



US00D892151S

(12) **United States Design Patent** (10) **Patent No.:** **US D892,151 S**  
**Pontious** (45) **Date of Patent:** **\*\* \*Aug. 4, 2020**

- (54) **DISPLAY SCREEN OR PORTION THEREOF WITH GRAPHICAL USER INTERFACE** 8,041,714 B2 \* 10/2011 Aymeloglu ..... G06F 16/248  
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463/9
- (71) Applicant: **NANTHEALTH, INC.**, Culver City, CA (US) D675,639 S 2/2013 Anzures et al.  
D676,864 S 2/2013 Velasco et al.  
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- (72) Inventor: **Corey L. Pontious**, Warwick, RI (US) D694,259 S \* 11/2013 Klein ..... D14/486  
D696,681 S \* 12/2013 Kim ..... D14/486
- (73) Assignee: **NANTHEALTH, INC.**, Culver City, CA (US) 8,605,094 B1 \* 12/2013 Alfaro ..... G06T 11/60  
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- (\*) Notice: This patent is subject to a terminal disclaimer. (Continued)

(\*\*) Term: **15 Years**

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- (21) Appl. No.: **29/649,132**
- (22) Filed: **May 25, 2018**
- (51) **LOC (12) Cl.** ..... **14-04**
- (52) **U.S. Cl.**  
USPC ..... **D14/486**
- (58) **Field of Classification Search**  
USPC ..... D14/485-495  
CPC .... G06F 3/048; G06F 3/0481; G06F 3/04817;  
G06F 3/0482; G06F 3/0483; G06F  
3/04842; G06F 3/0485; G06F 3/04855;  
G06F 3/0486; G06F 3/0488; G06F  
3/04886; G06F 9/4443; G06F 17/211;  
G06F 17/212

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(Continued)

*Primary Examiner* — Jack Reickel  
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(57) **CLAIM**

The ornamental design for a display screen or portion thereof with graphical user interface, as shown and described.

**DESCRIPTION**

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FIG. 1 is a front view of a display screen or portion thereof with graphical user interface showing the new design; and, FIG. 2 is a front view of a second embodiment thereof. The broken lines showing the display screen and various features of the graphical user interface are included for the purpose of illustrating environment of the claimed design. The broken lines form no part of the claimed design.

**1 Claim, 2 Drawing Sheets**

REGIMEN NAME	ENDORSED REGIMEN	OMICS GUIDANCE	OMICS JUSTIFICATION	LEVEL OF EVIDENCE	UNSELECTED OUTCOME	ESTIMATED COST
<input type="checkbox"/> Fluorouracil, Leucovorin, and Irinotecan (FLU/LEV)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of TOP2A has been associated with improved response to irinotecan.	A4	Median OS: 23.7 months	\$0,000.00
<input type="checkbox"/> Fluorouracil, Leucovorin, and Irinotecan (FLU/LEV) and Oxaliplatin	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of TOP2A has been associated with improved response to irinotecan.	A4	Median OS: 25.3 months	\$0,000.00
<input type="checkbox"/> Capecitabine	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/A	A4	Median OS: 13.2 months	\$0,000.00
<input type="checkbox"/> Capecitabine and Bevacizumab	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	N/A	B1	Median OS: 15.6 months	\$0,000.00
<input type="checkbox"/> Oxaliplatin	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	BRCA1 del in prostate and ovarian cancer (yes)	N/A	N/A	\$0,000.00
<input type="checkbox"/> Rucaparib	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	BRCA1 del in ovarian cancer (yes)	N/A	N/A	\$0,000.00
<input type="checkbox"/> Capecitabine and Oxaliplatin	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A4	Median OS: 17.2 months	\$0,000.00
<input type="checkbox"/> Capecitabine, Oxaliplatin and Bevacizumab	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A5	Median OS: 24.6 months	\$0,000.00
<input type="checkbox"/> Fluorouracil, Leucovorin, and Irinotecan (FLU/LEV)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A4	Median OS: 19.5 months	\$0,000.00
<input type="checkbox"/> Fluorouracil, Leucovorin, Oxaliplatin (FLO/LEV) and Bevacizumab	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A4	Median OS: 22.3 months	\$0,000.00

(56)

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**Treatment Options**

ALL (10) ENDORSED(8) OMICS-GUIDED (2) CLINICAL TRIALS (7)

Sample Hospital  
Order ID: XXXXX

EDIT

Cancer Type: Colon

Performance Status: 0-Normal Activity (asymptomatic)

BRCA1 Gene: Mutant

Pathology: Adenocarcinoma

0-Normal Activity (asymptomatic)

ERCC1 Protein: High

Stages: Recurrent

Adult/Pediatric: Adult

TOP01 Protein: High

Line of Treatment: First Line

MSI Level: Low

TOP01 Protein: High

God of Treatment: Non-curative

K-ras Gene: Mutant

TOP01 Protein: High

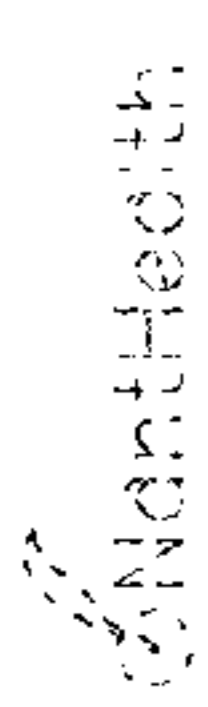
N-ras Gene: Wildtype

Select a treatment, and then select Save to link this treatment to the patient. Modify your search using the fields above.

