Oncology Innovation Showcase #1 – Chart Prep Tools

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COA Innovation Showcase

AGAMON HEALTH

AI-Powered Workflow Automation for Oncology

Michal Meiri
Co-Founder & CEO

The Challenge

Chart Prep is Broken for Everyone

Medical Assistants

- Burnt Out
- Manual, Repetitive Work

Patients

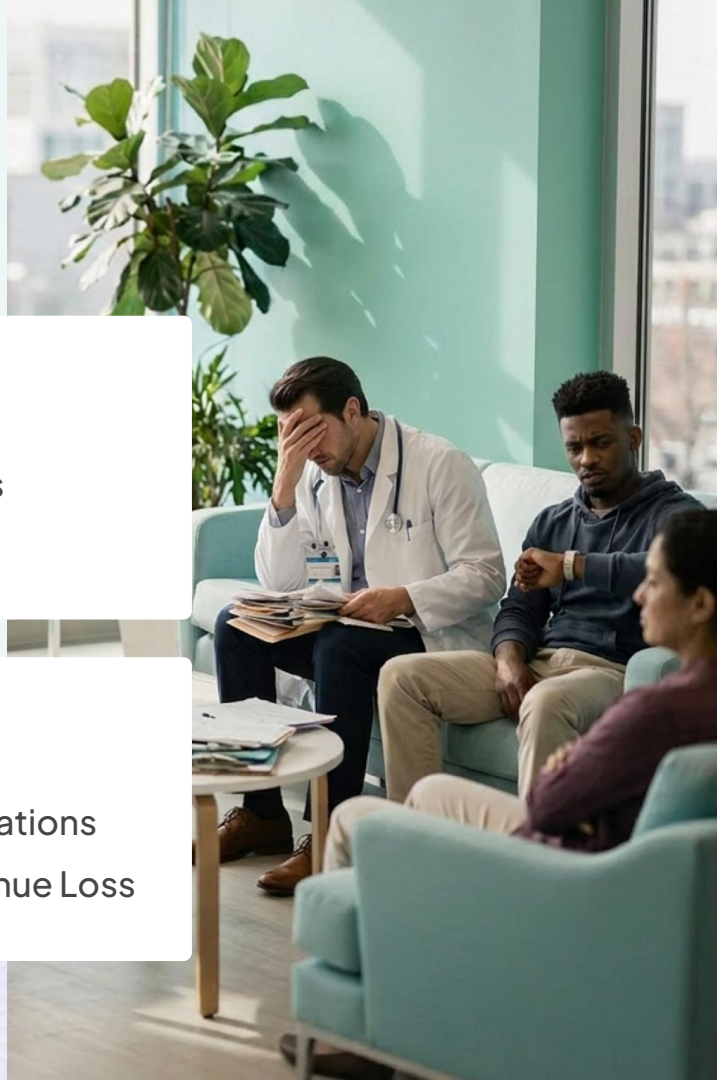
- Delayed Treatments
- Disorganized Visit

Physicians

- Frustrated
- Clinical Interruptions

The Practice

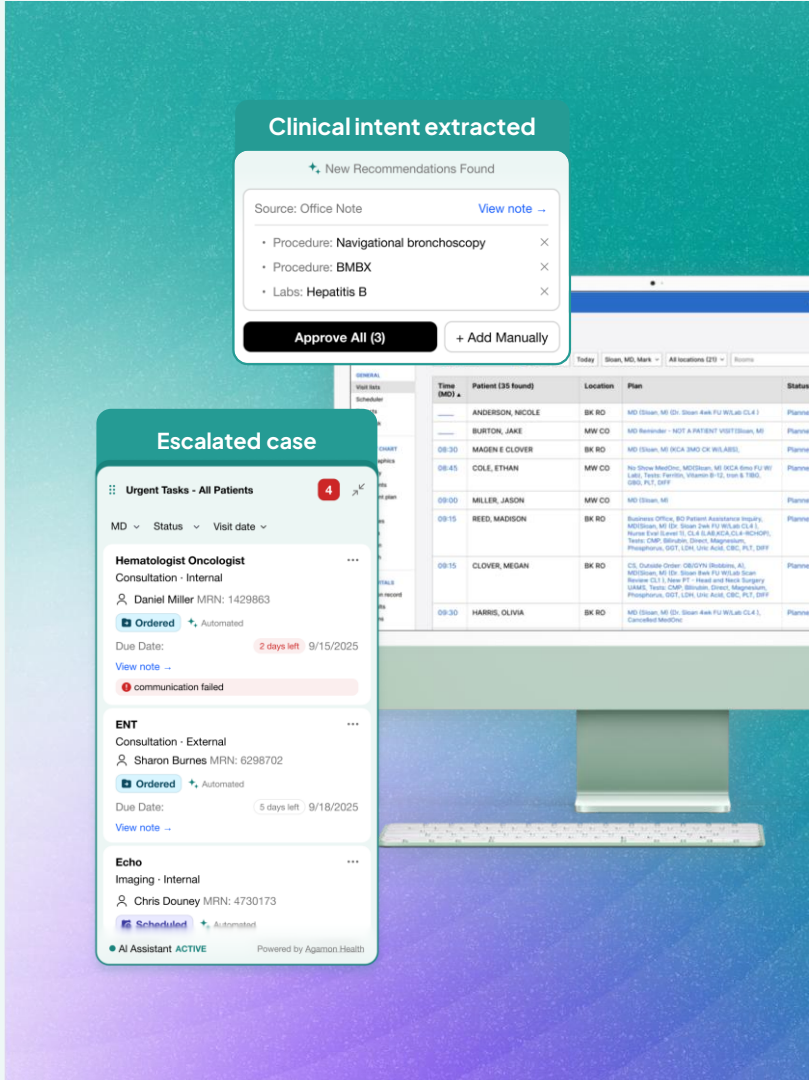
- Last-Minute Cancellations
- Unpredictable Revenue Loss



