

434 A Online Follow-up Platform

435 As illustrated in Figure 3, the cancer pain online follow-up platform allows patients to proactively
 436 report their condition after hospital discharge. Given that our system operates in a non-English
 437 environment, we have translated its pages into English to ensure readability and comprehension.

Pain Assessment

1. Please list the numbers corresponding to the areas where you experience the most pain on the line below (separate the numbers with commas; multiple selections are permitted).

8,23

Left Right Left Right

13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32

Medication Task

Incomplete Completed Expired

Pain management -> Titration 2022-10-26 08:30:00 >

Pain management -> Assessment 2022-10-25 11:10:59 >

Pain management -> Application 2022-10-25 09:45:13 >

PLAN TASK MY PROFILE

24-Hour Pain Assessment

1. Pain medication usage from 8:00 AM yesterday to 8:00 AM today (template provided below)

Medication Time(hour)	Dosage(mg)	
	Oxycodone	Gabapentin
-8:00	10	300
-16:00	10	300
-20:00	10	300
8:00	10	300

Medication Time(hour)	Oxycodone (mg)	Gabapentin (mg)	Other 1

Monthly Health Assessment

We would like to learn more about your health. Please personally answer all the questions below. There are no 'right' or 'wrong' answers; simply check the option that best reflects your situation.

1. Do you have difficulty engaging in strenuous activities, such as carrying heavy shopping bags or suitcases?

☐ None ☐ A Little ☐ Moderate ☐ Severe

2. Do you have difficulty walking long distances?

☐ None ☐ A Little ☐ Moderate ☐ Severe

3. Do you have difficulty walking short distances outdoors?

☐ None ☐ A Little ☐ Moderate ☐ Severe

4. Do you need to stay in bed or sit in a chair during the day?

☐ None ☐ A Little ☐ Moderate ☐ Severe

Biweekly Medication Adherence

1. Have you missed taking your pain medication on time?

☐ YES ☐ NO

2. In the past two weeks, have you missed taking your pain medication?

☐ YES ☐ NO

3. Have you ever increased or decreased your pain medication dosage without informing your doctor or pharmacist?

☐ YES ☐ NO

4. Have you ever forgotten to bring your pain medication when traveling or leaving home?

☐ YES ☐ NO

5. Did you take your pain medication yesterday?

☐ YES ☐ NO

6. Did you take your pain medication yesterday?

☐ YES ☐ NO

Patient Messaging

Send Message

Please enter your message

Pain Management Group

Search Patients

Send Message

TASK PATIENTS MESSAGE MY PROFILE

Figure 3: Functions of the cancer pain online follow-up platform (English translation version)

438 B Delphi Process Design

439 B.1 Process Design

440 In each round of the Delphi survey, experts were asked to rate each item using a five-point Likert
 441 scale (ranging from strongly agree, agree, neutral, disagree, to strongly disagree). Consensus was
 442 defined as: 1) an average score of ≥ 4.0 ; 2) a coefficient of variation <0.15 ; and 3) no dissenting
 443 opinions. Additionally, experts were required to self-assess their authority (Cr) for each round,
 444 determined by the judgement criteria (Ca) and their familiarity with the clinical issues (Cs). The Ca
 445 encompassed four dimensions: work experience, theoretical analysis, understanding from domestic
 446 and international peers, and insights. The Cs included five levels: very familiar, familiar, somewhat
 447 familiar, unfamiliar, and very unfamiliar, quantified as 1.0, 0.8, 0.6, 0.4, and 0.2, respectively. Both
 448 rounds of questionnaires will calculate the experts' coordination coefficient (W) and response rate,
 449 with a response rate of 75% or above considered satisfactory. The questionnaires were distributed to
 450 experts via email. To ensure a high response rate, each Delphi round was open for two weeks, with
 451 email reminders sent at the start and end of each round.

452 The expert response rate was calculated as follows:

$$\text{Expert Coefficient} = \left(\frac{\text{Number of returned questionnaires}}{\text{Number of distributed questionnaires}} \right) \times 100\% \quad (1)$$

453 The coordination ratio Cr was calculated using:

$$Cr = \frac{Ca + Cs}{2} \quad (2)$$

454 The experts' opinion coordination coefficient (W) was represented by Kendall's W , with differences
455 assessed using the Chi-square (χ^2) test. A p -value of less than 0.05 was considered statistically
456 significant.

457 B.2 Expert Invitation

458 A total of 32 experts from nine provinces in China were invited to participate in this study, including
459 16 pharmacists, 4 anesthetists, 4 oncologists, and 8 nurses. All experts are employed at top-tier
460 hospitals in China. Detailed demographic information of the experts is provided in Table 6.

Table 6: Baseline characteristics of the experts

Characteristic	N	%
Gender		
Male	6	18.6
Female	26	81.4
Age		
30-39	10	31.3
40-49	16	50.0
≥ 50	6	18.7
Profession		
Pharmacist	16	50.0
Anaesthetists	4	12.5
Oncologists	4	12.5
Nurse	8	25.0
Professional title		
Director	9	28.1
Associate director	23	71.9
Highest level of education		
Bachelor degree	9	28.1
Master degree	12	37.5
Doctoral degree	11	34.4
Experience in cancer pain management (years)		
5-9	13	40.6
10-19	14	43.8
20-29	3	9.4
≥ 30	2	6.2

461 B.3 First Round Delphi

462 In the first round of the Delphi survey, experts were invited to rate 21 items across 6 themes, as
463 shown in Table 7(Clinical features of the first round). All items were rated as "Agree" or "Strongly
464 Agree," with an average score of ≥ 4.0 . In this round, consensus was reached for 17 items (80.9%)
465 submitted to the expert panel. Specifically, 5 items from Theme A, 5 items from Theme B, 4 items
466 from Theme C, and all items from Themes D, E, and F achieved consensus. Items A3 (Smoking
467 history, alcohol consumption history, allergic history), B6-1 (Worsening factors, including activities,

468 weather, and mental factors), B6-2 (Alleviating factors, including rest, suitable environment, and
469 taking analgesics), and C2 (Duration of analgesics use) did not meet the inclusion criteria for the
470 coefficient of variation and will thus proceed to the second round.

471 Additionally, three supplementary items submitted by the experts will be included in the second round:
472 O1 (Monitoring and management of analgesic-related adverse reactions), O2 (Patient lifestyle), and
473 O3 (Drug accessibility).

474 **B.4 Second Round Delphi**

475 Based on the results of the first round of evaluations, the new questionnaire includes 7 items. In this
476 round, consensus was achieved for 3 items (42.8%) submitted to the expert panel. Items A3, C2, and
477 the newly introduced item O1 were included, while the other items were excluded. The results of the
478 second round are shown in Table 7(Clinical features of the second round).

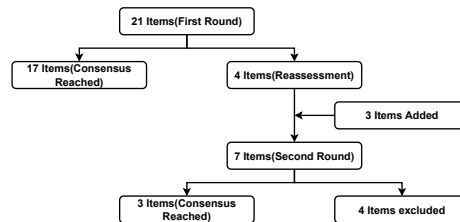


Figure 4: Overview of the Delphi rounds

Table 7: Clinical features of the first and second round

Clinical features of the first round				
NO	Clinical Features	Average score	Coefficient of variation (%)	Reach a consensus
Theme A: Patient Basic Information				
A1	Patient general information and clinical diagnosis	4.50	13.83	YES
A2	Laboratory examination (including complete blood count, liver function, kidney function)	4.25	13.36	YES
A3	Smoking history, alcohol consumption history, allergic history	4.34	19.05	NO
A4	Tumor-related treatment	4.65	12.95	YES
A5	Performance status	4.09	11.37	YES
A6	Analgesic risk assessment	4.71	14.48	YES
Theme B: Comprehensive pain assessment				
B1	Pain type	4.62	11.97	YES
B2	Pain intensity, assessed by quantitative tools	4.78	10.27	YES
B3	Pain frequency	4.56	11.05	YES
B4	Breakthrough pain assessment	4.59	14.48	YES
B5	Impact of pain on daily life	4.43	13.95	YES
B6	Pain worsening or alleviating factors			
B6-1	Worsening factors, including activities, weather, and mental factors	4.37	17.17	NO
B6-2	Alleviating factors, including rest, suitable environment, and taking analgesics	4.15	20.37	NO
Theme C: Previous analgesic treatment				
C1	Types of analgesics	4.81	8.24	YES
C2	Duration of analgesics use	4.31	19.03	NO
C3	Opioid tolerance	4.59	13.38	YES
C4	Medication adherence	4.46	13.90	YES
C5	Analgesic efficacy assessment	4.28	14.81	YES
Theme D: Evaluation of previous analgesic treatment				
D1	Including analysis of existing/potential Drug-Related Problems (DRPs), their causes, interventions, and outcomes in previous medication	4.62	14.27	YES
Theme E: Cancer Pain Medication Decision				
E1	Cancer pain medication decision based on comprehensive pain assessment	4.84	7.62	YES
Theme F: Follow-up				
F1	Pain relief assessment	4.71	11.08	YES
Clinical features of the second round				
NO	Clinical Features	Average score	Coefficient of variation (%)	Reach a consensus
Theme A3				
	Smoking history, alcohol consumption history, allergic history	4.15	12.39	YES
Theme B6-1				
	Worsening factors, including activities, weather, and mental factors	4.21	16.74	NO
Theme B6-2				
	Alleviating factors, including rest, suitable environment, and taking analgesics	4.25	17.93	NO
Theme C2				
	Duration of analgesics use	4.68	13.75	YES
Other O1				
	Monitoring and management of analgesic-related adverse reactions	4.84	9.25	YES
Other O2				
	Drug accessibility	4.12	22.83	NO
Other O3				
	Lifestyle of patients	4.25	19.82	NO

The response rate for both rounds was 100% (32/32). In both rounds of the Delphi survey, the mean familiarity score (Cs), the mean judgment criteria score (Ca), and the mean authority coefficient (Cr) of the experts were all greater than 0.70 (Tables 8 and 9). The coordination coefficient (W) of the experts' opinions was 0.195 in the first round and 0.250 in the second round. The χ^2 test indicated that the coordination of expert opinions was significant ($p < 0.05$), suggesting that the experts' opinions were well-coordinated and the results are reliable (Table 10).

