

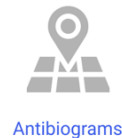
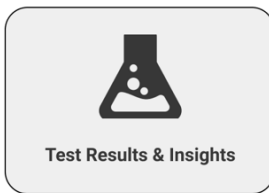
# Oncohub: User Experience Considerations in Focus

By Nick Zedlar, Senior UX Designer

December, 2021

## What features or data do physicians need?

In addition to the standard test results and clinical trial information, Oncohub offers expanded functionality in its **Calculators & Resources** and **Antibiograms** sections, as depicted here:



It should be noted, however, that initial findings from the first round of participants in the UserZoom usability questionnaire don't seem to attribute much utility to the antibiograms section. Follow up to determine if this is indeed the case.

## How is the proposed Oncohub presentation of test data different than the enhanced report?

There are many differences, mainly because Oncohub is not limited to the constraints of a static, physical (paper) medium. That said, Oncohub is modeled after the enhanced report format.

Most obviously, data is (near) real-time, more expansive and richer, and the user experience is *customizable*—that is, an individual's persistent or session preferences are configurable—in addition to being *personalizable*—that is, the user's organization, administrators or LabCorp liaison/proxy can select certain individual, group or global settings, as they see fit.

Whereas improved proposed integration with the enhanced report can take place with the use of QR codes or similar solutions to at least partially bridge the paper-digital divide (as shown below), there's no substitute for true interactivity, up-to-date data, and the pure depth of the online experience. See Best Practice #2 of [3 UX Best Practices for Medical Product Designers](#).

McLastname, First N      DOB: 06/01/1947      Patient Report  
Patient ID: 1234      Age: 72      Account Number: 01818355  
Specimen ID: 119-990-4922-9      Sex: Male      Ordering Physician: David Johnson



Ordered Items: CMP, Lipid Panel, Hemoglobin A1C, CBC with Diff, Urinalysis, Vitamin D

Date Collected: 04/29/2019      Date Received: 04/29/2019      Date Reported: 04/30/2019      Fasting: Yes

#### General Comments & Additional Information

Clinical Info: CLINICAL INFORMATION 1  
Clinical Info: CLINICAL INFORMATION 2  
Clinical Info: CLINICAL INFORMATION 3  
Total Volume: Not Provided

#### Hemoglobin A1C

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Hemoglobin A1c				
Hemoglobin A1c levels between 5.7% and 6.4% mean you have a higher chance of getting diabetes. Levels of 6.5% or higher mean you have.				
Setting Goals for A1c Levels				
The target A1c level for people with diabetes is usually less than 7%. The higher the hemoglobin A1c, the higher your risk of having complications related to diabetes.				
A combination of diet, exercise, and medication can bring your levels down.				
People with diabetes should have an A1c test every 3 months to make sure their blood sugar is in their target range. If your diabetes is under good control, you may be able to wait longer between the blood tests. But experts recommend checking at least two times a year.				
A combination of diet, exercise, and medication can bring your levels down.				



#### CBC With Differential/Platelet

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
WBC <sup>(1)</sup>	8.5	8.5    11/03/2020	x10E3/uL	3.4-10.8
RBC <sup>(1)</sup>	4.8	4.23    11/03/2020	x10E6/uL	4.14-5.80
Hemoglobin <sup>(1)</sup>	14.4	14.8    11/03/2020	g/dL	13.0-17.7
Hematocrit <sup>(1)</sup>	41.7	40.2    11/03/2020	%	37.5-51.0
MCV <sup>(1)</sup>	84	86    11/03/2020	fL	79-97
MCH <sup>(1)</sup>	86	87    11/03/2020	pg	26.6-33.0
MCHC <sup>(1)</sup>	34.5	35.1    11/03/2020	g/dL	31.5-35.7
RDW <sup>(1)</sup>	13.5	13.8    11/03/2020	%	11.6-15.4
Platelets <sup>(1)</sup>	343	348    11/03/2020	x10E3/uL	150-450
Neutrophils <sup>(1)</sup>	72	77    11/03/2020	%	Not Estab.
Lymphs <sup>(1)</sup>	18	19    11/03/2020	%	Not Estab.
Monocytes <sup>(1)</sup>	7	7    11/03/2020	%	Not Estab.
Eos <sup>(1)</sup>	1	1    11/03/2020	%	Not Estab.
Basos <sup>(1)</sup>	1	1    11/03/2020	%	Not Estab.
Immature Cells <sup>(1)</sup>	Positive	Positive    11/03/2020		
Neutrophils (Absolute) <sup>(1)</sup>	6.4	6.5    11/03/2020	x10E3/uL	1.4-7.0
Lymphs (Absolute) <sup>(1)</sup>	1.6	1.3    11/03/2020	x10E3/uL	0.7-3.1
Monocytes (Absolute) <sup>(1)</sup>	0.7	0.8    11/03/2020	x10E3/uL	0.1-0.9
Eos (Absolute) <sup>(1)</sup>	0.1	0.1    11/03/2020	x10E3/uL	0.0-0.4
Baso (Absolute) <sup>(1)</sup>	0.0	0.0    11/03/2020	x10E3/uL	0.0-0.2
Immature Granulocytes <sup>(1)</sup>	0.0	0.0    11/03/2020	%	Not Estab.
Immature Grans (Abs) <sup>(1)</sup>	0.0	0.0    11/03/2020	x10E3/uL	0.0-0.1