The Solution

AI Agents Working Continuously Between Visits

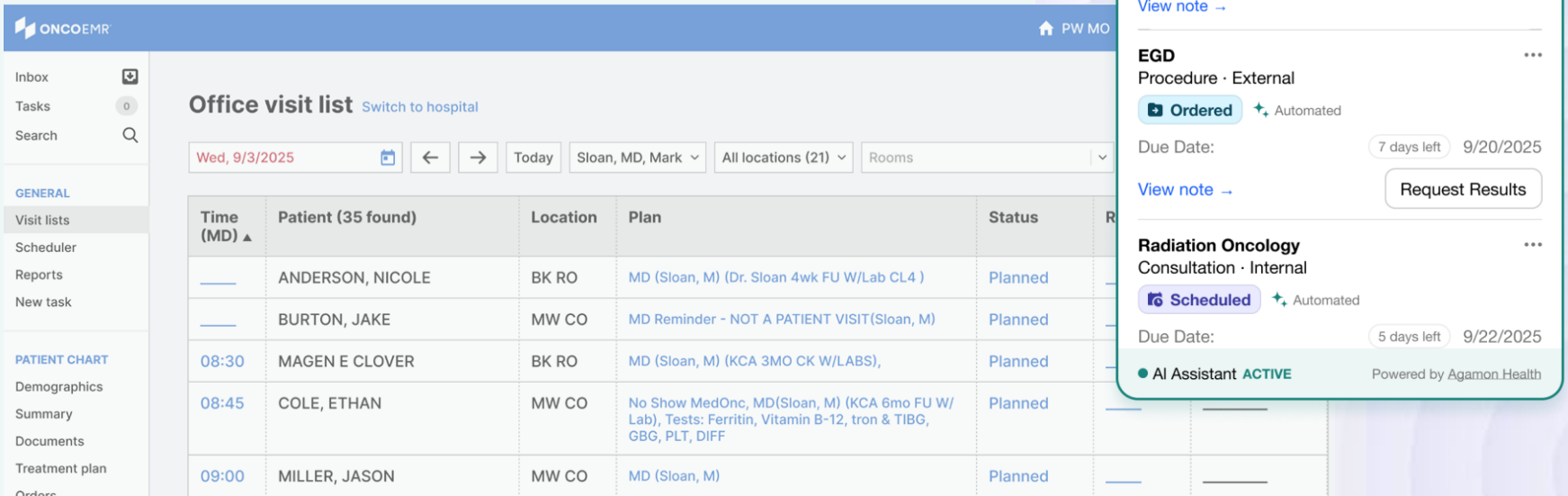
We built Agamon Health to automate chart prep — and ensure every oncology patient is ready for their visit before they walk through the door.



Demo

AI Widget with Seamless Integration

Continuously Running AI Agents That Track, Trigger, Follow-up, Escalate, and Coordinate Care



Product

AI Agents Coordinating Care Continuously Between Visits

Extract

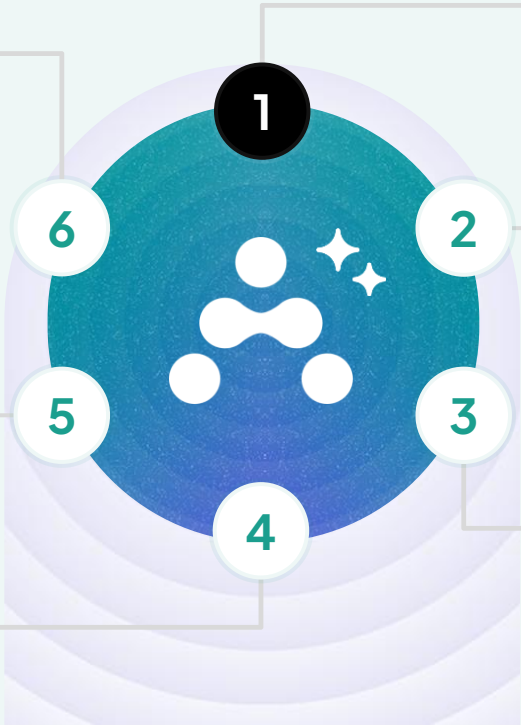
Actionable Care Plans From Unstructured Notes

Collect

Labs, Imaging, Genetics and Outside Records

Verify

Orders Placed and Results Received



Deliver

Prioritized Cases & Oncologist Visit Brief

Match

Documents Closed and Loop Completed

Chase

Missing Items & External Communication

Case Study

Oklahoma Cancer Specialists

Within 3 Months of Go-Live

initial results show:

Reduction in Chart Prep Time	34%
Reduction in Late Cancellations	30%

- Earlier Identification of Missing Authorizations
- Improved Staff Efficiency and Workflow Consistency

Return on Investment

Measurable ROI for Every Practice Size

Small Practice

5 – 10 Providers

- MAs save 1–2 hours per day.
- Fewer cancellations, no added headcount.
- ROI in approximately 3 months.

Large Practice

20 – 100+ Providers

- Standardized workflows across all sites.
- Reduced burnout, higher physician productivity.
- Protects downstream revenue.

Practices see 100% ROI within the first few months!

Implementation

Seamless Integration Into Existing Clinical Platforms

01 Connect	02 Configure	03 Go Live	04 Optimize
OncoEMR, iKnowMed, Epic & other major platforms.	Map workflow, care gaps & site-specific rules.	Start focused, expand gradually based on measurable results.	Continuous improvement from real-world use.

Epic flatiron McKESSON

Typical Deployment: **8 – 12 weeks**

Starting with MAs minimizes clinical resistance and lets value prove itself early.

Agamon Oncology Suite

Start With Chart Prep - Expand Into Every Oncology Workflow

Chart Prep

Follow-Up Management

Referral Coordination

Cohort Identification for High-Value Programs

New Patient Intake

Cancer Registries

Trusted by Leading Oncology Centers and Health Systems

Schedule a demo at the conference.