Table 8: Expert authority coefficient (Cr) in the first round

Themes	Cs	Ca	Cr
Patient Basic Information	0.79	0.86	0.82
Comprehensive Pain Assessment	0.87	0.87	0.87
Previous Analgesic Treatment	0.83	0.80	0.81
Evaluation of Previous Analgesic Treatment	0.76	0.83	0.79
Cancer Pain Medication Decision	0.76	0.85	0.80
Follow-up	0.88	0.93	0.90

Table 9: Expert authority coefficient (Cr) in the second round

Themes	Cs	Ca	Cr
Patient Basic Information	0.83	0.88	0.85
Comprehensive pain assessment	0.87	0.86	0.86
Previous analgesic treatment	0.81	0.78	0.79
Monitoring and management of analgesic-related adverse reactions	0.87	0.90	0.88
Drug accessibility	0.77	0.82	0.79
Lifestyle of patients	0.91	0.80	0.85

Table 10: Coefficient of concordance (W) of experts in each round

Delphi round	Items	W	χ^2	P
Round 1	21	0.195	126.779	<0.001
Round 2	7	0.250	54.163	0.006

As shown in Figure 4, consensus was reached on 20 feature items over two rounds of the Delphi process. From these 20 items, a total of 103 sub-items were included as features, covering six areas: basic patient information, comprehensive pain assessment, previous analgesic treatment and evaluation, cancer pain medication decision-making, monitoring and management of adverse reactions, and pain relief assessment.

B.5 Feature Description

Patients in the PEACE dataset have the following features (for data type, B: Binary, N: Numeric, M: Multiclass, *: Label):

Patient Basic Information(50)

1. Demographics

- **ID (N)**: A unique random identification number assigned to each patient.
- **Gender (B)**: The gender of the patient.
- **Age (N)**: The age of the patient.
- **Height (N)**: The height of the patient.
- **Weight (N)**: The weight of the patient.
- **BMI (N)**: A common indicator for assessing body fat, calculated using weight and height.

- **Body Surface Area (BSA) (N):** The total surface area of the human body.
- **Medical Record Date (N):** The date on which the doctor makes a decision regarding cancer pain medication treatment based on a comprehensive pain assessment.
- **Length of Hospital Stay (N):** The duration of the patient's stay during the current hospital visit, measured in days.
- **Number of Hospital Admissions (N):** The total number of times the patient has been hospitalized due to tumour diseases.
- **Diagnosis (M):** The diagnosis provided by the doctor at the time of discharge, only including tumour-related diseases.
- **Smoking History (B):** Whether the patient has a history of smoking continuously for 6 months or more.
- **Drinking History (B):** Whether the patient has a history of drinking alcohol at least once a week for 6 months or more.
- **Allergy History (B):** Whether the patient has experienced allergic reactions.
- **Tumour Treatment Methods (M):** The methods of tumour treatment, including surgery, chemotherapy, radiotherapy, targeted therapy, and immunotherapy.
- **Gastrointestinal Risk (B):** The likelihood of the patient developing gastrointestinal diseases (such as gastric ulcers, gastritis, enteritis) or related adverse reactions (such as gastrointestinal bleeding, indigestion) after taking pain medication.
- **Cardiovascular Risk (B):** The likelihood of the patient developing cardiovascular diseases (such as hypertension, coronary heart disease, myocardial infarction) or related adverse reactions (such as arrhythmia, heart failure) after taking pain medication.
- **PS Score (N):** The performance status score.

2. Laboratory Examination Variables

(a) Complete Blood Count:

- **White Blood Cell Count (N):** The number of white blood cells in a unit volume of blood.
- **Red Blood Cell Count (N):** The number of red blood cells in a unit volume of blood.
- **Hemoglobin (N):** The amount of hemoglobin in a unit volume of blood.
- **Platelet Count (N):** The number of platelets in a unit volume of blood.
- **Hematocrit (N):** The volume percentage of red blood cells in blood.
- **Neutrophil Count (N):** The number of neutrophils in a unit volume of blood.
- **Lymphocyte Count (N):** The number of lymphocytes in a unit volume of blood.
- **Eosinophil Count (N):** The number of eosinophils in a unit volume of blood.
- **Basophil Count (N):** The number of basophils in a unit volume of blood.
- **Monocyte Percentage (N):** The proportion of monocytes in the total white blood cell count.
- **Neutrophil Percentage (N):** The proportion of neutrophils in the total white blood cell count.
- **Lymphocyte Percentage (N):** The proportion of lymphocytes in the total white blood cell count.
- **Basophil Percentage (N):** The proportion of basophils in the total white blood cell count.
- **Eosinophil Percentage (N):** The proportion of eosinophils in the total white blood cell count.
- **Mean Corpuscular Volume (N):** The average volume of a single red blood cell.
- **Mean Corpuscular Hemoglobin (N):** The average amount of hemoglobin in a single red blood cell.
- **Mean Corpuscular Hemoglobin Concentration (N):** The average concentration of hemoglobin in a single red blood cell.

- **Red Cell Distribution Width (N):** The variation in the size of red blood cells.
 - **Plateletcrit (N):** The volume percentage of platelets in blood.
 - **Mean Platelet Volume (N):** The average volume of a single platelet.
- (b) **Liver Function:**
- **Total Protein (N):** The total amount of proteins in a unit volume of blood.
 - **Albumin (N):** The amount of albumin in a unit volume of blood.
 - **Globulin (N):** The amount of globulin in a unit volume of blood.
 - **Albumin/Globulin Ratio (N):** The ratio of albumin to globulin in blood.
 - **Total Bilirubin (N):** The total amount of bilirubin in a unit volume of blood.
 - **Direct Bilirubin (N):** The amount of direct (conjugated) bilirubin in a unit volume of blood.
 - **Total Bile Acids (N):** The total amount of bile acids in a unit volume of blood.
 - **Alanine Aminotransferase (N):** The amount of alanine aminotransferase (ALT) in a unit volume of blood.
 - **Aspartate Aminotransferase (N):** The amount of aspartate aminotransferase (AST) in a unit volume of blood.
- (c) **Kidney Function:**
- **Urea (N):** The amount of urea in a unit volume of blood, reflecting kidney excretory function.
 - **Creatinine (N):** The amount of creatinine in a unit volume of blood, reflecting kidney filtration function.
 - **Uric Acid (N):** The amount of uric acid in a unit volume of blood, reflecting kidney excretory function and purine metabolism status.

Comprehensive Pain Assessment (15):

- **Pain Type (M):** Classification of pain based on the pathological mechanism.
- **Worst Pain (N):** The highest level of pain experienced in the last 24 hours, assessed using the Numerical Rating Scale (NRS).
- **Mildest Pain (N):** The lowest level of pain experienced in the last 24 hours, assessed using NRS.
- **Average Pain (N):** The average level of pain experienced in the last 24 hours, assessed using NRS.
- **Current Pain (N):** The current level of pain, assessed using NRS.
- **Impact of Pain on Daily Life (N):** The degree to which daily life was affected by pain in the past week.
- **Impact of Pain on Mood (N):** The degree to which mood was affected by pain in the past week.
- **Impact of Pain on Walking Ability (N):** The degree to which walking ability was affected by pain in the past week.
- **Impact of Pain on Daily Work (N):** The degree to which daily work was affected by pain in the past week.
- **Impact of Pain on Relationships with Others (N):** The degree to which relationships with others were affected by pain in the past week.
- **Impact of Pain on Sleep (N):** The degree to which sleep was affected by pain in the past week.
- **Impact of Pain on Interest in Life (N):** The degree to which interest in life was affected by pain in the past week.
- **Pain Frequency (M):** The number of times pain occurred in a day for cancer pain patients.

- **Type of Breakthrough Pain (M):** Classification of breakthrough pain according to the National Comprehensive Cancer Network (NCCN).
- **Frequency of Breakthrough Pain (M):** The number of times breakthrough pain occurred in a day for cancer pain patients.

Previous Analgesic Treatment(23):

- **Prev_Extended Release Strong Opiates (ERSO) (N):** The number of types of extended-release strong opiates used by the patient in the past week.
- **Prev_Immediate Release Strong Opiates (IRSO) (N):** The number of types of immediate-release strong opiates used by the patient in the past week.
- **Prev_Extended Release Weak Opiates (ERWO) (N):** The number of types of extended-release weak opiates used by the patient in the past week.
- **Prev_Immediate Release Weak Opiates (IRWO) (N):** The number of types of immediate-release weak opiates used by the patient in the past week.
- **Prev_Nonsteroidal Anti-inflammatory Drugs (NSAID) (N):** The number of types of nonsteroidal anti-inflammatory drugs used by the patient in the past week.
- **Prev_Anticonvulsants/Antidepressants (A/A) (N):** The number of types of anticonvulsants/antidepressants used by the patient in the past week.
- **Prev_Others (N):** The number of other analgesics used by the patient in the past week, excluding ERSO, IRSO, ERWO, IRWO, NSAIDs, and A/A.
- **Opiate Tolerance (B):** Whether the patient has developed a decreased effect or reduced duration of action when using opiates for pain treatment.
- **Days of Medication Use (N):** The number of days the patient used opiates (calculated based on the highest level of opiates used if multiple types were used simultaneously).
- The following 9 items are from the Morisky Medication Adherence Scale (MMAS-8), including 8 questions and a total score:
 - **M1 (N):** Do you sometimes forget to take your medications?
 - **M2 (N):** People sometimes miss taking their medications for reasons other than forgetting. Thinking over the past two weeks, were there any days when you did not take your medications?
 - **M3 (N):** Have you ever cut back or stopped taking your medications without telling your doctor because you felt worse when you took them?
 - **M4 (N):** When you travel or leave home, do you sometimes forget to bring along your medications?
 - **M5 (N):** Did you take all your medications yesterday?
 - **M6 (N):** When you feel like your symptoms are under control, do you sometimes stop taking your medications?
 - **M7 (N):** Taking medication every day is a real inconvenience for some people. Do you ever feel hassled about sticking to your treatment plan?
 - **M8 (N):** Do you have difficulty remembering to take all your medications?
 - **MMAS-8 Total Score (N):** The total score ranges from M1 to M8, with higher scores indicating better adherence to medication.
- **Duration of Analgesic Control (N):** The duration of pain control after taking analgesics.
- **Constipation (B):** Whether the patient experienced constipation as an adverse reaction after taking analgesics.
- **Nausea/Vomiting (B):** Whether the patient experienced nausea or vomiting as an adverse reaction after taking analgesics.

