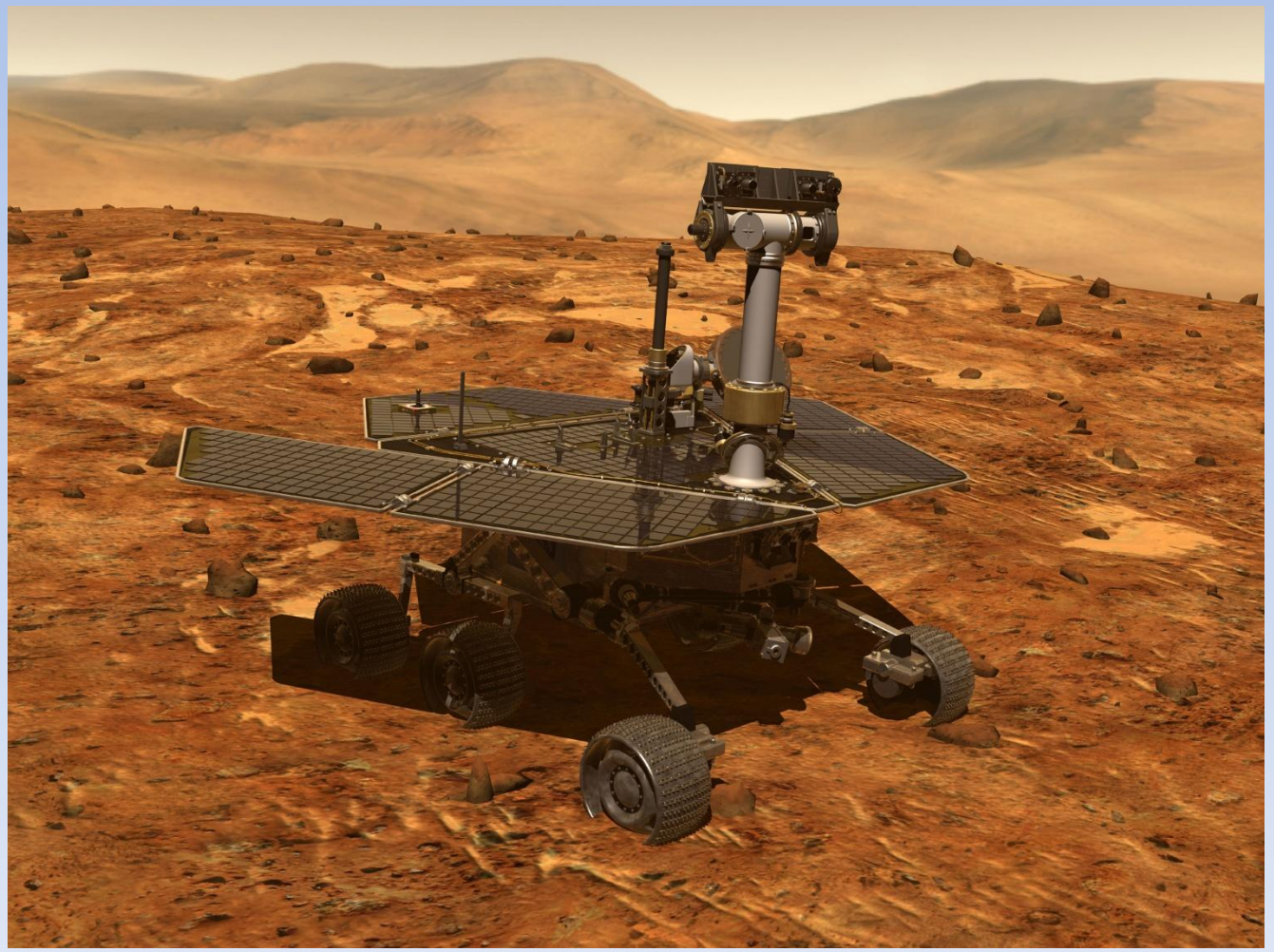
« IT call home »
or
Introducing new technology in a hospital environment

Marc Béïque, MD, FRCP(C)