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HIGHLANDS ONCOLOGY

Covenant HEALTH

NEW YORK CANCER & BLOOD SPECIALISTS
Conquering Cancer Together™

Yale NewHaven Health

OKLAHOMA CANCER SPECIALISTS AND RESEARCH INSTITUTE

Rethinking Chart Prep

Tommy Mullaney
tommy@apollo-oncology.com
Co-Founder, Apollo Oncology
COA 2026

The Whole Practice Relies on Chart Prep

The High Cost of Keeping Up

A full day every week...

Detective

550 pages

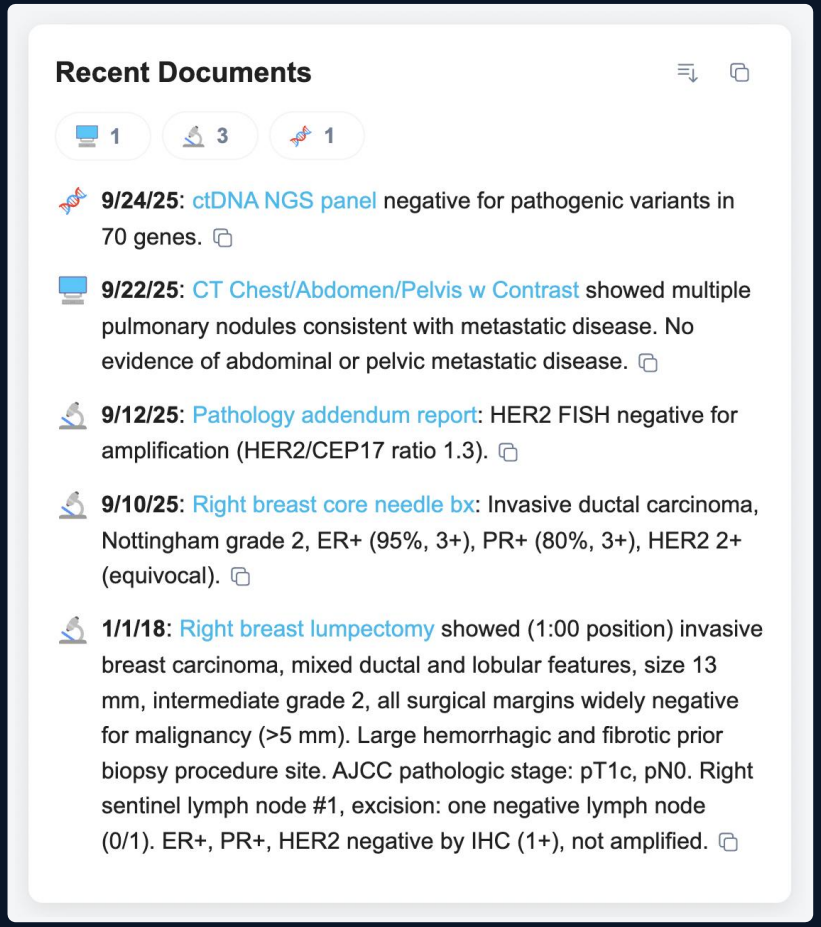
Record Chaser

120 new action items

Data Entry Clerk

2,100 fields to re-enter

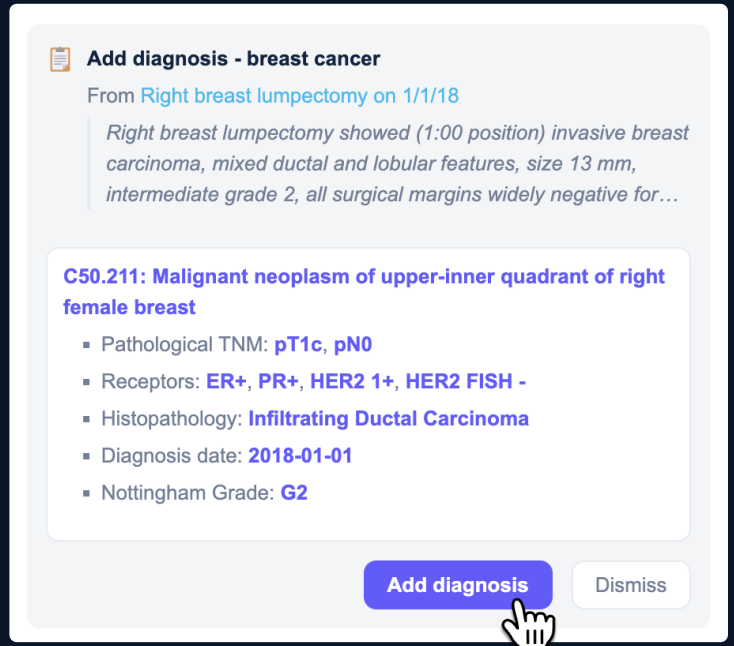
...just to stay one day ahead.



Principle #1

Don't Start from Scratch

Start every workflow with a prepared draft, not a raw pile of documents.



Principle #2

Remove Friction

Clinicians make the decisions.

Software automates the data entry.