- **Other Adverse Reactions (B):** Whether the patient experienced other adverse reactions besides constipation and nausea/vomiting after taking analgesics.
- **Medication for Adverse Reactions (B):** Whether the patient used medications to manage adverse reactions.

650 **Evaluation of Previous Analgesic Treatment(5):**

1. The following 5 features are classified according to the Pharmaceutical Care Network Europe (PCNE) V8.0 classification of drug-related problems (DRPs):
 - **Drug-Related Problems (DRPs) (M):** Any undesirable outcome or potential issue arising during the patient's drug therapy. This includes aspects of treatment effectiveness and safety.
 - **Causes (M):** The underlying causes or factors leading to drug therapy problems.
 - **Interventions (M):** Specific actions or measures taken to address drug therapy problems. These interventions can be implemented by pharmacists, doctors, or other healthcare professionals.
 - **Acceptance of Interventions (M):** The patient's acceptance of the intervention plans proposed by healthcare professionals.
 - **Status of DRPs (M):** The resolution status of DRPs after healthcare professionals' intervention.

664 **Cancer Pain Medication Decision(9):**

- **ERSO_Recommended (N*):** The number of extended-release strong opiates recommended by the doctor.
- **IRSO_Recommended (N*):** The number of immediate-release strong opiates recommended by the doctor.
- **ERWO_Recommended (N*):** The number of extended-release weak opiates recommended by the doctor.
- **IRWO_Recommended (N*):** The number of immediate-release weak opiates recommended by the doctor.
- **NSAIDs_Recommended (N*):** The number of nonsteroidal anti-inflammatory drugs recommended by the doctor.
- **A/A_Recommended (N*):** The number of anticonvulsants/antidepressants recommended by the doctor.
- **Others (N*):** The number of other analgesics recommended by the doctor, excluding ERSO, IRSO, ERWO, IRWO, NSAIDs, and A/A.
- **Constipation Medication Recommended (M):** The types of medication recommended by the doctor for managing constipation.
- **Nausea/Vomiting Medication Recommended (M):** The types of medication recommended by the doctor for managing nausea and vomiting.

683 **Follow-up(1):**

- **Pain Relief Status (M*):** The degree of pain relief experienced by the patient after using the analgesic regimen recommended by the doctor.

686 **C Demographics**

687 This section examines the age distribution within the PEACE dataset. We analyze the population
 688 breakdown across different age groups, as detailed in Table 11. The table categorizes the number of
 689 individuals in each age group by gender.

Table 11: Population Distribution

Age Group	Number	Male	Female
18-29	2,681	1,931	750
30-44	7,675	5,045	2,630
45-59	14,737	7,663	7,074
60-74	11,054	4,316	6,738
≥ 75	2,619	969	1,650
Total	38,766	18,842	19,924

D Training Details

D.1 Baseline Models

The source code of the models used in our experiments is available at <https://github.com/YTYTYD/PEACE/tree/main/Code>.

Basic machine learning and neural network models:

1. Decision Trees[22]: A machine learning algorithm that predicts outcomes by recursively splitting data into subsets based on feature values, forming a tree structure of decisions.
2. Logistic Regression[5]: A machine learning algorithm used for both classification and regression tasks that models the probability of outcomes using a logistic function.
3. Random Forests[14]: A machine learning algorithm that employs an ensemble of decision trees to improve prediction accuracy and control overfitting by aggregating the predictions of multiple trees.
4. Support Vector Machines (SVM)[4]: A machine learning algorithm for classification and regression that identifies the optimal hyperplane to separate different classes in a high-dimensional space.
5. Multilayer Perceptrons (MLP)[23]: A neural network algorithm composed of multiple layers of neurons, capable of performing various tasks including classification and regression.

Gradient boosting decision tree models:

1. LightGBM[12]: is an advanced machine learning algorithm that implements gradient boosting on decision trees using a leaf-wise growth strategy, offering superior performance and computational efficiency for large-scale and high-dimensional datasets.
2. XGBoost[3]: is a highly optimised and scalable machine learning algorithm that applies gradient boosting techniques with features like regularisation, parallel processing, and tree pruning, achieving exceptional performance and accuracy in various predictive modelling tasks.
3. AdaBoost[6]: is a machine learning algorithm that enhances classification and regression accuracy by iteratively combining multiple weak classifiers into a strong classifier, focusing on misclassified instances to improve overall model performance.

Advanced neural network models:

1. iTransformer[15]: is a neural network algorithm specifically designed for time series forecasting. It inverts the traditional transformer architecture to better capture temporal dependencies and sequence patterns in time series data. By reversing the order of attention mechanisms, iTransformer focuses on leveraging past data more effectively to predict future values. The algorithm employs a novel architecture that integrates both local and global temporal information, leading to significant improvements in forecasting accuracy.

- 725 2. Transtab[29]: is a neural network algorithm based on transformer architecture, designed
 726 to handle tabular data with varying structures by converting each row into a generalisable
 727 embedding vector and using stacked transformers for feature encoding. It combines column
 728 descriptions and table cells as input to a gated transformer model and leverages supervised
 729 and self-supervised pretraining to enhance performance. Transtab excels in learning from
 730 multiple tables with partially overlapping columns and updating models incrementally,
 731 achieving top rankings in supervised, incremental, and transfer learning tasks across diverse
 732 datasets.
- 733 3. Mamba[8]: is a neural network algorithm that addresses the inefficiencies of transformer
 734 models in sequence modeling. By using selective state space models (SSMs) where param-
 735 eters depend on the input, Mamba can selectively retain or discard information, achieving
 736 linear scaling in sequence length without attention or MLP blocks. This design enables
 737 faster inference and high throughput, demonstrating state-of-the-art performance across
 738 various domains, including language, audio, and genomics, and outperforming similarly
 739 sized transformers.

740 EHR-specific models:

- 741 1. Stagenet[7]: is a neural network model designed for health risk prediction, leveraging the
 742 identification of different stages in a patient’s disease progression to improve prediction
 743 accuracy. The model consists of two key modules: the stage-aware LSTM module, which
 744 automatically and unsupervisedly extracts stage variations in a patient’s health condition, and
 745 the stage-adaptive convolutional module, which uses convolution operations to capture health
 746 progression patterns from these stages, focusing on stage-specific features and recalibrating
 747 them to enhance prediction outcomes.
- 748 2. Adacare[16]: is a health status representation learning model focused on EHR, capable
 749 of capturing the variation trends of biomarkers in both long-term and short-term scales.
 750 It uses dilated convolutions to capture features across different time scales. Additionally,
 751 it incorporates a scale-adaptive feature recalibration module, which adaptively enhances
 752 important features based on the patient’s health condition while suppressing irrelevant
 753 features.

754 D.2 Data splitting

755 Data splitting for model training. see Figure 5. For the TEA task, we removed some records with
 756 missing labels.

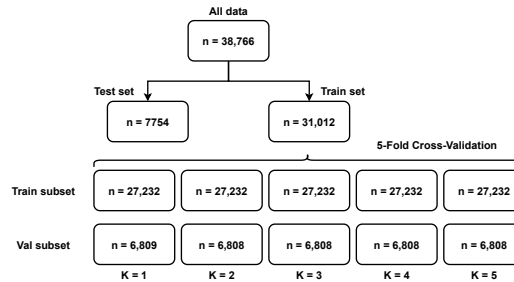


Figure 5: Data splitting for PEACE dataset

757 D.3 Evaluation Metrics

758 This section describes the metrics used to evaluate the performance of the trained model. For
 759 classification tasks, TP (True Positive) is a true positive, TN (True Negative) is a true negative, FP
 760 (False Positive) is a false positive, and FN (False Negative) is a false negative. Our evaluation metrics

and calculation methods are shown in Table 12. For regression tasks, y_i is the actual value, \hat{y}_i is the predicted value, and n is the number of observations. Our evaluation metrics and calculation methods are shown in Table 13.

Table 12: Classification evaluation metrics

Metric	Explanation and Formula
Accuracy (ACC)	Explanation: Accuracy is the proportion of correctly predicted samples out of the total samples. Formula: $\text{Accuracy} = \frac{TP+TN}{TP+TN+FP+FN}$
Area Under the Receiver Operating Characteristic Curve (AUROC)	Explanation: AUROC is the area under the ROC curve, which evaluates the performance of a classification model. The ROC curve shows the trade-off between the true positive rate (TPR) and false positive rate (FPR) at various threshold settings.
Recall	Explanation: Recall is the proportion of true positives correctly identified by the model out of all actual positives. Formula: $\text{Recall} = \frac{TP}{TP+FN}$
Precision	Explanation: Precision is the proportion of true positives correctly identified by the model out of all predicted positives. Formula: $\text{Precision} = \frac{TP}{TP+FP}$
F1 Score	Explanation: The F1 score is the harmonic mean of precision and recall, providing a balance between the two. Formula: $F1 = 2 \times \frac{\text{Precision} \times \text{Recall}}{\text{Precision} + \text{Recall}}$

Table 13: Regression evaluation metrics

Metric	Explanation and Formula
Mean Squared Error (MSE)	Explanation: MSE measures the average squared difference between the predicted values and the actual values. It gives a higher weight to larger errors, making it sensitive to outliers. Formula: $\text{MSE} = \frac{1}{n} \sum_{i=1}^n (y_i - \hat{y}_i)^2$
Mean Absolute Error (MAE)	Explanation: MAE measures the average absolute difference between the predicted values and the actual values. It gives equal weight to all errors, making it less sensitive to outliers. Formula: $\text{MAE} = \frac{1}{n} \sum_{i=1}^n y_i - \hat{y}_i $

D.4 Detailed Experimental Results

Tables 14 and 15 respectively present the performance evaluation details of TEA and MR tasks, including the detailed evaluation metrics for each fold, the mean and error of the 5-folds, and the values for the independent test set. The statistical and analytical processing of experimental results retains four decimal places to minimise rounding errors. We acknowledge that data processing and visualisation tasks, including calculations of means and errors, are supported by large language models (LLMs).