#### Urinalysis, Complete w/Micro

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Specific Gravity <sup>(1)</sup>	1.006	1.035    11/03/2020	mg/dL	1.005-1.030
pH <sup>(1)</sup>	6.0	6.2    11/03/2020		5.0-7.5
Urine Color <sup>(1)</sup>	Yellow	Yellow    11/03/2020		Yellow
Appearance <sup>(1)</sup>	Clear	Clear    11/03/2020		Clear
WBC Esterase <sup>(1)</sup>	Negative	Negative    11/03/2020		Negative
Protein <sup>(1)</sup>	Negative	Negative    11/03/2020		Negative/Trace
Glucose <sup>(1)</sup>	Negative	Negative    11/03/2020		Negative
Ketones <sup>(1)</sup>	Negative	Negative    11/03/2020		Negative
Occult Blood <sup>(1)</sup>	Negative	Negative    11/03/2020		Negative
Bilirubin <sup>(1)</sup>	6.0	Negative    11/03/2020		Negative
Urobilinogen <sup>(1)</sup>	Yellow	Yellow    11/03/2020	mg/dL	0.2-1.0
Nitrite, Urine <sup>(1)</sup>	Clear	Clear    11/03/2020		Negative
Full Urinalysis Microscopic Examination <sup>(1)</sup>	Negative	Negative    11/03/2020		
RBC <sup>(1)</sup>	0.1	0.9    11/03/2020	/hpf	0-5
Casts <sup>(1)</sup>	None Seen	None Seen    11/03/2020	/hpf	0-10
Bacteria <sup>(1)</sup>	None Seen	None Seen    11/03/2020		None seen/Few



QR codes on the paper report or embedded in the PDF version, can provide vectors directly into Oncohub.

Oncohub is more focused for quick assimilation. For emphasis, only flagged results are initially shown. Increasingly, it appears that the initial view should be in graphical, rather than in tabular, format, but this is yet to be definitively determined. See [A Guide to Healthcare UI/UX: Best Practices with Examples](#).

At any point, however, the user—whether physician or patient—can choose to see the alternate or complete report view via clearly delineated hyperlinks. It’s entirely up to the user and the standards dictated by their organization and regulatory bodies.

PDF 04/31/2021

Oncology Tools & Calculators

Dr. [First Name Last Name]

Preferred View Results PDF

Patient Name

CLINICAL TEST

Date of Birth

01/02/1992

Gender

Male

McLastname, FirstName N

Address

401 Holly Street NW

Atlanta, GA 30318

Phone

336-436-0515

Date of Birth

06/01/1947

Age

72

Sex

Male

Patient ID

1234

Alternate Patient ID

ALTP2318975

Cancer Type

Colorectal

Test Results & Insights

Calculators & Resources

Antibiograms

Clinical Trials

Horizontal navigation of main sections.

Test Results & Insights

Historical trends for selected test results are shown below based on ordering provider preference and other relevant result criteria. Results are grouped by clinical area, when applicable.

CBC With Differential/Platelets

Test	Current Result and Flag		Previous Result and Date		Units	Reference Interval
▼ <a href="#">WBC</a>	3.0	Low	5.9	11/03/2020	x10E3/uL	3.4–10.8
▼ <a href="#">Hemoglobin</a>	10.0	Low	11.2	11/03/2020	g/dL	13.0–17.7
▼ <a href="#">Platelets</a>	109	Low	154	11/03/2020	x10E3/uL	150–450
▼ <a href="#">Neutrophils (Absolute)</a>	1.3	Low	3.1	11.03.2020	x10E3/uL	1.4–7.0

⚠ Patient has developed pancytopenia since last testing. Results suggest a hypo-proliferative bone marrow. Common causes include medications, infection, vitamin/mineral deficiencies, and other bone marrow disorders.

