary on medication ingestion, quality of life throughout trial

Visit 5

Trial Mid-point.

Telehealth check in, no medication.

Labs collected locally or at patients home (home health nurse visit)

Visit 6-9

Telehealth visit on day of medication ingestion.

After telehealth visit, patient will be prompted to fill out additional diary on medication ingestion, quality of life throughout trial.

Visit 10

Post-study closeout, results shared when trial is complete. Patient's trial data set is returned to the patient.

Key Participants

Patient, care team, caregivers as needed

Healthcare Team

Oncologist, primary care physician, nurse navigator

Empathy Mapping:

Thinking/feeling/doingr

Will this trial help me?
What impact might my participation have on my job, my family, my children?

Will my participation make a difference for future patients?

What concerns will patients have about technologies used in the trial eConsent

Patient portal for SOA tracking

medication adherence device, (smart pill bottle)

ePros
Virtual visits

Will the technology work?

Will technology help connect patients and care teams when not on site?

Will patients feel connected/engaged throughout the trial?

What is needed to make sure patient feels supported?

What happens if patient loses connection during telehealth visit?

What happens if pill box doesn't work?

What if patient loses medication? Takes too much, skips dose? How is team notified?

What comes next? Are there long term side effects i need to be aware of? What is the normal follow up for something like this?

Pain Points

Barriers retention and engagement blockers

Diagnosis
Awareness of clinical research

What would prevent participation?

Lack of understanding of how the medicine might work. Will it help me? What are the long term effects?

Time to participate in the trial

Scheduling

Transportation to major academic center for two visits

Key motivators for this trial?

Early stage cancer, with new, simpler treatment option

Help others

Cutting edge care options for disease, with ease of participation (oral medication, no infusion needed)

Length of trial - How will I feel after I take the study medications?

Will I be to work, or care for my family?

How long will it take me to get to site?

Can I take a telehealth call at my office?

Do I need a special internet connection?

Do I need a special phone?

While study results are rarely shared, this trial will be an exception.

All data for the patient will be returned.

Where do I go next?

What's next?

DCT Components

Trial is hybrid - with onsite and telehealth optionss

Consent
Review ICF before onsite consent process: Read from home before coming to the center

Use eConsent to allow for multi modal engagement, video/audio learning options

Engage with patient to gauge literacy/understanding of information

Multiple modalities for information sharing

Knowledge checks

Opportunities to ask questions

On Site Visits.

Initial and final labs are collected on site.

Telehealth/Virtual Visits

Can take place at home or work

Local Labs only needed a mid point of trial

Medication is given to patient at first visit, contained in smart pill bottle

Weekly checkins coupled with medication telehealth appointment every three weeks.

Information is collected digitally and should be shared with care teams.

What do sponsors, sites, and tech providers need to run a trial like this?

Access to software to support eConsent, eCOA, ePRO, smart pill technologies, patient portals.

Site needs software for eConsent

Site needs ability to connect to patient via Telehealth.

Site and Patients need access to patient portal, telehealth tools, and smart pill solutions.

Patient needs long term access to trial information. Site needs to support patients long term access.