E Release and Usage of Dataset

We release the PEACE dataset under a CC-BY license. The dataset access involves three steps:

1. Complete some training and provide certification (such as the CITI or GCP certification).
2. Carefully read the terms of the Data Use Agreement and if you agree and wish to proceed, send your application to the manager. Please use an official email address (such as .edu).
3. Final approval of data access is required by Xiangya Hospital

Once an application is approved, the researcher will receive an email with instructions for downloading the dataset. We estimate a response time of 20 business days for processing requests. This duration may vary depending on the completeness of the provided information and can take up to three months. Any model trained on this dataset should not be deployed in real-world systems

Table 14: Details of TEA Task Model Performance Evaluation

Decision Tree							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.7105	0.7297	0.7178	0.7224	0.7139	0.7189 \pm 0.0030	0.7236
F1 Score	0.6588	0.6770	0.6531	0.6630	0.6590	0.6622 \pm 0.0035	0.6659
Recall	0.6640	0.6797	0.6574	0.6627	0.6590	0.6645 \pm 0.0037	0.6745
Precision	0.6540	0.6747	0.6490	0.6633	0.6593	0.6601 \pm 0.0042	0.6591
AUROC	0.7758	0.7876	0.7744	0.7775	0.7738	0.7778 \pm 0.0025	0.7838
Logistic Regression							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.6743	0.6752	0.6822	0.6729	0.6854	0.6780 \pm 0.0022	0.6836
F1 Score	0.6040	0.6079	0.5989	0.6025	0.6065	0.6040 \pm 0.0015	0.6028
Recall	0.5740	0.5795	0.5694	0.5754	0.5707	0.5738 \pm 0.0018	0.5730
Precision	0.6748	0.6760	0.6713	0.6671	0.6988	0.6776 \pm 0.0052	0.6734
AUROC	0.7198	0.7225	0.7190	0.7200	0.7198	0.7202 \pm 0.0011	0.7204
Random Forest							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.7800	0.7830	0.7855	0.7886	0.7858	0.7846 \pm 0.0014	0.7916
F1 Score	0.7405	0.7396	0.7318	0.7370	0.7382	0.7374 \pm 0.0016	0.7416
Recall	0.7044	0.7025	0.6936	0.7006	0.6994	0.7001 \pm 0.0020	0.7031
Precision	0.8119	0.8123	0.8082	0.8089	0.8125	0.8108 \pm 0.0010	0.8139
AUROC	0.8084	0.8079	0.8041	0.8083	0.8069	0.8071 \pm 0.0010	0.8097
SVM							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.6598	0.6580	0.6691	0.6634	0.6735	0.6648 \pm 0.0025	0.6694
F1 Score	0.5679	0.5627	0.5680	0.5771	0.5658	0.5683 \pm 0.0024	0.5678
Recall	0.5474	0.5478	0.5434	0.5542	0.5396	0.5465 \pm 0.0025	0.5459
Precision	0.6533	0.6433	0.6612	0.6555	0.6789	0.6584 \pm 0.0058	0.6533
AUROC	0.7023	0.7018	0.7018	0.7063	0.7009	0.7026 \pm 0.0011	0.7028
MLP							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.7257	0.7347	0.7402	0.7399	0.7464	0.7374 \pm 0.0033	0.7508
F1 Score	0.6746	0.6859	0.6738	0.6807	0.6857	0.6801 \pm 0.0023	0.6955
Recall	0.6673	0.6787	0.6720	0.6781	0.6691	0.6730 \pm 0.0020	0.6831
Precision	0.6852	0.6941	0.6771	0.6840	0.7076	0.6896 \pm 0.0048	0.7109
AUROC	0.7799	0.7874	0.7853	0.7885	0.7848	0.7852 \pm 0.0015	0.7925
XGBoost							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.7840	0.7976	0.7966	0.7989	0.7963	0.7947 \pm 0.0023	0.8063
F1 Score	0.7501	0.7579	0.7434	0.7532	0.7474	0.7504 \pm 0.0024	0.7607
Recall	0.7218	0.7261	0.7114	0.7234	0.7101	0.7186 \pm 0.0033	0.7301
Precision	0.7952	0.8080	0.7964	0.8012	0.8107	0.8023 \pm 0.0027	0.8080
AUROC	0.8182	0.8226	0.8155	0.8220	0.8144	0.8185 \pm 0.0015	0.8265
LightGBM							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.7925	0.8067	0.8053	0.8038	0.8034	0.8023 \pm 0.0024	0.8108
F1 Score	0.7623	0.7717	0.7569	0.7577	0.7592	0.7616 \pm 0.0023	0.7723
Recall	0.7338	0.7392	0.7233	0.7282	0.7240	0.7297 \pm 0.0028	0.7406
Precision	0.8093	0.8258	0.8149	0.8079	0.8195	0.8155 \pm 0.0031	0.8234
AUROC	0.8261	0.8315	0.8232	0.8257	0.8231	0.8259 \pm 0.0015	0.8327
AdaBoost							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.6620	0.6671	0.6614	0.6684	0.6646	0.6647 \pm 0.0011	0.6852
F1 Score	0.5668	0.5534	0.5614	0.5682	0.5480	0.5596 \pm 0.0031	0.5961
Recall	0.5567	0.5527	0.5470	0.5622	0.5377	0.5513 \pm 0.0038	0.5725
Precision	0.6395	0.6069	0.6372	0.6320	0.6451	0.6321 \pm 0.0073	0.6776
AUROC	0.7063	0.7056	0.7010	0.7114	0.6972	0.7043 \pm 0.0027	0.7196
Transtab							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.5840	0.5716	0.5922	0.5877	0.5822	0.5835 \pm 0.0034	0.5835
F1 Score	0.3129	0.3087	0.3246	0.3169	0.3217	0.3170 \pm 0.0029	0.3170
Recall	0.3394	0.3390	0.3532	0.3470	0.3459	0.3449 \pm 0.0026	0.3449
Precision	0.3524	0.2834	0.4815	0.2918	0.3305	0.3479 \pm 0.0357	0.3479
AUROC	0.6623	0.6562	0.6627	0.6656	0.6505	0.6595 \pm 0.0027	0.6594
iTransformer							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.5762	0.7325	0.6918	0.5573	0.7473	0.6606 \pm 0.0396	0.6831
F1 Score	0.5497	0.7269	0.6872	0.5328	0.7348	0.6456 \pm 0.0437	0.6827
Recall	0.5765	0.7332	0.6915	0.5576	0.7476	0.6608 \pm 0.0397	0.6839
Precision	0.5496	0.7248	0.6965	0.5524	0.7327	0.6506 \pm 0.0413	0.6817
AUROC	0.6583	0.7405	0.7266	0.6517	0.7433	0.7036 \pm 0.0203	0.7340
Mamba							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.6723	0.7608	0.7364	0.6577	0.8091	0.7272 \pm 0.0281	0.7606
F1 Score	0.6545	0.7623	0.7406	0.6414	0.8094	0.7212 \pm 0.0322	0.7625
Recall	0.6728	0.7609	0.7357	0.6579	0.8102	0.7272 \pm 0.0282	0.7630
Precision	0.6802	0.7633	0.7511	0.6731	0.8094	0.7352 \pm 0.0259	0.7621
AUROC	0.7315	0.7902	0.7813	0.7164	0.8256	0.7686 \pm 0.0200	0.7959
StageNet							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.6790	0.7792	0.7041	0.7291	0.7541	0.7291 \pm 0.0177	0.7832
F1 Score	0.7422	0.8361	0.7659	0.7894	0.8128	0.7893 \pm 0.0166	0.7271
Recall	0.6880	0.7536	0.7044	0.7208	0.7372	0.7208 \pm 0.0116	0.6898
Precision	0.8059	0.9391	0.8392	0.8725	0.9058	0.8725 \pm 0.0235	0.7688
AUROC	0.7349	0.7537	0.7396	0.7443	0.7490	0.7443 \pm 0.0033	0.7443
AdaCare							
Metric	Fold 1	Fold 2	Fold 3	Fold 4	Fold 5	Mean \pm SE	Test
Accuracy	0.7106	0.7598	0.755	0.7681	0.7599	0.7507 \pm 0.0111	0.7582
F1 Score	0.6664	0.7185	0.7203	0.7251	0.7136	0.7087 \pm 0.0107	0.7252
Recall	0.5964	0.6746	0.6794	0.6834	0.6720	0.6612 \pm 0.0326	0.6836
Precision	0.7550	0.7684	0.7664	0.7724	0.7609	0.7646 \pm 0.0061	0.7724
AUROC	0.8438	0.8511	0.8546	0.8578	0.8499	0.8515 \pm 0.0047	0.8588