- **Hemoglobin:** Hemoglobin is decreasing significantly with time. No test results for iron studies are available in the past year. Recent Vitamin B12 level is normal (500 pg/mL, 11/02/2020). Recent serum folate level is normal (5.0 ng/mL, 11/03/2020). If iron stores are replete, patient may qualify for erythropoietic stimulating agents if anemia is symptomatic and hemoglobin falls below 10 g/dL.
- **Platelets:** Platelets are declining significantly with time and are below normal. Patient may be at risk for bleeding. Evaluate for common causes of thrombocytopenia including medications and infection.
- **Differential:** WBC count is low and patient has new onset mild neutropenia. Common causes of neutropenia include infection, medications, and bone marrow disorders. Suggest educating patient on neutropenic precautions.

Comprehensive Metabolic Panel

Test	Current Result and Flag		Previous Result and Date		Units	Reference Interval
▲ <a href="#">Creatinine</a>	1.3	High	1.0	11/03/2020	mg/dL	0.76–1.27
▼ <a href="#">eGFR If NonAfric Am</a>	47	Low	44	11/03/2020	mL/min/1.73	0.76–1.27
▼ <a href="#">eGFR If Afric Am</a>	54	Low	51	11/03/2020	mL/min/1.73	>59
▲ <a href="#">Bilirubin, Total</a>	1.4	High	1.0	11/03/2020	mg/dL	0.0–1.2
▲ <a href="#">AST</a>	32	High	32	11/03/2020	IU/L	0–40
▲ <a href="#">ALT</a>	36	High	36	11/03/2020	IU/L	0–44

Urinalysis, Complete w/Micro

No results of note.

View All Test Results

Only flagged results are initially seen.

For instance, navigation schemes can be horizontal or vertical in nature.

Dr. [First Name Last Name]  
Preferred View Results PDF

Patient Name  
CLINICAL TEST

Date of Birth  
01/02/1992

Gender  
Male

PDF  
04/31/2021

Oncology  
Tools & Calculators

Test Results & Insights

Calculators & Resources

Antibiograms

Clinical Trials

### Patient Details

**McLastname, FirstName N**      **Date of Birth: 06/01/1947**      Patient ID: 1234  
401 Holly Street NW, Atlanta, GA 30318      Age: 72      Alternate Patient ID: ALTP2318975  
Phone: 336-436-0515      Sex: Male      Cancer Type:

### Test Results & Insights

Historical trends for selected test results are shown below based on ordering provider preference and other relevant result criteria. Results are grouped by clinical area, when applicable.

[CBC With Differential/Platelets](#)

Test	Current Result and Flag		Previous Result and Date		Units	Reference Interval
▼ <a href="#">WBC</a>	3.0	Low	5.9	11/03/2020	x10E3/uL	3.4–10.8
▼ <a href="#">Hemoglobin</a>	10.0	Low	11.2	11/03/2020	g/dL	13.0–17.7
▼ <a href="#">Platelets</a>		Low	154	11/03/2020	x10E3/uL	150–450
▼ <a href="#">Neutrophils (Absc</a>			11.03.2020		x10E3/uL	1.4–7.0

⚠ **Patient has developed infection, vitamin deficiency, and myelodysplastic syndrome.** Hypo-proliferative bone marrow. Common causes include medications,

- **Hemoglobin:** Hemoglobin is decreasing significantly with time. No test results for iron studies are available in the past year. Recent Vitamin B12 level is normal (500 pg/mL, 11/02/2020). Recent serum folate level is normal (5.0 ng/mL, 11/03/2020). If iron stores are replete, patient may qualify for erythropoietic stimulating agents if anemia is symptomatic and hemoglobin falls below 10 g/dL.
- **Platelets:** Platelets are declining significantly with time and are below normal. Patient may be at risk for bleeding. Evaluate for common causes of thrombocytopenia including medications and infection.
- **Differential:** WBC count is low and patient has new onset mild neutropenia. Common causes of neutropenia include infection, medications, and bone marrow disorders. Suggest educating patient on neutropenic precautions.