Main challenges

- Technology
- $$$$
- Environment
- People

Why not ???



$$$$

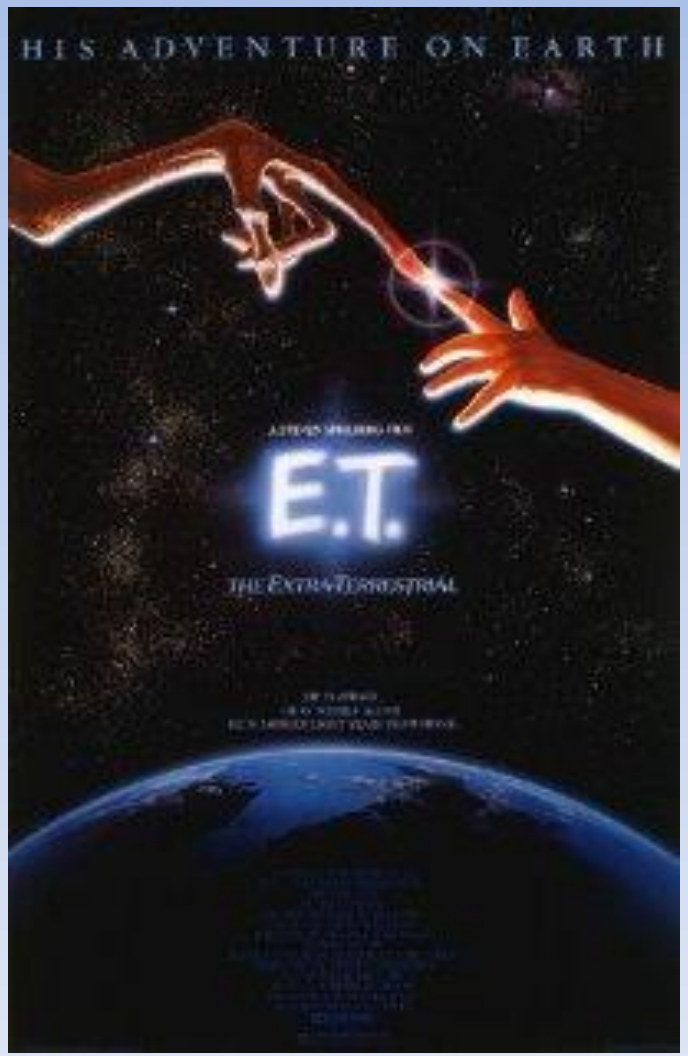
HASBRO
GAMES

$$$$$

- Hospital budgets
- Usual business plans
- The real challenge ???

The real challenge is « people »