Table 15: Details of MR Task Model Performance Evaluation

ERSO														
Model	Fold 1 MSE	Fold 2 MSE	Fold 3 MSE	Fold 4 MSE	Fold 5 MSE	Mean MSE	Test MSE	Fold 1 MAE	Fold 2 MAE	Fold 3 MAE	Fold 4 MAE	Fold 5 MAE	Mean MAE	Test MAE
Decision Tree	0.0333	0.0363	0.0373	0.0401	0.0394	0.0373±0.0012	0.0473	0.0322	0.0354	0.0358	0.0389	0.0376	0.0360±0.0011	0.0443
Logistic Regression	0.1262	0.1295	0.1234	0.1289	0.1311	0.1278±0.0014	0.1328	0.1259	0.1292	0.1228	0.1281	0.1297	0.1271±0.0013	0.1321
Random Forest	0.0172	0.0184	0.0189	0.0199	0.0202	0.0189±0.0005	0.0234	0.0357	0.0364	0.0390	0.0391	0.0396	0.0380±0.0008	0.0440
SVM	0.1545	0.1630	0.1672	0.1951	0.1721	0.1704±0.0068	0.3417	0.2701	0.2677	0.2704	0.2719	0.2810	0.2722±0.0023	0.2764
MLP	0.0378	0.0337	0.0396	0.0357	0.0386	0.0371±0.0016	0.6994	0.1125	0.1120	0.1140	0.1140	0.1221	0.1149±0.0018	0.1219
XGBoost	0.0190	0.0206	0.0210	0.0230	0.0213	0.0210±0.0006	0.0265	0.0493	0.0523	0.0551	0.0554	0.0510	0.0526±0.0012	0.0572
LightGBM	0.0174	0.0186	0.0192	0.0198	0.0197	0.0189±0.0004	0.0236	0.0437	0.0435	0.0454	0.0454	0.0455	0.0447±0.0005	0.0497
AdaBoost	0.1607	0.2267	0.1774	0.1982	0.1875	0.1913±0.0099	0.1947	0.3947	0.4734	0.4012	0.4311	0.4233	0.4247±0.0139	0.4293
TransTab	0.2796	0.2857	0.2804	0.2831	0.2850	0.2828±0.0012	0.2828	0.2787	0.2855	0.2785	0.2828	0.2833	0.2818±0.0014	0.2818
tTransformer	0.0573	0.0181	0.0264	0.0911	0.0285	0.0442±0.0134	0.0259	0.0762	0.0716	0.0815	0.1423	0.0875	0.0808±0.0152	0.0257
Mamba	0.0214	0.0193	0.0249	0.0780	0.0130	0.0313±0.0118	0.0190	0.0388	0.0431	0.0590	0.1178	0.0380	0.0526±0.0140	0.0387
StageNet	0.0342	0.0210	0.0327	0.0416	0.0188	0.0297±0.0042	0.0288	0.0775	0.0717	0.0772	0.082	0.0699	0.0756±0.0021	0.0736
AdaCare	0.0254	0.0179	0.0295	0.0327	0.0175	0.0246±0.0031	0.0221	0.0271	0.0225	0.0339	0.0347	0.0223	0.0281±0.0027	0.0261
IRSO														
Model	Fold 1 MSE	Fold 2 MSE	Fold 3 MSE	Fold 4 MSE	Fold 5 MSE	Mean MSE	Test MSE	Fold 1 MAE	Fold 2 MAE	Fold 3 MAE	Fold 4 MAE	Fold 5 MAE	Mean MAE	Test MAE
Decision Tree	0.0269	0.0263	0.0336	0.0305	0.0273	0.0289±0.0014	0.0309	0.0269	0.0263	0.0333	0.0305	0.0273	0.0289±0.0013	0.0306
Logistic Regression	0.1163	0.1079	0.1203	0.1126	0.1137	0.1142±0.0021	0.1114	0.1163	0.1079	0.1203	0.1126	0.1137	0.1142±0.0021	0.1107
Random Forest	0.0153	0.0134	0.0179	0.0153	0.0155	0.0155±0.0007	0.0158	0.0305	0.0279	0.0340	0.0318	0.0313	0.0311±0.0010	0.0322
SVM	0.1651	0.1577	0.1802	0.1802	0.1605	0.1663±0.0039	0.1713	0.1609	0.1561	0.1716	0.1624	0.1555	0.1613±0.0028	0.1619
MLP	0.0315	0.0296	0.0326	0.0332	0.0310	0.0316±0.0006	0.1076	0.1022	0.1047	0.1077	0.1105	0.1048	0.1060±0.0014	0.1050
XGBoost	0.0165	0.0143	0.0188	0.0169	0.0160	0.0165±0.0007	0.0164	0.0420	0.0392	0.0445	0.0424	0.0421	0.0420±0.0008	0.0430
LightGBM	0.0150	0.0137	0.0179	0.0156	0.0147	0.0154±0.0007	0.0156	0.0357	0.0347	0.0396	0.0371	0.0363	0.0367±0.0008	0.0365
AdaBoost	0.0779	0.0491	0.0489	0.1262	0.0793	0.0763±0.0141	0.1083	0.2304	0.1485	0.1467	0.3335	0.2301	0.2178±0.0343	0.2940
TransTab	0.2392	0.2397	0.2295	0.2324	0.2324	0.2330±0.0021	0.2358	0.2240	0.2293	0.2290	0.2274	0.2330	0.2329±0.0022	0.2329
tTransformer	0.0851	0.0399	0.0343	0.0936	0.0357	0.0537±0.0151	0.0375	0.1275	0.1192	0.1464	0.1820	0.0720	0.1091±0.0203	0.1181
Mamba	0.0223	0.0100	0.0112	0.0552	0.0083	0.0214±0.0088	0.0100	0.0246	0.0324	0.0283	0.1021	0.0264	0.0373±0.0133	0.0339
StageNet	0.1845	0.1769	0.1810	0.1709	0.1798	0.1798±0.0027	0.1810	0.3632	0.3556	0.3597	0.3644	0.3496	0.3585±0.0027	0.3590
AdaCare	0.0175	0.0152	0.0162	0.0191	0.0145	0.0165±0.0009	0.0156	0.0201	0.0186	0.0190	0.0218	0.0175	0.0194±0.0007	0.0185
ERWO														
Model	Fold 1 MSE	Fold 2 MSE	Fold 3 MSE	Fold 4 MSE	Fold 5 MSE	Mean MSE	Test MSE	Fold 1 MAE	Fold 2 MAE	Fold 3 MAE	Fold 4 MAE	Fold 5 MAE	Mean MAE	Test MAE
Decision Tree	0.0082	0.0112	0.0116	0.0100	0.0093	0.0101±0.0006	0.0130	0.0082	0.0112	0.0116	0.0100	0.0093	0.0101±0.0006	0.0130
Logistic Regression	0.0203	0.0216	0.0216	0.0181	0.0210	0.0205±0.0007	0.0221	0.0203	0.0216	0.0216	0.0181	0.0210	0.0205±0.0007	0.0221
Random Forest	0.0055	0.0061	0.0056	0.0054	0.0052	0.0056±0.0002	0.1149	0.0111	0.0119	0.0122	0.0108	0.0114	0.0114±0.0003	0.0137
SVM	0.0300	0.0301	0.0298	0.0332	0.0317	0.0310±0.0007	0.0319	0.0300	0.0301	0.0298	0.0332	0.0317	0.0310±0.0007	0.0319
MLP	0.0171	0.0109	0.0105	0.0113	0.0104	0.0120±0.0013	0.0691	0.0717	0.0511	0.0510	0.0561	0.0505	0.0561±0.0040	0.0518
XGBoost	0.0074	0.0066	0.0073	0.0064	0.0061	0.0068±0.0003	0.0079	0.0165	0.0166	0.0177	0.0159	0.0154	0.0164±0.0004	0.0191
LightGBM	0.0056	0.0061	0.0059	0.0053	0.0053	0.0056±0.0002	0.0065	0.0135	0.0141	0.0144	0.0124	0.0134	0.0136±0.0004	0.0151
AdaBoost	0.0193	0.0173	0.0206	0.0156	0.0096	0.0165±0.0109	0.1912	0.0486	0.0472	0.0569	0.0446	0.0186	0.0432±0.0065	0.0529
TransTab	0.0294	0.0309	0.0296	0.0314	0.0279	0.0298±0.0006	0.0298	0.0294	0.0309	0.0296	0.0314	0.0279	0.0302±0.0004	0.0298
tTransformer	0.0010	0.0076	0.0071	0.0622	0.0052	0.0184±0.0110	0.0060	0.0346	0.0271	0.0283	0.1238	0.0200	0.0400±0.0172	0.0229
Mamba	0.0498	0.0013	0.0038	0.0026	0.0020	0.0234±0.0132	0.0020	0.0167	0.0140	0.0148	0.0086	0.0247±0.0148	0.0111	
StageNet	0.2029	0.2014	0.2028	0.2045	0.2004	0.2024±0.0007	0.1302	0.4055	0.4037	0.4051	0.4072	0.4025	0.4048±0.0008	0.2731
AdaCare	0.0099	0.0059	0.0085	0.0114	0.0046	0.0081±0.0013	0.0066	0.0115	0.0063	0.0090	0.0137	0.0045	0.0090±0.0016	0.0117
IRWO														
Model	Fold 1 MSE	Fold 2 MSE	Fold 3 MSE	Fold 4 MSE	Fold 5 MSE	Mean MSE	Test MSE	Fold 1 MAE	Fold 2 MAE	Fold 3 MAE	Fold 4 MAE	Fold 5 MAE	Mean MAE	Test MAE
Decision Tree	0.0144	0.0163	0.0167	0.0148	0.0159	0.0156±0.0004	0.0168	0.0144	0.0163	0.0167	0.0148	0.0159	0.0156±0.0004	0.0168
Logistic Regression	0.0458	0.0420	0.0442	0.0414	0.0394	0.0426±0.0011	0.0391	0.0458	0.0420	0.0442	0.0414	0.0394	0.0426±0.0011	0.0391
Random Forest	0.0077	0.0087	0.0100	0.0069	0.0076	0.0082±0.0005	0.0087	0.0159	0.0165	0.0186	0.0151	0.0158	0.0164±0.0006	0.0172
SVM	0.0975	0.0975	0.0949	0.0936	0.0954	0.0955±0.0011	0.0980	0.0984	0.0984	0.0981	0.0957	0.0984	0.0956±0.0011	0.0980
MLP	0.0180	0.0144	0.0166	0.0145	0.0149	0.0157±0.0007	0.0847	0.0718	0.0620	0.0659	0.0667	0.0655	0.0664±0.0016	0.1007
XGBoost	0.0088	0.0091	0.0109	0.0083	0.0085	0.0091±0.0005	0.0098	0.0271	0.0269	0.0286	0.0281	0.0287	0.0278±0.0004	0.0281
LightGBM	0.0078	0.0086	0.0099	0.0069	0.0075	0.0081±0.0008	0.0086	0.0188	0.0191	0.0211	0.0183	0.0190	0.0193±0.0005	0.0198
AdaBoost	0.0472	0.0484	0.0483	0.0503	0.0541	0.0497±0.0012	0.0471	0.1121	0.1151	0.1107	0.1179	0.1217	0.1155±0.0020	0.1122
TransTab	0.0807	0.0803	0.0766	0.0799	0.0816	0.0798±0.0009	0.0798	0.0807	0.0803	0.0766	0.0800	0.0813	0.0797±0.0008	0.0798
tTransformer	0.0105	0.0052	0.0070	0.0124	0.0041	0.0078±0.0016	0.0060	0.0465	0.0293	0.0426	0.0651	0.0410	0.0384±0.0080	0.0300
Mamba	0.0079	0.0021	0.0027	0.0273	0.0269	0.0114±0.0057	0.0021	0.0174	0.0061	0.0144	0.0552	0.0572	0.0254±0.0100	0.0121
StageNet	0.0801	0.0802	0.0850	0.0859	0.0867	0.0823±0.0013	0.0818	0.1723	0.1720	0.1770	0.1776	0.1731	0.1744±0.0012	0.1732
AdaCare	0.0086	0.0096	0.0144	0.0133	0.0103	0.0116±0.0013	0.0079	0.0109	0.0119	0.0167	0.0174	0.0126	0.0139±0.0013	0.0085
NSAID														
Model	Fold 1 MSE	Fold 2 MSE	Fold 3 MSE	Fold 4 MSE	Fold 5 MSE	Mean MSE	Test MSE	Fold 1 MAE	Fold 2 MAE	Fold 3 MAE	Fold 4 MAE	Fold 5 MAE	Mean MAE	Test MAE
Decision Tree	0.1379	0.1425	0.1397	0.1370	0.1451	0.1404±0.0015	0.1493	0.1373	0.1419	0.1394	0.1358	0.1442	0.1397±0.0015	0.1489
Logistic Regression	0.0956	0.0941	0.0907	0.0937	0.0937	0.0958±0.0009	0.1011	0.0953	0.0938	0.0974	0.0966	0.0937	0.0945±0.0009	0.1004
Random Forest	0.0709	0.0684	0.0719	0.0722	0.0698	0.0706±0.0007	0.0745	0.1405	0.1370	0.1420	0.1427	0.1405	0.1405±0.0010	0.1461
SVM	0.1283	0.1297	0.1368	0.1307	0.1278	0.1307±0.0016	0.1324	0.1193	0.1186	0.1228	0.1201	0.1165	0.1195±0.0010	0.1235
MLP	0.0877	0.0835	0.0923	0.0858	0.0850	0.0869±0.0015	0.3490	0.1915	0.1900	0.2015	0.1932	0.1931	0.1939±0.0020	0.1985
XGBoost	0.0715	0.0722	0.0736	0.0735	0.0716	0.0725±0.0005	0.0766	0.1493	0.1484	0.1516	0.1521	0.1491	0.1501±0.0007	0.1532
LightGBM	0.0669	0.0662	0.0697	0.0676	0.0667	0.0674±0.0006	0.0714	0.1364	0.1347	0.1390	0.1386	0.1368	0.1371±0.0008	0.1415
AdaBoost	0.2356	0.2344	0.223											

