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Figure 1: QTool integrated system overview
Figures 2 and 3: Individual case study
These figures presents a single PRO assessment of a 38 year old female patient with cervical cancer treated with chemoradiotherapy followed by brachytherapy 3 and half years ago. She completed the EORTC QLQ-C30 and CX24 as a single online assessment as part of a cross sectional study of patients on long-term follow up. The bar graphs indicate calculated scores for the different items. The red line on the symptom scales indicates a cut of point score above which the score indicates significant symptoms. On the functional scales if the score is below the black line this indicates significant function problems. Significant problems are highlighted in the table in red for individual items or calculated scores. The patient scored highly on a number of symptoms (pain, fatigue, urological and sexual problems) but reported good physical function. Explicit reference was made to each symptom in the medical records. Afterwards the consultant expressed how useful it was to know in advance of the consultation that there were multiple problems to help structure and prioritise her approach to the discussion. In addition, prior review of the results enabled the consultant to probe the patient about problems with abdominal cramping, bowel urgency and incontinence when she did not initially proffer any difficulties with her bowels following initial questioning. The consultant encouraged the patient to take the medication prescribed by the urology team for her urinary symptoms after alleviating anxiety about the side effects of the medication and recommended pelvic floor exercises to improve both her urinary and bowel urgency symptoms. For her hot flashes and mood symptoms a change to her anti-depressant medication was recommended, as previous changes to hormone replacement therapy had not improved symptoms. For her vaginal symptoms and dyspareunia a vaginal oestrogen cream was suggested and for her new onset pelvic pain and post-coital bleeding a pelvic MRI and full blood tests were requested to exclude tumour recurrence. As seen in other studies, there was no explicit reference to her symptoms of fatigue in the consultation records.
Figure 2: Graphical results

Figure 3: Tabular results

OPTIMAL Cervix Questionnaire

<table>
<thead>
<tr>
<th>Scores</th>
<th>06 Mar 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Pain</td>
<td>100</td>
</tr>
<tr>
<td>Fatigue</td>
<td>100</td>
</tr>
<tr>
<td>Bowel Symptoms</td>
<td>80</td>
</tr>
<tr>
<td>Urological Symptoms</td>
<td>83.33</td>
</tr>
<tr>
<td>Sexual Problems</td>
<td>44.44</td>
</tr>
<tr>
<td>Vaginal Symptoms</td>
<td>80</td>
</tr>
<tr>
<td>Physical Functioning</td>
<td>83.33</td>
</tr>
<tr>
<td>Pain</td>
<td>100</td>
</tr>
<tr>
<td>Pain affecting ADLs</td>
<td>100</td>
</tr>
<tr>
<td>Low back pain</td>
<td>100</td>
</tr>
<tr>
<td>Nausea Vomiting</td>
<td>83.33</td>
</tr>
<tr>
<td>Diarrhoea</td>
<td>0</td>
</tr>
<tr>
<td>Constipation</td>
<td>33.33</td>
</tr>
<tr>
<td>Bowel Urgency</td>
<td>33.33</td>
</tr>
<tr>
<td>Faecal Incontinence</td>
<td>33.33</td>
</tr>
<tr>
<td>Abdominal cramps</td>
<td>100</td>
</tr>
<tr>
<td>PRI bleeding</td>
<td>0</td>
</tr>
<tr>
<td>Buttock Pain</td>
<td>33.33</td>
</tr>
<tr>
<td>Appetite Loss</td>
<td>66.67</td>
</tr>
</tbody>
</table>

Weight Worries
- 0 (not at all), 100 (very much)

Urinary Frequency
- 0 (not at all), 100 (very much)

Urinary Urgency
- 0 (not at all), 100 (very much)

Urinary Incontinence
- 0 (not at all), 100 (very much)

Dysuria
- 0 (not at all), 100 (very much)

Bladder Emptying Difficulties
- 0 (not at all), 100 (very much)

Menopausal Symptoms
- 0 (not at all), 100 (very much)

Sexual Worry
- 0 (not at all), 100 (very much)

Sexual Activity
- 0 (not at all), 100 (very much)

Sexual Enjoyment
- 0 (not at all), 100 (very much)

Vaginal dryness
- 0 (not at all), 100 (very much)

Vaginal stenosis
- 0 (not at all), 100 (very much)

Vaginal shortening
- 0 (not at all), 100 (very much)

Dyspareunia
- 0 (not at all), 100 (very much)

Vaginal inflammation
- 0 (not at all), 100 (very much)

Vaginal Discharge
- 0 (not at all), 100 (very much)

PV Bleeding
- 0

Lymphoedema
- 0 (not at all), 100 (very much)

Peripheral Neuropathy
- 0 (not at all), 100 (very much)

Poor Body Image
- 0 (not at all), 100 (very much)

Dyspnoea
- 0 (not at all), 100 (very much)

Role Functioning
- 0 (not at all), 100 (very much)

Social Functioning
- 0 (not at all), 100 (very much)

Emotional Functioning
- 0 (not at all), 100 (very much)

Financial Difficulties
- 0 (not at all), 100 (very much)