Ultimately

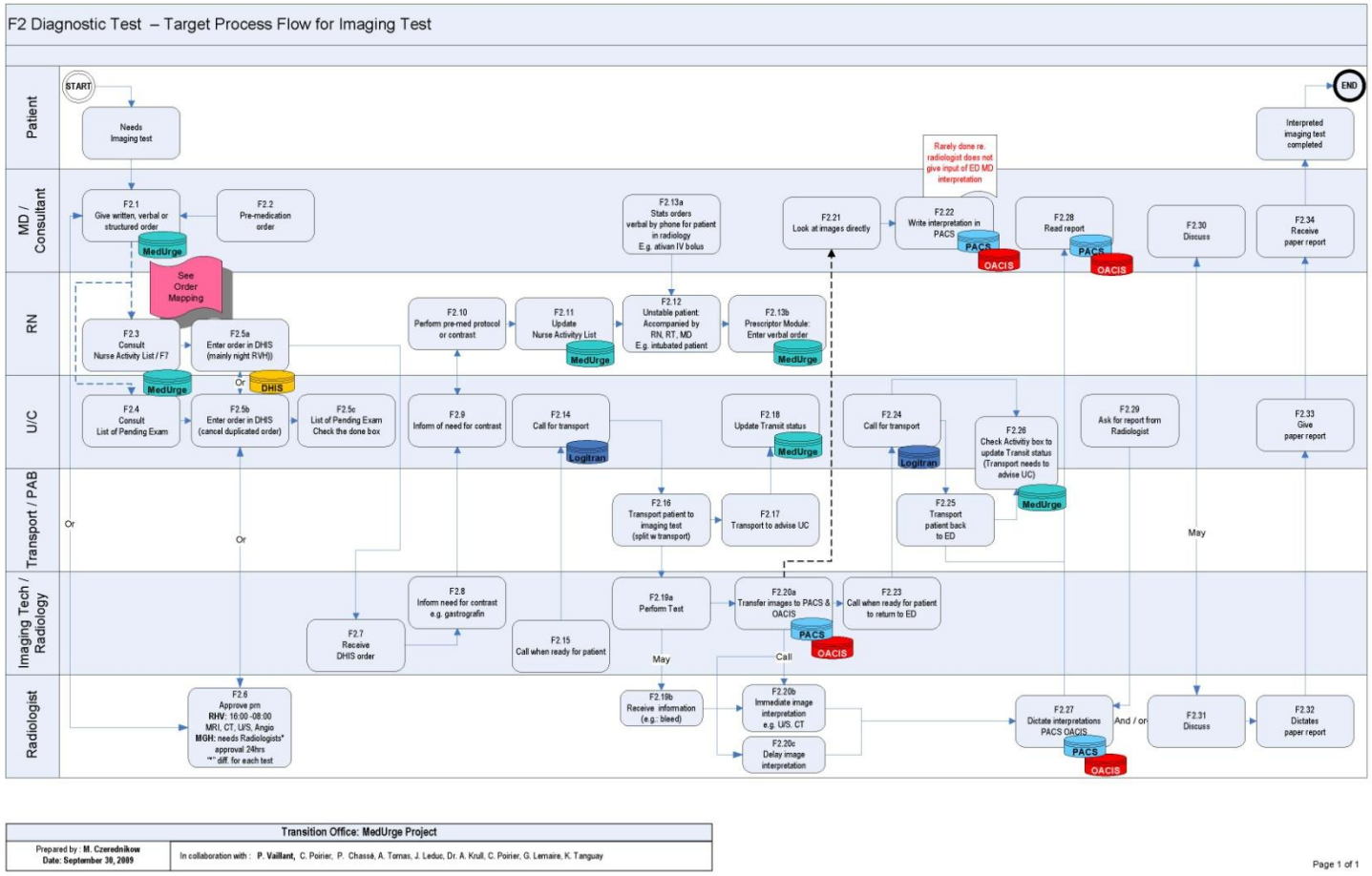


How do we reach the target?????

- Identify a need

- Added value ???

- Incorporated into the day-to-day workflow « seamlessly »


F2 Diagnostic Test – Target Process Flow for Imaging Test
Patient
MD / Consultant
RN
U/C
Transport / PAB
Imaging Tech / Radiology
Radiologist
START
END
Needs Imaging test
Interpreted imaging test completed
F2.1 Give written, verbal or structured order
F2.2 Pre-medication order
F2.3 Consult Nurse Activity List / F7
F2.4 Consult List of Pending Exam
F2.5a Enter order in DHIS (mainly night RVH))
F2.5b Enter order in DHIS (cancel duplicated order)
F2.5c List of Pending Exam Check the done box
F2.6 Approve prn RHV: 16:00 -08:00 MRI, CT, U/S, Angio MGH: needs Radiologists* approval 24hrs *" diff. for each test
F2.7 Receive DHIS order
F2.8 Inform need for contrast e.g. gastrografin
F2.9 Inform of need for contrast
F2.10 Perform pre-med protocol or contrast
F2.11 Update Nurse Activity List
F2.12 Unstable patient: Accompanied by RN, RT, MD E.g. intubated patient
F2.13a Stats orders verbal by phone for patient in radiology E.g. ativan IV bolus
F2.13b Prescriptor Module: Enter verbal order
F2.14 Call for transport
F2.15 Call when ready for patient
F2.16 Transport patient to imaging test (split w transport)
F2.17 Transport to advise UC
F2.18 Update Transit status
F2.19a Perform Test
F2.19b Receive information (e.g.: bleed)
F2.20a Transfer images to PACS & OACIS
F2.20b Immediate image interpretation e.g. U/S, CT
F2.20c Delay image interpretation
F2.21 Look at images directly
F2.22 Write interpretation in PACS
Rarely done re. radiologist does not give input of ED MD interpretation
F2.23 Call when ready for patient to return to ED
F2.24 Call for transport
F2.25 Transport patient back to ED
F2.26 Check Activity box to update Transit status (Transport needs to advise UC)
F2.27 Dictate interpretations PACS OACIS
F2.28 Read report
F2.29 Ask for report from Radiologist
F2.30 Discuss
F2.31 Discuss
F2.32 Dictates paper report
F2.33 Give paper report
F2.34 Receive paper report
See Order Mapping
MedUrge
DHIS
Logitran
PACS
OACIS
Or
May
Call
And / or
Transition Office: MedUrge Project
Prepared by : M. Czerednikow
Date: September 30, 2009
In collaboration with : P. Vaillant, C. Poirier, P. Chassé, A. Tomas, J. Leduc, Dr. A. Krull, C. Poirier, G. Lemaire, K. Tanguay
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Add technology…