781 until its performance has been rigorously evaluated and the system's scope and representative-
782 ness in relation to real-world applications have been validated. Data usage must strictly adhere
783 to applicable regulations in China. Access to the PEACE dataset can be found at the following
784 address:[<https://github.com/YTYTYD/PEACE>].

785 **E.1 Dataset Documentation**

786 **Main Data:**

- 787 1. All_Data.csv: a .CSV file containing all patients in the dataset, with patient ID.
- 788 2. All_data.json: a .JSON file describing all the data in the dataset.

789 **Dictionaries:**

- 790 1. D_Numerical.csv: A .csv file containing the units of the numerical features.
- 791 2. D_Multiclass.csv: A .csv file containing the meaning of multiclass features.
- 792 3. D_Diagnosis.csv: A .csv file containing the meaning of diagnosis.

793 **Model Training:**

- 794 1. Train data: a .CSV file containing the training set of patients.
- 795 2. Test data: a .CSV file containing the test set of patients.

796 **E.2 Responsibility Statement**

797 The corresponding author(s) acknowledge and accept full responsibility for any potential infringement
798 of rights associated with this dataset.

799 **E.3 Ethical Considerations**

800 All data are de-identified to the greatest extent possible and stored in a database controlled internally
801 by Xiangya Hospital. This work has been approved by the Xiangya Hospital Institutional Review
802 Board (Ethics Approval No.: 202109422). The data are available for future research by other Xiangya
803 Hospital researchers. Access for external researchers will be provided under restricted conditions,
804 with permissions ultimately reviewed by the Xiangya Hospital.

805 **F Samples and Case Studies**

806 **Sample 1:**

807 As shown in Table 16, the patient in Sample 1 was diagnosed with a malignant tumor of the right
808 kidney with multiple metastases. The patient denies any history of allergies, smoking, or alcohol
809 consumption. Chemotherapy was chosen as the treatment method for the tumor. After evaluation,
810 no cardiovascular or gastrointestinal risks were identified. The results of the complete blood count,
811 liver function, and kidney function tests were all within normal ranges. The type of pain experienced
812 is somatic, with a Numerical Rating Scale (NRS) score of 8 at its most severe, 6 at its least severe,
813 an average of 8, and currently 6. This indicates severe pain that significantly affects the patient's
814 daily life and emotions. The pain occurs three or more times per day. Breakthrough pain is of the
815 end-of-dose type, occurring three or more times per day. The tumor symptoms are severe. The
816 patient has been using sustained-release strong opioids for three days, with a compliance score of
817 5.75, and has not tolerated opioids well. Pain control lasts for six hours post-medication, with side
818 effects of constipation, nausea, and vomiting, which have been managed with additional medications.
819 The patient's pain control is poor, possibly due to inappropriate medication selection. The doctor
820 and pharmacist recommended continuing the use of sustained-release strong opioids and adding
821 NSAIDs, along with medications for constipation and nausea. The patient fully complied with and

followed the advice. One week later, during follow-up, the pain was mildly relieved and evaluated as moderate pain. It was recommended to increase the dose of sustained-release strong opioids, continue using NSAIDs, and medications for adverse effects. After adjusting the dose, the pain was partially relieved, but breakthrough pain persisted. It was recommended to use sustained-release strong opioids, immediate-release strong opioids, and NSAIDs. Following this adjustment, the patient's pain was completely relieved, and it was recommended to continue the treatment as per the original plan.

Sample 2:

As shown in Table 17, the patient in Sample 2 was diagnosed with a malignant tumor of the jejunum. The patient denies any history of allergies, smoking, or alcohol consumption. The treatment for the tumor involved surgery. After evaluation, there were no cardiovascular or gastrointestinal risks. The results of the complete blood count, liver function, and kidney function tests were all normal. The type of pain experienced is visceral pain, with an NRS (Numerical Rating Scale) of 6 at its most severe, 3 at its least severe, an average of 5, and currently 2. The pain affects daily life and emotions. The frequency of pain is less than three times per day, with activity-induced breakthrough pain occurring less than three times per day. The tumor symptoms are mild. The patient has been using immediate-release weak opioids for 10 days, with a compliance score of 3.25. Nausea and vomiting were observed after medication administration. Poor pain control might be due to an insufficient dose. The pharmacist and doctor recommended continuing the use of immediate-release weak opioids and increasing the dose, along with antiemetic medication. After administration, the pain was partially relieved. Five days later, the patient's NRS was 7 at its most severe, 4 at its least severe, with an average of 6, and currently 6. No breakthrough pain was reported. The patient had been using immediate-release weak opioids for 15 days, with a compliance score of 7. The analgesic effect was poor, possibly due to inappropriate medication selection. After discussion with the pharmacist, the doctor adjusted the medication to sustained-release strong opioids. The patient fully complied and followed the advice. One week later, during follow-up, the pain was partially relieved after taking sustained-release strong opioids.

Sample 3:

As shown in Table 18, the patient in Sample 3 was diagnosed with a malignant tumor of the ascending colon. The patient denies any history of allergies or smoking but has a history of alcohol consumption. After evaluation, there were no cardiovascular or gastrointestinal risks. The results of the complete blood count, liver function, and kidney function tests were all normal. The type of pain is mixed, with an NRS (Numerical Rating Scale) of 10 at its most severe, 2 at its least severe, an average of 6, and currently 8. The pain affects daily life and emotions. The pain frequency is less than three times per day, with breakthrough pain of the end-of-dose type occurring three or more times per day. The tumor symptoms are severe. Currently, the patient is not using any analgesic medication. The pharmacist and doctor recommended immediate-release weak opioids, which partially relieved the pain after administration. One week later, the patient's NRS was 4 at its most severe, 2 at its least severe, with an average of 3, and currently 2. The pain has a slight impact on daily life and emotions, with no breakthrough pain. The patient has been using immediate-release weak opioids for 7 days, with a compliance score of 6.5. After medication, pain control lasts for 5 hours, with no adverse reactions observed. The analgesic effect is poor, possibly due to inappropriate medication selection. After discussion with the pharmacist, the doctor adjusted the medication to sustained-release strong opioids. The patient fully complied and followed the advice. One week later, during follow-up, the patient's pain was completely relieved after taking sustained-release strong opioids.