[Comprehensive Metabolic Panel](#)

Test	Current Result and Flag		Previous Result and Date		Units	Reference Interval
▲ <a href="#">Creatinine</a>	1.3	High	1.0	11/03/2020	mg/dL	0.76–1.27
▼ <a href="#">eGFR If NonAfricn Am</a>	47	Low	44	11/03/2020	mL/min/1.73	0.76–1.27
▼ <a href="#">eGFR If Africn Am</a>	54	Low	51	11/03/2020	mL/min/1.73	>59
▲ <a href="#">Bilirubin, Total</a>	1.4	High	1.0	11/03/2020	mg/dL	0.0–1.2
▲ <a href="#">AST</a>	32	High	32	11/03/2020	IU/L	0–40
▲ <a href="#">ALT</a>	36	High	36	11/03/2020	IU/L	0–44

[Urinalysis, Complete w/Micro](#)

No results of note.

[View All Test Results](#)

Vertical navigation of main sections.

Alternatively, the design could allow for multi-select drill-down capability. The user could choose to see any or all test results in their entirety via checkboxes, while retaining the individual drill-down via hyperlinked test names.

labcorp

Dr. [First Name Last Name]

Preferred View

Results

PDF

Patient Name

CLINICAL TEST

Date of Birth

01/02/1992

Gender

Male

PDF

04/31/2021

Oncology

Tools & Calculators

McLastname, FirstName N

Address

401 Holly Street NW

Atlanta, GA 30318

Phone

336-436-0515

Date of Birth

06/01/1947

Age

72

Sex

Male

Patient ID

1234

Alternate Patient ID

ALTP2318975

Cancer Type

Colorectal

Test Results & Insights

Calculators & Resources

Antibiograms

Clinical Trials

Test Results & Insights

Historical trends for selected test results are shown below based on ordering provider preference and other relevant result criteria. Results are grouped by clinical area, when applicable.

CBC With Differential/Platelets

☐

Test

▼

WBC

▼

Hemoglobin

▼

Platelets

▼

Neutrophils (Absolute)

Date	Units	Reference Interval			
3.0	Low	5.9	11/03/2020	x10E3/uL	3.4–10.8
10.0	Low	11.2	11/03/2020	g/dL	13.0–17.7
109	Low	154	11/03/2020	x10E3/uL	150–450
1.3	Low	3.1	11.03.2020	x10E3/uL	1.4–7.0

Patient has developed pancytopenia infection, vitamin/mineral deficiency

marrow. Common causes include medications,

Comprehensive Metabolic Panel

☒

Test

▲

Creatinine

▼

eGFR If NonAfrican Am

▼

eGFR If African Am

▲

Bilirubin, Total

▲

AST

▲

ALT

Current Result and Flag	Previous Result and Date	Units	Reference Interval		
1.3	High	1.0	11/03/2020	mg/dL	0.76–1.27
47	Low	44	11/03/2020	mL/min/1.73	0.76–1.27
54	Low	51	11/03/2020	mL/min/1.73	>59
1.4	High	1.0	11/03/2020	mg/dL	0.0–1.2
32	High	32	11/03/2020	IU/L	0–40
36	High	36	11/03/2020	IU/L	0–44

Urinalysis, Complete w/Micro

☐

No results of note.

View Selected Test Results

View All Test Results

Oncohub AI-enhanced algorithms can recommend not only diagnostic and treatment options, but also other tests that are typically ordered under similar circumstances. Of course, the ideal solution is to inform and also provide a remedy in the form of order capability. Once again, this can take the form of a single- or multiple-selection model:

labcorp

CLINICAL TEST

05/05/2020

Gender: Male

30340

05/05/2020

05/05/2020

McLennane, Freddie M

Date of Birth: 06/01/1947

Patient ID: 1234

401 Holly Street NW, Atlanta, GA 30318

Age: 72

Alternate Patient ID: ALTP2318975

Phone: 338-438-0515

Sex: Male

Cancer Type: Colorectal

Test Results & Insights

CBC With Differential/Platelets

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
WBC	3.0 Low	5.9 11/03/2020	x10E3/uL	3.4-10.8
Hemoglobin	10.0 Low	11.2 11/03/2020	g/dL	13.0-17.7
Platelets	109 Low	154 11/03/2020	x10E3/uL	150-450
Neutrophils (Absolute)	1.3 Low	3.1 11/03/2020	x10E3/uL	1.4-7.0

Comprehensive Metabolic Panel

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Creatinine	1.3 High	1.0 11/03/2020	mg/dL	0.76-1.27
eGFR if NonAfrican Am	47 Low	44 11/03/2020	mL/min/1.73	0.76-1.27
eGFR if African Am	54 Low	51 11/03/2020	mL/min/1.73	>59
Bleedn, Total	1.4 High	1.0 11/03/2020	mg/dL	0.0-1.2
AST	32 High	32 11/03/2020	U/L	0-40
ALT	36 High	36 11/03/2020	U/L	0-44

Urine/uric, Complete w/Urbc

No data.