NGS testing: mCRPC with no prior NGS testing; potential tissue from prostate biopsy on 1/1/2026

Draft order set | Dismiss

Principle #2

Remove Friction

Add diagnosis - breast cancer

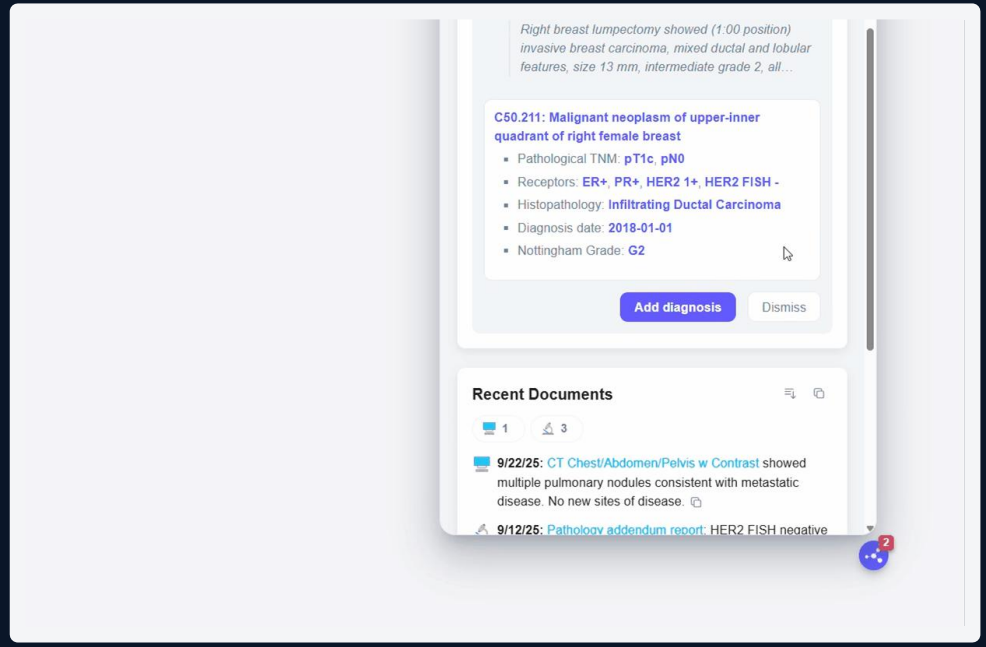
From Right breast lumpectomy on 1/1/18

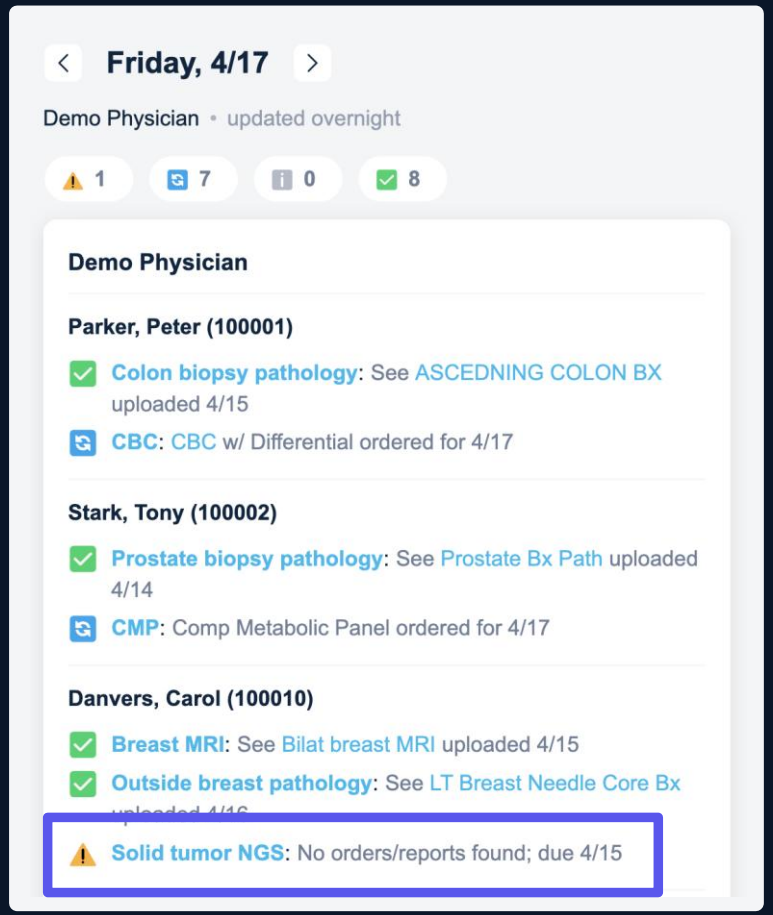
> *Right breast lumpectomy showed (1:00 position) invasive breast carcinoma, mixed ductal and lobular features, size 13 mm, intermediate grade 2, all surgical margins widely negative for…*

C50.211: Malignant neoplasm of upper-inner quadrant of right female breast

- Pathological TNM: **pT1c**, **pN0**
- Receptors: **ER+**, **PR+**, **HER2 1+**, **HER2 FISH -**
- Histopathology: **Infiltrating Ductal Carcinoma**
- Diagnosis date: **2018-01-01**
- Nottingham Grade: **G2**

Add diagnosis | Dismiss





Principle #3

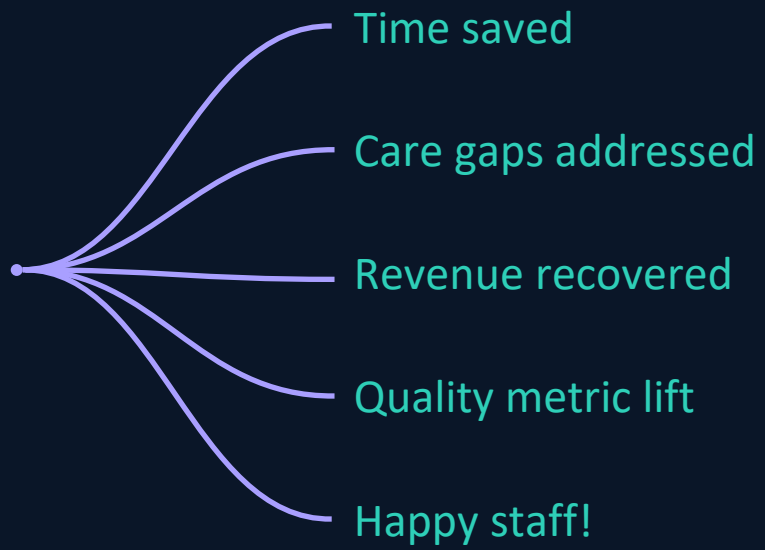
Reactive → Proactive

Automate the routine checks.