Sample 4:

As shown in Table 19, the patient in Sample 4 was diagnosed with a malignant neck tumor. The patient denies any history of smoking, allergies, or alcohol consumption. Upon evaluation, there were no cardiovascular or gastrointestinal risks identified. Results from the complete blood count, liver function, and kidney function tests were all within normal ranges. The patient's pain is characterized as somatic, with a Numerical Rating Scale (NRS) score of 10 at its most severe, 6 at its least severe, an average of 7, and currently 5. The pain significantly impacts daily life and emotional well-being and is persistent. The patient experiences breakthrough pain less than three times per day, primarily activity-

Table 16: Sample 1

Patient Basic Information				
ID	Gender	Age	Height	Weight
SJ-289031	1	59	170	75
SJ-289031	1	59	170	75
SJ-289031	1	59	170	75
SJ-289031	1	59	170	75
BMI	Body Surface Area (BSA)	Medical Record Date	Length of Hospital Stay	Number of Hospital Admissions
25.95	1.8441	2050/2/10	1	1
25.95	1.8441	2050/2/12	3	2
25.95	1.8441	2050/2/19	10	3
25.95	1.8441	2050/2/26	17	4
Diagnosis	Smoking History	Drinking History	Allergy History	Tumour Treatment Methods
112	0	0	0	2
112	0	0	0	2
112	0	0	0	2
112	0	0	0	2
Cardiovascular Risk	Gastrointestinal Risk	PS Score	White Blood Cell Count	Red Blood Cell Count
0	0	3	7.5	5.3
0	0	2	4.2	4.62
0	0	2	5.6	3.84
0	0	2	4.7	5.17
Hemoglobin	Platelet Count	Hematocrit	Neutrophil Count	Lymphocyte Count
162	130	48.2	4.4	1.8
140	184	42.1	2.3	1.5
120	146	34.5	4.2	1
150	131	45.8	2.2	1.9
Eosinophil Count	Basophil Count	Monocyte Percentage	Neutrophil Percentage	Lymphocyte Percentage
0.43	0.06	10.5	58.9	24
0.1	0	8.2	54.3	35
0	0	6.8	75.7	17.4
0.08	0.02	11.8	46.4	39.7
Basophil Percentage	Eosinophil Percentage	Mean Corpuscular Volume	Mean Corpuscular Hemoglobin	Mean Corpuscular Hemoglobin Concentration
0.9	5.8	90.8	30.6	336.7
0.7	1.8	91	30.3	332.5
0.1	0	89.7	31.3	348.6
0.4	1.7	88.6	29	328
Red Cell Distribution Width	Plateletcrit	Mean Platelet Volume	Total Protein	Albumin
14.5	0.13	10.1	67.6	38.3
13.2	0.15	8.36	63.5	40.5
14.1	0.04	8.65	61.4	41.4
13.9	0.15	11.4	54.4	36.9
Globulin	Albumin/Globulin Ratio	Total Bilirubin	Direct Bilirubin	Total Bile Acids
28.8	1.3	14.5	6.8	5.5
23	1.8	7.3	3.9	3.4
20	2.1	4.8	1.3	3.2
17.5	2.1	17.7	6.3	8.1
Alanine Aminotransferase	Aspartate Aminotransferase	Urea	Creatinine	Uric Acid
17.4	17.5	5.38	88	421.8
27.8	17.5	5.63	78	381.5
12.6	11.4	4.26	68.1	291.3
		7.5	58.6	345.4
Comprehensive Pain Assessment				
Pain Type	Worst Pain	Mildest Pain	Average Pain	Current Pain
2	8	6	8	6
2	6	4	6	3
2	6	2	2	1
2	1	0	1	0
Impact of Pain on Daily Life	Impact of Pain on Mood	Impact of Pain on Walking Ability	Impact of Pain on Daily Work	Impact of Pain on Relationships with Others
3	4	7	6	0
1	0	1	3	0
1	0	2	4	0
Impact of Pain on Sleep	Impact of Pain on Interest in Life	Pain Frequency	Type of Breakthrough Pain	Frequency of Breakthrough Pain
10	6	2	2	2
5	0	2	2	1
1	0	1	2	2
1	0	0	0	0
Previous Analgesic Treatment				
Prev_ERSO	Prev_IRSO	Prev_ERWO	Prev_IRWO	Prev_NSAID
0	0	0	0	0
1	0	0	0	1
1	0	0	0	1
1	1	0	0	1
Prev_A/A	Prev_Others	Opiate Tolerance	Days of Medication Use	M1
0	0	0	3	1
0	0	0	5	1
0	0	0	12	1
0	0	0	19	1
M2	M3	M4	M5	M6
1	1	0	1	1
1	1	1	1	1
1	1	1	1	1
1	1	1	1	1
M7	M8	MMAS-8 Total Score	Duration of Analgesic Control	Constipation
0	0.75	5.75	6	1
1	1	8	8	1
1	1	8	8	1
1	1	8	12	1
Nausea/Vomiting	Other Adverse Reactions	Medication for Adverse Reactions		
1	0	1		
1	0	1		
0	0	1		
0	0	1		
Cancer Pain Medication Decision				
ERSO_Recom	IRSO_Recom	ERWO_Recom	IRWO_Recom	NSAIDs_Recom
0	0	0	0	1
1	0	0	0	1
1	0	0	0	1
1	0	0	0	1
A/A_Recom	Others_Recom	Constipation Medication Recommended	Nausea/Vomiting Medication Recommended	
0	0	2	1	
0	0	2	1	
0	0	2	0	
0	0	2	0	
Evaluation of Previous Analgesic Treatment				
Drug-Related Problems	Causes	Interventions	Acceptance of Interventions	Status of DRPs
2	1	15	1	3
2	9	11	1	3
2	9	10	1	3
0	0	0	0	1
Follow-up				
Pain Relief Status				
1				
2				
2				
1				

Table 17: Sample 2

Patient Basic Information				
ID	Gender	Age	Height	Weight
SJ-514441	0	53	152	36
SJ-514441	0	53	152	36
BMI	Body Surface Area (BSA)	Medical Record Date	Length of Hospital Stay	Number of Hospital Admissions
	1.2351	2052/2/3	2	2
	1.2351	2052/4/11	2	5
Diagnosis	Smoking History	Drinking History	Allergy History	Tumour Treatment Methods
54	0	0	0	1
54	0	0	0	1
Cardiovascular Risk	Gastrointestinal Risk	PS Score	White Blood Cell Count	Red Blood Cell Count
0	0	1	10.8	5.43
0	0	2	7.1	4.98
Hemoglobin	Platelet Count	Hematocrit	Neutrophil Count	Lymphocyte Count
133	175	36.2	5.4	1.3
141	128	43.5	5.2	1.3
Eosinophil Count	Basophil Count	Monocyte Percentage	Neutrophil Percentage	Lymphocyte Percentage
0	0	0.5	89	10.4
0	0.1	7.6	73.3	18.1
Basophil Percentage	Eosinophil Percentage	Mean Corpuscular Volume	Mean Corpuscular Hemoglobin	Mean Corpuscular Hemoglobin Concentration
0.1	0	66.7	20.7	311
0.7	0.3	67.2	20.9	311.6
Red Cell Distribution Width	Plateletcrit	Mean Platelet Volume	Total Protein	Albumin
16.8	0.18	10.4		
16.2	0.12	9.63	64.7	39.9
Globulin	Albumin/Globulin Ratio	Total Bilirubin	Direct Bilirubin	Total Bile Acids
24.8	1.6	15.3	4.4	3.1
Alanine Aminotransferase	Aspartate Aminotransferase	Urea	Creatinine	Uric Acid
26.7	27.5	5.5	67	379.8
Comprehensive Pain Assessment				
Pain Type	Worst Pain	Mildest Pain	Average Pain	Current Pain
1	6	3	5	6
1	7	4	6	6
Impact of Pain on Daily Life	Impact of Pain on Mood	Impact of Pain on Walking Ability	Impact of Pain on Daily Work	Impact of Pain on Relationships with Others
3	3	3	4	5
5	5	3	3	5
Impact of Pain on Sleep	Impact of Pain on Interest in Life	Pain Frequency	Type of Breakthrough Pain	Frequency of Breakthrough Pain
3	3	0	1	1
5	4	0	0	0
Previous Analgesic Treatment				
Prev_ERSO	Prev_IRSO	Prev_ERWO	Prev_IRWO	Prev_NSAlD
0	0	0	1	0
0	0	0	1	0
Prev_A/A	Prev_Others	Opiate Tolerance	Days of Medication Use	M1
0	0	0	10	0
0	1	0	15	0
M2	M3	M4	M5	M6
1	1	0	0	0
1	1	1	1	1
M7	M8	MMAS-8 Total Score	Duration of Analgesic Control	Constipation
1	0.25	3.25	7	0
1	1	7	6	0
Nausea/Vomiting	Other Adverse Reactions	Medication for Adverse Reactions		
1	0	0		
1	0	0		
Cancer Pain Medication Decision				
ERSO_Recom	IRSO_Recom	ERWO_Recom	IRWO_Recom	NSAIDs_Recom
0	0	0	1	0
1	0	0	0	0
A/A_Recom	Others_Recom	Constipation Medication Recommended	Nausea/Vomiting Medication Recommended	
0	0	0		1
0	0	0		
Evaluation of Previous Analgesic Treatment				
Drug-Related Problems	Causes	Interventions	Acceptance of Interventions	Status of DRPs
2	9	11	1	2
2	1	10	2	3
Follow-up				
Pain Relief Status				
2				
2				