Support 
  Opposition 
  None

REGIMEN NAME	ENDORSED REGIMEN	OMICS GUIDANCE	OMICS JUSTIFICATION	LEVEL OF EVIDENCE	UNSELECTED (?) OUTCOME	ESTIMATED COST
<input type="checkbox"/> Fluorouracil, Leucovorin, and Irinotecan (FOLFIRI)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of TOP01 has been associated with improved response to Irinotecan.	A4	Median OS: 25.1 months	\$0,000.00
<input type="checkbox"/> Fluorouracil, Leucovorin, and Irinotecan (FOLFIRI) and Bevacizumab	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of TOP01 has been associated with improved response to Irinotecan.	A4	Median OS: 25.8 months	\$0,000.00
<input type="checkbox"/> Capecitabine	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N/A	A4	Median OS: 15.2 months	\$0,000.00
<input type="checkbox"/> Capecitabine and Bevacizumab	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N/A	B1	Median OS: 16.6 months	\$0,000.00
<input type="checkbox"/> Olaparib	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BRCA1 del in prostate and ovarian cancer (view)	N/A	N/A	\$0,000.00
<input type="checkbox"/> Rucaparib	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BRCA1 del in ovarian cancer (view)	N/A	N/A	\$0,000.00
<input type="checkbox"/> Capecitabine and Oxaliplatin	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A5	Median OS: 17.2 months	\$0,000.00
<input type="checkbox"/> Capecitabine, Oxaliplatin and Bevacizumab	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A5	Median OS: 24.6 months	\$0,000.00
<input type="checkbox"/> Fluorouracil, Leucovorin, and Irinotecan (FOLFOX)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A4	Median OS: 19.5 months	\$0,000.00
<input type="checkbox"/> Fluorouracil, Leucovorin, Oxaliplatin (FOLFOX) and Bevacizumab	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A4	Median OS: 21.3 months	\$0,000.00

**FIG. 1**



ORDER ▾



Dr. John Doe | Support

### Sample Hospital

Order ID: XXXXX

**Cancer Type:** Colon

**Pathology:** Adenocarcinoma

**Performance Status:** 0-Normal Activity (asymptomatic)

**BRCA1 Gene:** Mutant

**Goal of Treatment:** Non-curative

**N-ras Gene:** Wildtype

**MSI Level:** Low

**K-ras Gene:** Mutant

Line of Treatment: First Line

Stage: Recurrent

Adult/Pediatric: Adult

TOP2A Protein: High

EDIT

Select a treatment, and then select Save to link this treatment to the patient. Modify your search using the fields above.

Support 
  Opposition 
  None

REGIMEN NAME	ENDORSED REGIMEN	OMICS GUIDANCE	OMICS JUSTIFICATION	LEVEL OF EVIDENCE	UNSELECTED OUTCOME	ESTIMATED COST
<input type="checkbox"/> Fluorouracil, Leucovorin, and Irinotecan (FOLFIRI)			Overexpression of TOP2A has been associated with improved response to Irinotecan.	A4	Median OS: 23.1 months	\$0,000.00
<input type="checkbox"/> Fluorouracil, Leucovorin, and Irinotecan (FOLFIRI) and Bevacizumab			Overexpression of TOP2A has been associated with improved response to Irinotecan.	A4	Median OS: 25.8 months	\$0,000.00
<input type="checkbox"/> Capecitabine			N/A	A4	Median OS: 13.2 months	\$0,000.00
<input type="checkbox"/> Capecitabine and Bevacizumab			N/A	B1	Median OS: 16.6 months	\$0,000.00
<input type="checkbox"/> Oxiparib			BRCA1 del in prostate and ovarian cancer (view)	N/A	N/A	\$0,000.00
<input type="checkbox"/> Rucaparib			BRCA1 del in ovarian cancer (view)	N/A	N/A	\$0,000.00
<input type="checkbox"/> Capecitabine and Oxaliplatin			Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A5	Median OS: 17.2 months	\$0,000.00
<input type="checkbox"/> Capecitabine, Oxaliplatin and Bevacizumab			Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A5	Median OS: 24.6 months	\$0,000.00
<input type="checkbox"/> Fluorouracil, Leucovorin, and Irinotecan (FOLFOX)			Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A4	Median OS: 19.5 months	\$0,000.00
<input type="checkbox"/> Fluorouracil, Leucovorin, Oxaliplatin (FOLFOX) and Bevacizumab			Overexpression of the ERCC1 can cause resistance to platinum-based therapies.	A4	Median OS: 21.3 months	\$0,000.00

**FIG. 2**