Flag gaps early – when there is still time to fix.

Start Small

- One team
- One painful step
- Measure the impact
- Expand



Thank you!

Tommy Mullaney & Devin Solanki
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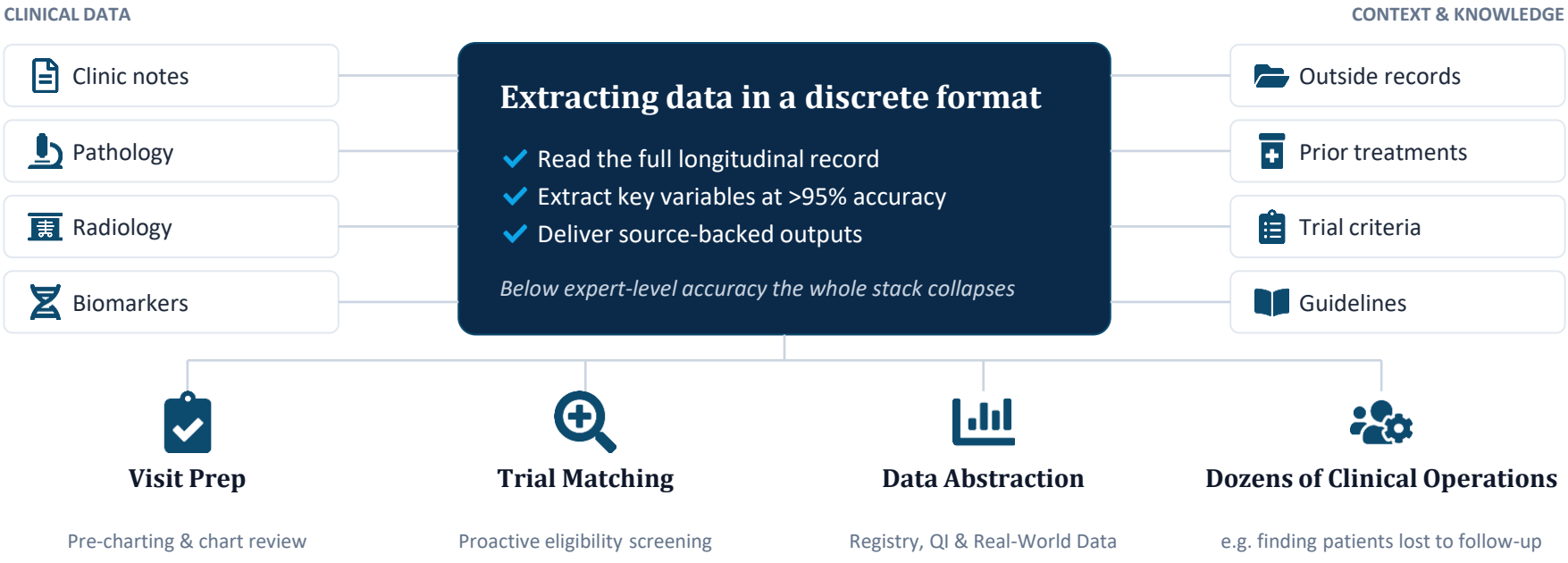
Triomics Oncology Data Platform
Pre-Charting & Visit-Prep

AI visit prep for oncology practices, with trial screening built into the same workflow.

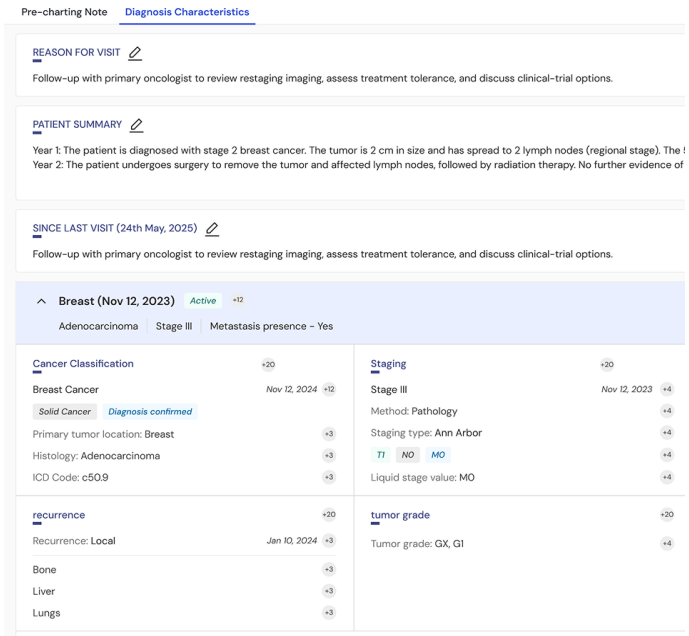
One record. Hundreds of signals. Dozens of workflows.