Table 18: Sample 3

Patient Basic Information				
ID	Gender	Age	Height	Weight
SJ-921252	1	81	162	60
SJ-921252	1	80	162	60
BMI	Body Surface Area (BSA)	Medical Record Date	Length of Hospital Stay	Number of Hospital Admissions
	1.2351	2074/10/20	11	2
	1.2351	2073/8/13	6	1
Diagnosis	Smoking History	Drinking History	Allergy History	Tumour Treatment Methods
744	0	1	0	
744	0	1	0	
Cardiovascular Risk	Gastrointestinal Risk	PS Score	White Blood Cell Count	Red Blood Cell Count
0	0	3	4.9	4.11
0	0	0	5.5	4.08
Hemoglobin	Platelet Count	Hematocrit	Neutrophil Count	Lymphocyte Count
145	145	39	7	
137	177	41.3	4.1	0.9
Eosinophil Count	Basophil Count	Monocyte Percentage	Neutrophil Percentage	Lymphocyte Percentage
0	0	8.3	73.5	17.1
Basophil Percentage	Eosinophil Percentage	Mean Corpuscular Volume	Mean Corpuscular Hemoglobin	Mean Corpuscular Hemoglobin Concentration
0.3	0.8	101.2	33.6	332
Red Cell Distribution Width	Plateletcrit	Mean Platelet Volume	Total Protein	Albumin
14.8	0.08	10.32	70	40.9
Globulin	Albumin/Globulin Ratio	Total Bilirubin	Direct Bilirubin	Total Bile Acids
29.1	1.4	18.3	5.2	9.7
Alanine Aminotransferase	Aspartate Aminotransferase	Urea	Creatinine	Uric Acid
		5.76	58	232.1
Comprehensive Pain Assessment				
Pain Type	Worst Pain	Mildest Pain	Average Pain	Current Pain
4	10	2	6	8
1	4	2	3	2
Impact of Pain on Daily Life	Impact of Pain on Mood	Impact of Pain on Walking Ability	Impact of Pain on Daily Work	Impact of Pain on Relationships with Others
4	5	3	4	4
1	0	0	0	2
Impact of Pain on Sleep	Impact of Pain on Interest in Life	Pain Frequency	Type of Breakthrough Pain	Frequency of Breakthrough Pain
3	4	1	2	2
2	1	0	0	0
Previous Analgesic Treatment				
Prev_ERSO	Prev_IRSO	Prev_ERWO	Prev_IRWO	Prev_NSAD
0	0	0	0	0
0	0	0	1	0
Prev_A/A	Prev_Others	Opiate Tolerance	Days of Medication Use	M1
0	0	0		
0	0	0	7	1
M2	M3	M4	M5	M6
1	1	1	1	1
M7	M8	MMAS-8 Total Score	Duration of Analgesic Control	Constipation
0	0.5	6.5	5	0
				0
Nausea/Vomiting	Other Adverse Reactions	Medication for Adverse Reactions		
0	0	0		
0	0	0		
Cancer Pain Medication Decision				
ERSO_Recom	IRSO_Recom	ERWO_Recom	IRWO_Recom	NSAIDs_Recom
0	0	0	1	0
1	0	0	0	0
A/A_Recom	Others_Recom	Constipation Medication Recommended	Nausea/Vomiting Medication Recommended	
0	0			
0	0			
Evaluation of Previous Analgesic Treatment				
Drug-Related Problems	Causes	Interventions	Acceptance of Interventions	Status of DRPs
2	1	10	1	2
Follow-up				
Pain Relief Status				
2				
1				

induced. The tumor symptoms are severe. Currently, the patient is on non-steroidal anti-inflammatory drugs (NSAIDs) and has been on this medication for 5 days, achieving a compliance score of 7.75. Pain relief lasts less than 1 hour after taking analgesics, with no adverse reactions reported. The analgesic effect is poor, possibly due to inappropriate medication selection. Following a discussion with the pharmacist, the physician adjusted the medication regimen to include sustained-release strong opioids combined with NSAIDs. The patient fully adhered to and followed the prescribed advice. One week later, during a follow-up visit, the patient's pain was completely relieved after medication.

Table 19: Sample 4

Patient Basic Information				
ID	Gender	Age	Height	Weight
SJ-854841	0	56	165	65
BMI	Body Surface Area (BSA)	Medical Record Date	Length of Hospital Stay	Number of Hospital Admissions
		2089/5/31	13	1
Diagnosis	Smoking History	Drinking History	Allergy History	Tumour Treatment Methods
27	0	0	0	
Cardiovascular Risk	Gastrointestinal Risk	PS Score	White Blood Cell Count	Red Blood Cell Count
0	0	3	6.5	4.42
Hemoglobin	Platelet Count	Hematocrit	Neutrophil Count	Lymphocyte Count
138	250	41	4.7	1.1
Eosinophil Count	Basophil Count	Monocyte Percentage	Neutrophil Percentage	Lymphocyte Percentage
0.12	0.03	7	73.1	17.7
Basophil Percentage	Eosinophil Percentage	Mean Corpuscular Volume	Mean Corpuscular Hemoglobin	Mean Corpuscular Hemoglobin Concentration
0.4	1.8	92.8	31.2	336.6
Red Cell Distribution Width	Plateletcrit	Mean Platelet Volume	Total Protein	Albumin
14	0.22	8.64	67.8	42.7
Globulin	Albumin/Globulin Ratio	Total Bilirubin	Direct Bilirubin	Total Bile Acids
25.1	1.7	12	6.2	4.8
Alanine Aminotransferase	Aspartate Aminotransferase	Urea	Creatinine	Uric Acid
15.4	17.7	4.67	57	257
Comprehensive Pain Assessment				
Pain Type	Worst Pain	Mildest Pain	Average Pain	Current Pain
2	10	6	7	5
Impact of Pain on Daily Life	Impact of Pain on Mood	Impact of Pain on Walking Ability	Impact of Pain on Daily Work	Impact of Pain on Relationships with Others
9	6	10	9	10
Impact of Pain on Sleep	Impact of Pain on Interest in Life	Pain Frequency	Type of Breakthrough Pain	Frequency of Breakthrough Pain
10	10	3	1	1
Previous Analgesic Treatment				
Prev_ERSO	Prev_IRSO	Prev_ERWO	Prev_IRWO	Prev_NSAID
0	0	0	0	1
Prev_A/A	Prev_Others	Opiate Tolerance	Days of Medication Use	M1
0	0	0	5	1
M2	M3	M4	M5	M6
1	1	1	1	1
M7	M8	MMAS-8 Total Score	Duration of Analgesic Control	Constipation
1	0.75	7.75	1	0
Nausea/Vomiting ons	Other Adverse Reacti Medication for Adverse Reactions			
0	0	0		
Cancer Pain Medication Decision				
ERSO_Recom	IRSO_Recom	ERWO_Recom	IRWO_Recom	NSAIDs_Recom
1	0	0	0	1
A/A_Recom	Others_Recom	Constipation Medication Recommended	Nausea/Vomiting Medication Recommended	
0	0			
Evaluation of Previous Analgesic Treatment				
Drug-Related Problems	Causes	Interventions	Acceptance of Interventions	Status of DRPs
2	1	10	1	3
Follow-up				
Pain Relief Status				
1				

Sample 5:

As shown in Table 20, the patient in Sample 5 was diagnosed with adenocarcinoma of the upper left lung. The patient denies any history of allergies or alcohol consumption but has a history of smoking. Cardiovascular and gastrointestinal evaluations revealed no risks. Complete blood count, liver function, and kidney function tests were all normal. The patient reports experiencing visceral pain, with a Numerical Rating Scale (NRS) score of 10 at its most severe, 5 at its least severe, an average of 7, and a current score of 5. This pain significantly affects daily life and emotions and is persistent. The patient experiences breakthrough pain less than three times per day, classified as end-of-dose pain. The tumor symptoms are tolerable. Currently, the patient is using immediate-release weak opioids and has been on this medication for 31 days, with a compliance score of 7. Pain control

lasts for 5 hours after taking the analgesics, with no adverse reactions observed. The analgesic effect is poor, possibly due to inappropriate medication selection. After consultation with the pharmacist, the doctor adjusted the medication to sustained-release strong opioids. The patient fully complied with the new regimen. One week later, during follow-up, the patient reported complete pain relief after taking the sustained-release strong opioids.

Table 20: Sample 5

Patient Basic Information				
ID	Gender	Age	Height	Weight
SJ-996524	1	40	172	49
BMI	Body Surface Area (BSA)	Medical Record Date	Length of Hospital Stay	Number of Hospital Admissions
		2100/6/17	5	1
Diagnosis	Smoking History	Drinking History	Allergy History	Tumour Treatment Methods
118	1	0	0	
Cardiovascular Risk	Gastrointestinal Risk	PS Score	White Blood Cell Count	Red Blood Cell Count
0	0	2	9.2	4.3
Hemoglobin	Platelet Count	Hematocrit	Neutrophil Count	Lymphocyte Count
127	391	36.4	6.7	0.5
Eosinophil Count	Basophil Count	Monocyte Percentage	Neutrophil Percentage	Lymphocyte Percentage
0.91	0.07	9.5	85.7	1.7
Basophil Percentage	Eosinophil Percentage	Mean Corpuscular Volume	Mean Corpuscular Hemoglobin	Mean Corpuscular Hemoglobin Concentration
0.2	2.9	84.7	27.2	321
Red Cell Distribution Width	Plateletcrit	Mean Platelet Volume	Total Protein	Albumin
14.4	0.32	8.1	58.2	31.4
Globulin	Albumin/Globulin Ratio	Total Bilirubin	Direct Bilirubin	Total Bile Acids
26.8	1.2	7.8	2.5	3.7
Alanine Aminotransferase	Aspartate Aminotransferase	Urea	Creatinine	Uric Acid
		2.72	44	125.9
Comprehensive Pain Assessment				
Pain Type	Worst Pain	Mildest Pain	Average Pain	Current Pain
1	10	5	7	5
Impact of Pain on Daily Life	Impact of Pain on Mood	Impact of Pain on Walking Ability	Impact of Pain on Daily Work	Impact of Pain on Relationships with Others
10	7	6	10	9
Impact of Pain on Sleep	Impact of Pain on Interest in Life	Pain Frequency	Type of Breakthrough Pain	Frequency of Breakthrough Pain
7	6	0	2	1
Previous Analgesic Treatment				
Prev_ERSO	Prev_IRSO	Prev_ERWO	Prev_IRWO	Prev_NSaid
0	0	0	1	0
Prev_A/A	Prev_Others	Opiate Tolerance	Days of Medication Use	M1
0	0		3	1
M2	M3	M4	M5	M6
1	1	1	1	1
M7	M8	MMAS-8 Total Score	Duration of Analgesic Control	Constipation
1	0	7	5	0
Nausea/Vomiting	Other Adverse Reactions	Medication for Adverse Reactions		
0	0	0		
Cancer Pain Medication Decision				
ERSO_Recom	IRSO_Recom	ERWO_Recom	IRWO_Recom	NSAIDs_Recom
1	0	0	0	1
A/A_Recom	Others_Recom	Constipation Medication Recommended	Nausea/Vomiting Medication Recommended	
0	0			
Evaluation of Previous Analgesic Treatment				
Drug-Related Problems	Causes	Interventions	Acceptance of Interventions	Status of DRPs
2	1	10	1	3
Follow-up				
Pain Relief Status				
1				