View All Full Test Results

Recommended Related Tests

Order Test

Iron Profile

Exam feugiat nisi urna, non ultricies. Etiam feugiat nisi urna, non ultricies. Etiam feugiat nisi urna, non ultricies.

Cancel Order

Ferritin

Exam feugiat nisi urna, non ultricies. Etiam feugiat nisi urna, non ultricies. Etiam feugiat nisi urna, non ultricies.

Order Test

Prothrombin Time (PT)

Exam feugiat nisi urna, non ultricies. Etiam feugiat nisi urna, non ultricies. Etiam feugiat nisi urna, non ultricies.

Order All Tests

Calculators & Resources

Body Surface Area (BSA) Calculator

Sex: Male Weight: 155 pounds Height: 5 feet 9 inches

Calculate Clear

Formula	Square Meters	Square Feet	Square Inches
Du Bois	1.85	19.95	2,873
Mosteller	1.85	19.91	2,868
Haycock	1.85	19.94	2,871
Gehan & George	1.86	20.01	2,882
Boyd	1.86	19.98	2,877
Fujimoto	1.79	19.30	2,779
Takahira	1.87	20.00	2,896
Schlich	1.77	19.01	2,738

Antibiograms

ZIP: 30340 Age: 20 Sex: Male Type of infection: Herpes Virus

Show Clear

labcorp

CLINICAL TEST

05/05/2020

Gender: Male

30340

05/05/2020

05/05/2020

McLennane, Freddie M

Date of Birth: 06/01/1947

Patient ID: 1234

401 Holly Street NW, Atlanta, GA 30318

Age: 72

Alternate Patient ID: ALTP2318975

Phone: 338-438-0515

Sex: Male

Cancer Type: Colorectal

Test Results & Insights

CBC With Differential/Platelets

Table View Chart View

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
WBC	3.0 Low	5.9 11/03/2020	x10E3/uL	3.4-10.8
Hemoglobin	10.0 Low	11.2 11/03/2020	g/dL	13.0-17.7
Platelets	109 Low	154 11/03/2020	x10E3/uL	150-450
Neutrophils (Absolute)	1.3 Low	3.1 11/03/2020	x10E3/uL	1.4-7.0

Patient has developed pancytopenia since last testing. Results suggest a hypo-proliferative bone marrow. Common causes include medications, infection, vitamin/mineral deficiencies, and other bone marrow disorders.

- Hemoglobin: hemoglobin is decreasing significantly with time. No test results for iron studies are available in the past year. Recent Vitamin B12 level is normal (302 pg/mL, 11/03/2020). Recent serum folate level is normal (11.1 pg/mL, 11/03/2020). If iron studies are negative, patient may qualify for erythropoietic stimulating agent if anemia is symptomatic and hemoglobin falls below 10 g/dL.
- Platelets: Platelets are declining significantly with time and are below normal. Patient may be at risk for bleeding. Evaluate for common causes of thrombocytopenia including medications and infection.
- Differential: WBC count is low and patient has new onset mild neutropenia. Common causes of neutropenia include infection, medications, and bone marrow disorders. Suggest evaluating patient on neutropenic precautions.

Comprehensive Metabolic Panel

Table View Chart View

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Creatinine	1.3 High	1.0 11/03/2020	mg/dL	0.76-1.27
eGFR if NonAfrican Am	47 Low	44 11/03/2020	mL/min/1.73	0.76-1.27
eGFR if African Am	54 Low	51 11/03/2020	mL/min/1.73	>59
Bleedn, Total	1.4 High	1.0 11/03/2020	mg/dL	0.0-1.2
AST	32 High	32 11/03/2020	U/L	0-40
ALT	36 High	36 11/03/2020	U/L	0-44

Urine/uric, Complete w/Urbc

Table View Chart View

No data.