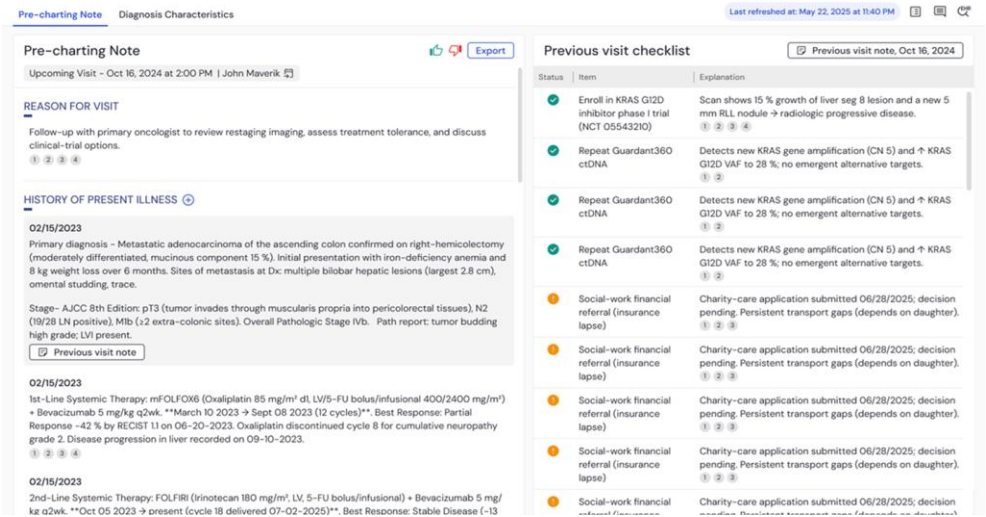
1	100s	8+	1,000s
patient journey	documents across the record	major unstructured doc types	trials & treatment pathways



Clinical Summary & Precharting note with common sections

When you open a patient visit, We show a clinical summary, what changed since the last visit, and structured tables for staging, metastasis, recurrence, and more. We pull from t**he full EHR including scanned faxes** and organize the chart into the sections you already use: HPI, imaging, pathology, and procedures. You can also set instructions globally or by section, so the AI drafts notes the way you want them written – full customization



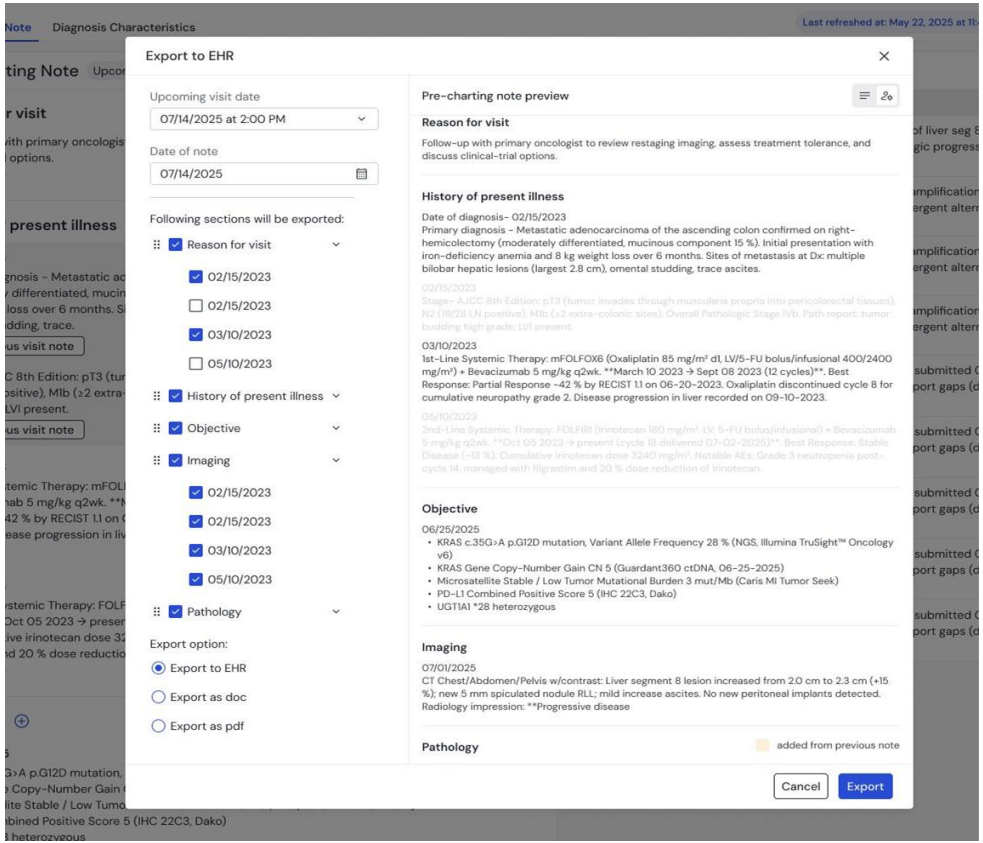


TRIOMICS

When the note is ready, export it.

Pick which sections to include, reorder them if you want, preview exactly what will go in, and push it to the EHR such as **iKM G2 or OncoEMR**.

One click.



TRIOMICS

Case Study

How Physicians at Southern Cancer Center Use Triomics to Save Time

Dr. Brian J. Heller

President, Southern Cancer Center
Medical Oncology & Hematology

> "I walk into every visit already knowing the patient's story, without spending my morning in the chart. Not only is it faster, but it's more accurate and comprehensive. It is a game changer for me."

790	477	60%
VISITS ANALYZED	CHARTS REVIEWED	UTILIZATION

- **Faster prep:** Full cancer journey at a glance: diagnosis, treatments, responses
- **Less cognitive strain:** No more jumping between 20+ notes
- **Better notes:** More accurate and comprehensive documentation

Dr. Eric Roberts

Managing Partner, Southern Cancer Center
General Surgery

> "My pre-charting time is essentially zero now. I used to spend 10 to 20 minutes per patient just getting up to speed. This is the biggest positive change in my documentation workflow in 20 years."