- User friendly ?

- Ergonomically acceptable ???

- Will it survive ????

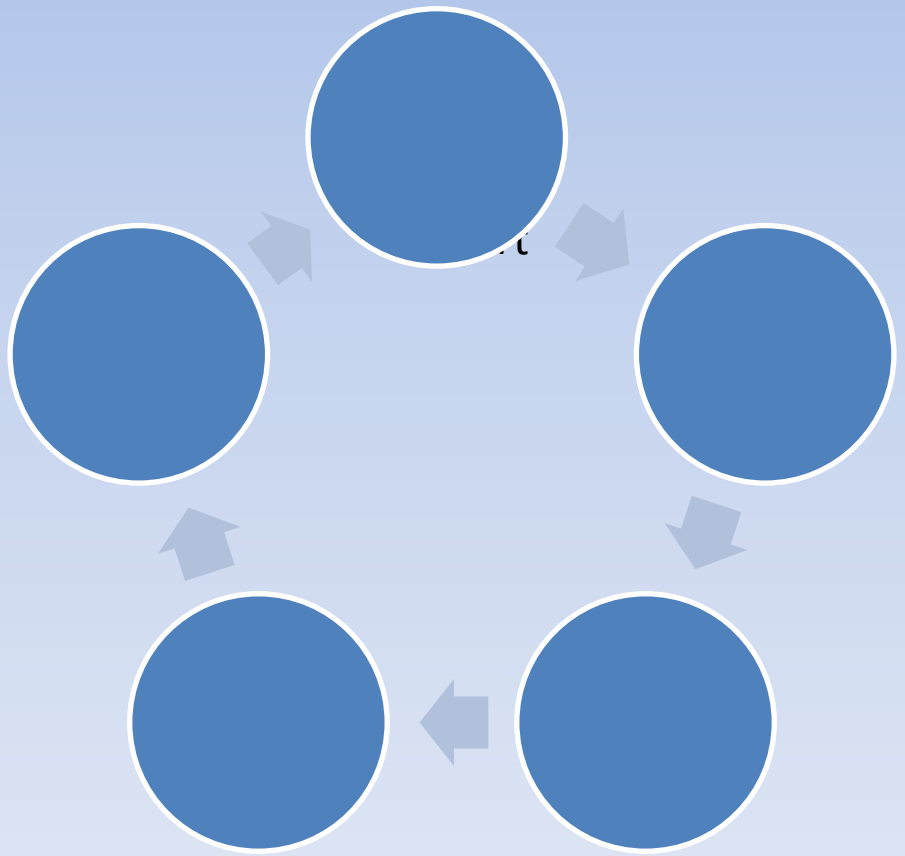
- Will it carry « germs » ??

Strategy

CHAMPIONS
TM

- Team leaders
- Communication strategy
- Drum up support
- Get buy-in

- Deployment plan



Go-live days

Support

Last comments