View Selected Tests View All Tests

Recommended Related Tests

Select All

Iron Profile

Exam feugiat nisi urna, non ultricies. Etiam feugiat nisi urna, non ultricies.

Ferritin

Exam feugiat nisi urna, non ultricies. Etiam feugiat nisi urna, non ultricies.

Prothrombin Time (PT)

Exam feugiat nisi urna, non ultricies. Etiam feugiat nisi urna, non ultricies.

Partial Thromboplastin (PTT)

Exam feugiat nisi urna, non ultricies. Etiam feugiat nisi urna, non ultricies.

Order Selected Tests Order All Tests

Calculators & Resources

Body Surface Area (BSA) Calculator

Sex: Male Weight: 155 pounds Height: 5 feet 9 inches

Calculate Clear

Formula	Square Meters	Square Feet	Square Inches
Du Bois	1.85	19.95	2,873
Mosteller	1.85	19.91	2,868
Haycock	1.85	19.94	2,871
Gehan & George	1.86	20.01	2,882
Boyd	1.86	19.98	2,877
Fujimoto	1.79	19.30	2,779
Takahira	1.87	20.00	2,896
Schlich	1.77	19.01	2,738
Average	1.86	19.48	2,878

Antibiograms

ZIP: 30340 Age: 20 Sex: Male Type of infection: Herpes Virus

Show Clear

## What are some important UX recommendations?

1. **First impressions matter. Make a good one.** Since users make judgements within seconds of seeing a user interface, make smart decisions about typography, color, imagery, layout and other UX concerns that provide a clean, consistent and pleasing experience that instills trust, reinforces the company's credibility, provides clear benefits and contributes to user satisfaction and retention. See [User Interface Design Best Practices for Medical and Healthcare Apps](#).
2. **Oncohub must be accessible to all.** There needs to be a concerted effort to make the interface usable by both abled and disabled users. See [Why Healthcare Has Historically Poor UX/UI \(And How to Fix It\)](#).
3. **A high degree of customizability is essential.** It must be built into the interface to allow users to configure what data they see and in what format, with the ability to switch between any number of views at will. This can include not only data presentation, but also the order, layout and appearance of interface elements themselves on the fly.
4. **There should be separate doctor- and patient-centric views,** such that data types and presentation, vocabulary and tone, associated resources and tools, etc. are all appropriate for the intended audience.
5. **The experience should accommodate all user types.** Related to the previous point, a healthcare product best practice is to consider all user experience levels: first-time, novice, infrequent, power and peripheral. This means designing help and guidance systems appropriate for all. See Best Practice #1 of [3 UX Best Practices for Medical Product Designers](#).
6. **No available information should ever be off-limits.** Links to full reports, optional views, related information and tools, recommendations and suggestions, and additional resources should be readily available and obvious in the UI.
7. **The experience is interactive, not just a passive data display.** Users can take action, not just consume information. Provide the remedy! For example, physicians can order tests; investigate insights, recommendations and suggestions; research trials and insights; and use a wide array of integrated tools. This is a huge value-add for Oncohub, as it will be seen as



a place to advance the workflow while reducing errors and overhead, rather than a deviation from it.








8. **Integrated functionality is key.** Related to the previous point, Oncohub requires integration with as many relevant systems as possible to provide up-to-the-minute information, current tools and capabilities, the most recent trial and treatment options, and the means for accessing the full family of LabCorp, partner and third-party vendor services.
9. **Less is more... for the initial view.** Allow users to drill down as they wish for more detailed or nuanced information, but maintain a lean surface presentation to keep cognitive load minimal. Provide the depth, but ensure that users don't feel like they will drown by taking a step in any direction! Relegate extra patient, lab or other information that's not directly germane to supplementary sections equivalent to the page or document footers in the static document. Resist the temptation to include every feature or data point under the sun. Maintain focus. See #1 of [Best Practices for Medical App Development Go Beyond Standard UX](#).
10. **Continue research to stay user-centric.** Improvement is a perpetual process, so learning about user needs and learning ways to make the experience better over time is a constant endeavor. Keep asking questions and evolving the product. See Best Practice #3 of [3 UX Best Practices for Medical Product Designers](#).





## Who are the key players with whom to network?

As of this writing, *the Oncohub project does not have an attached oncological specialist as a subject matter expert*. This fact has effectively stalled the UX design process, since validation of the clinical workflow, essential fields, preferred tools and related issues has not been forthcoming.

Nevertheless, for the sake of documenting contributors thus far, here participants in the first design phase:

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