193	150	78%
VISITS ANALYZED	CHARTS REVIEWED	UTILIZATION

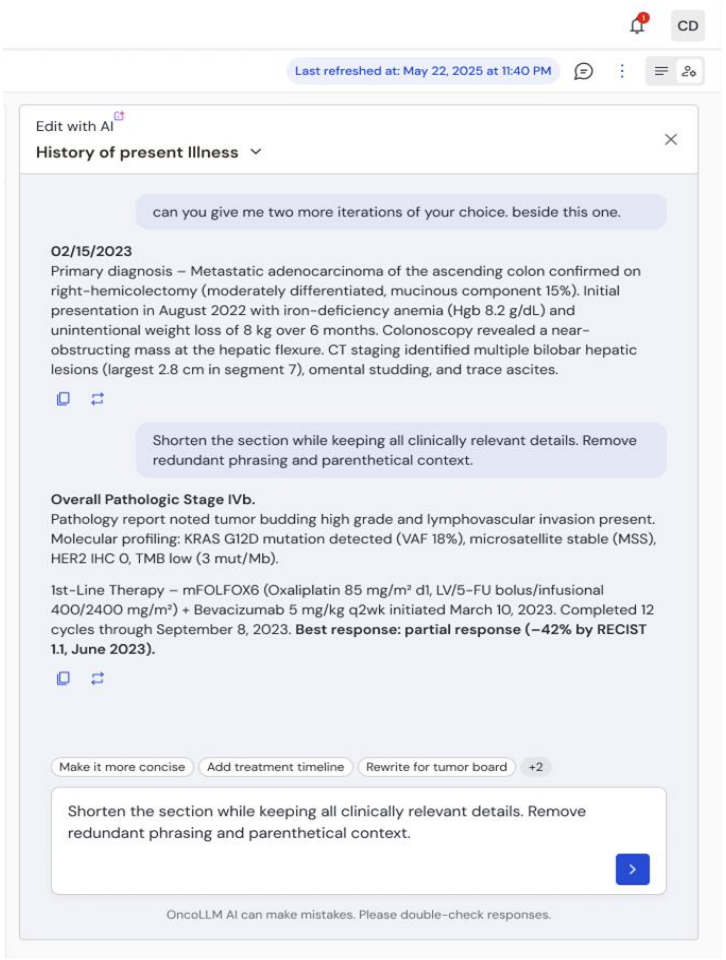
20 hours saved
That's 3 to 4 full workdays over this period

- **Zero prep time:** Patient history ready before the visit
- **Hours back:** Less after-hours work, more time for family

Ask questions in chat

While you are reviewing the pre-charting note, an AI assistant sits right next to it. Select any section and ask it to revise the language, shorten a paragraph, or rewrite it for a specific audience. Or ask it questions about the patient record directly.

You can also calculate scores, run checklists against the patient record for screening.



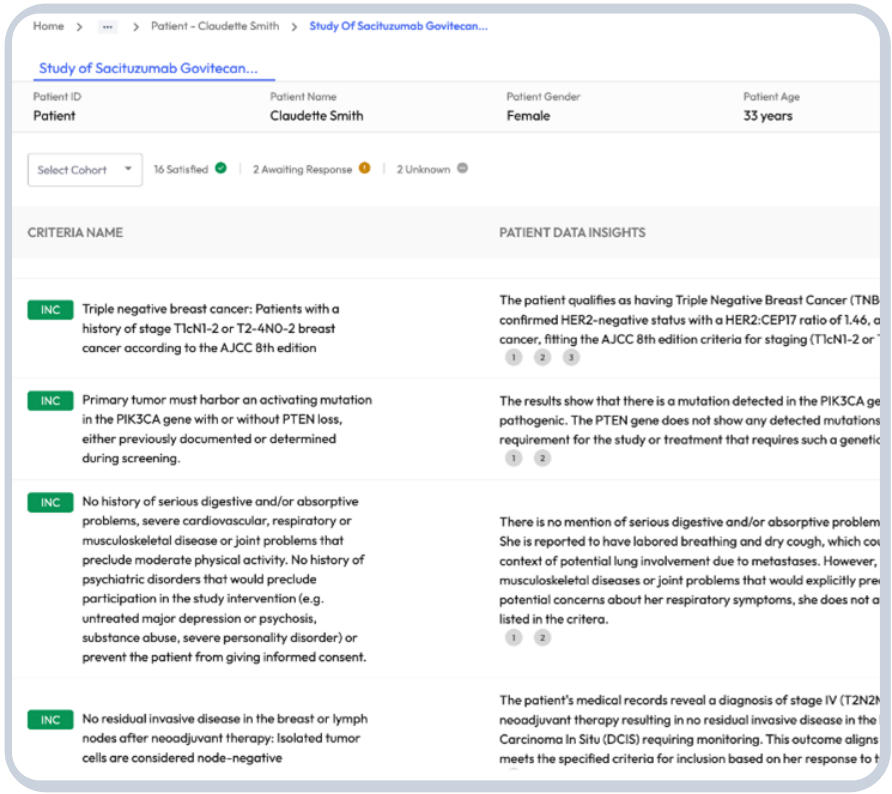
TRIOMICS

Finding Matching Clinical Trials

While reviewing the pre-charting note, you realize the current standard of care may no longer be working and want to know which open trials at your practice could be an option.

For each such patient, you can see likely eligible trials, how well they match to the trial, and what information is still missing or needs to be clarified with the patient.

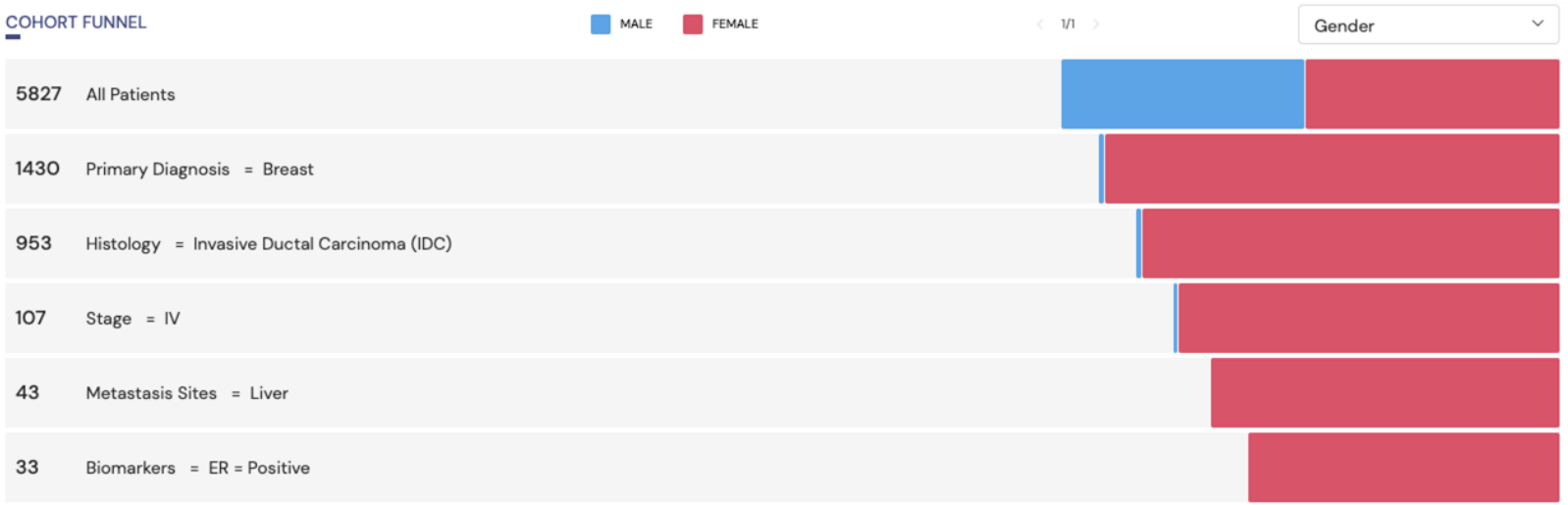
Working with leading cancer centers such as **Yale** and **MSK**, as well as practices like Texas Oncology and **Highlands Oncology.**



Demonstrated Impact (ASCO 2025, Nature Digital Medicine): 33% increase in treatment trial accruals across 100+ trials

Using Extracted Data for Practice-Level Analytics

Querying using Filters



Free-text Query

The Clinical Co-Pilot for Modern Oncology

AI that fits oncology workflow, from chart review to trial screening

Built for oncology workflow

Embedded into visit prep, chart review, and trial screening natively.

Reads the full patient record

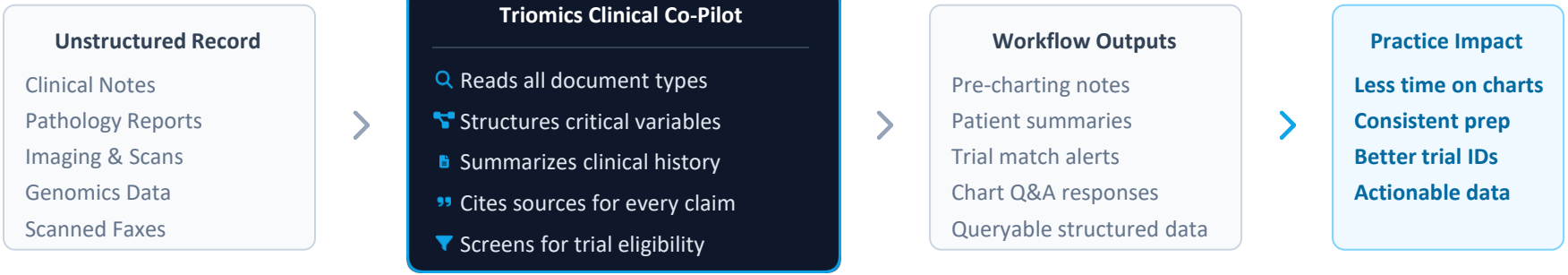
Analyzes notes, labs, imaging, pathology, genomics, and scanned PDFs.

Source-backed & reviewable

Every key statement can be traced securely back to the underlying EHR record.

Works inside existing systems

Designed to fit seamlessly into standard EHRs like iKM G2 and OncoEMR.



TRIOMICS

TRIOMICS

Less time on charts. More time with patients.

sebastien@triomics.com or mark.steiner@triomics.com

Questions?

2026 Community Oncology Conference

Innovation in Practice

Closing: From Innovation to Adoption

- COA Innovation Showcase
- Turning AI Possibility Into Practice Reality

- Agamon I Apollo I Triomics

Why This Matters Now

- Increasing complexity and staff pressures
- Rising patient volumes + workforce shortages
- Administrative burden on clinicians
- Pressure on margins and reimbursement
- AI can unlock efficiency, accuracy, and patient outcomes
- The opportunity is real – but adoption is the challenge

What We Heard Today

- Agamon: Data insights and workflow optimization
- Apollo: Automation and operational efficiency
- Triomics: Clinical intelligence and decision support at scale

- → The ‘art of the possible’ is here

The Real Barrier: Change

- The hard part isn't the Tech
- Cultural resistance is the #1 barrier – slows adoption
- Physician skepticism
- Staff fear of change
- Competing priorities and risk aversion
- 'We've always done it this way' mindset

Driving Leadership & MD Buy-In

- Start with outcomes that matter, the problems they care about: patient care, revenue, burnout
- Use data and pilots to demonstrate ROI
- Identify and engage physician champions early
- Align with strategic priorities

Change Management That Works

- Start small and scale: pilot programs, quick wins
- Communicate clearly and often – include the ‘why’
- Invest in training; support staff continuously
- Measure and share wins

Making the ROI Real

- Quantify time savings and cost reduction for staff and clinicians
- Highlight revenue capture opportunities
- Show impact on patient experience
- Share success stories

Call to Action

- Don’t wait for perfect – start now
- Identify **one use case** to pilot
- Partner with vendors strategically
- Lead the change – your teams will follow
- Build momentum with early wins
- This is about leadership and staying competitive

Thank you

- COA wants your feedback for future sessions, please click on the QR code to answer a few quick questions.