

Integrating the Healthcare Enterprise: IHE..... Background, Overview, and Radiology Status



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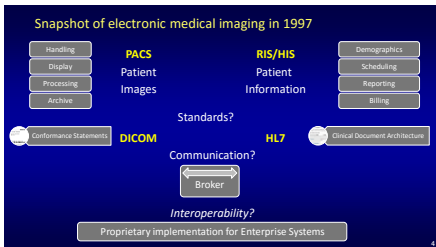


Disclosures

- Financial
None
- Trustee (Diagnostic Medical Physics)
American Board of Radiology
- Author
Essential Physics of Medical Imaging

Learning Objectives

- Provide an overview of the background, history, and process of Integrating the Healthcare Enterprise (IHE)
- Describe the space in which IHE functions and how stakeholders are involved
- Give examples of radiology profiles, actors, and transactions pertinent to the diagnostic medical physicist

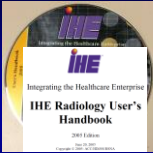


- Background
- 1990's: RSNA instrumental in DICOM promotion / adoption; system interoperability required use of the HL7 standard
 - 1997: Progress toward producing turnkey devices able to "plug and play" with existing standards– required definition of specific use-cases and specific architectures
 - 1998: Engagement with the Healthcare Information and Management Systems Society (HIMSS) to establish momentum and direction for system *interoperability* — the IHE effort was initiated

- Background
- Initially conceived as a 3 – 5 year project with the premise:
 - Annual cycle of proposed technical specifications
 - Testing of implementations occur at "connectathons"
 - Public demonstrations will demonstrate value
 - Year 1:
 - Problem of *scheduling radiology workflow* from patient registration / ordering / scheduling ... to ... image acquisition / transfer / archival / distribution
 - Involved DICOM and HL7, with multiple devices (PACS, RIS, HIS)
 - 47 systems and 24 vendors were present at RSNA 1999

Background


- Year 2, Year 3,
- In 2005 there were 7 integration profiles
 - Scheduled Workflow
 - Consistent Presentation of Images
 - Presentation of Grouped Procedures
- In 2016 there are 21 integration profiles & 23 supplements for trial implementation (Radiology only)
 - Key Image Notes
 - Evidence Documents
 - Assisted Protocol Setting Option
 - Performed Procedure Step
- Project is ongoing and now in 17th year
- IHE is now a global organization spanning multiple domains



IHE Integrating the Healthcare Enterprise

IHE International
Enable seamless and secure access to health information wherever and whenever needed.

www.ihe.net



www.iheusa.org

IHE Domain Committees

- Anatomic Pathology
- Cardiology
- Dental
- Endoscopy
- Eye Care
- IT Infrastructure
- Laboratory
- Patient Care Coordination
- Patient Care Devices
- Pharmacy
- Quality, Research and Public Health
- Radiation Oncology
- Radiology

Integrating the Healthcare Enterprise

- Initiative by healthcare professionals and industry to:
 - improve the way computer systems in healthcare share information
 - promote the coordinated use of established standards such as DICOM and HL7 to address specific clinical needs
 - enable care providers to use information more effectively in support of *optimal patient care*

Integrating the Healthcare Enterprise: What?

- Establishes **Technical Framework of Integration Profiles** to meet critical interoperability needs
- Guides vendor implementation strategies
- Provides effective shorthand for use in purchase specifications
- Enables providers to use information more effectively from systems developed with IHE integration profiles
- Improves system communication and eases implementation

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Integrating the Healthcare Enterprise: How?

- Identify a set of *use-cases* requiring a common architecture
- Define an *Integration Profile* to support those use-cases
- Define a specific clinical use case
 - Determine clinical information and workflow needs
 - Address needs by set(s) of "actors" and "transactions"

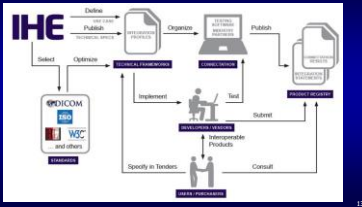
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Integration Profile, Actors, Transactions, Connectathon

- **Integration Profile:** Precise description of how standards are to be implemented to address a specific clinical integration need, definitions of the clinical use case, and set of actors and transactions that address the need
- **Actor:** a system or application responsible for certain information or tasks, which supports a specific set of IHE transactions to communicate with other actors
- **Transaction:** exchange of information between actors, describing how to use an established standard (DICOM, HL7, W3C) to exchange information
- **Connectathon:** process to test implementations at a live, structured, multi-vendor event in a supervised environment

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IHE process



IHE profiles

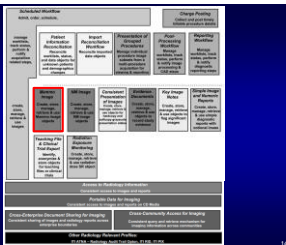
Mammography image

Integrating the Healthcare Enterprise

IHE

IHE Radiology (RAD)
Technical Framework

Volume 1
IHE RAD T1-1
Integration Profiles

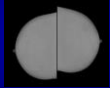


Goal: Build IHE Mammography Image Profile

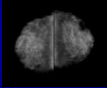
- Challenges:
 - Two types of image data
 - Different vendor attributes / image data
 - Common use of CAD
 - Importance of prior studies
 - Image size, orientation, layout
 - MQSA requirements (USA)

"For Presentation" vs "For Processing"?

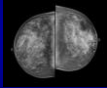
- Which image provides an equalization of the breast skin line?
- Which image is used by CAD in mammo?



Detector corrections, gain map corrections, no enhancement
"For Processing"



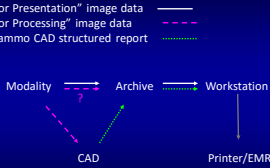
Simple linear contrast & brightness corrections, no enhancement
"For Processing"



Skin equalization processing and non-linear enhancement
"For Presentation"

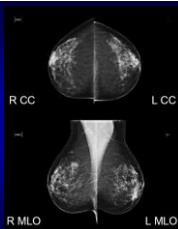
Types of Image Data

- "For Presentation" image data
- "For Processing" image data
- Mammo CAD structured report



Hanging Protocols

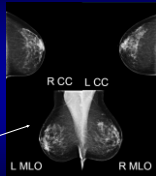
- Determined by
 - View type (CC vs. MLO)
 - Specialty view type
 - Laterality
 - Patient orientation



Preferred layout

Hanging Protocols

- Generic image display
 - Series based
 - Image order as acquired
 - Image orientation as acquired

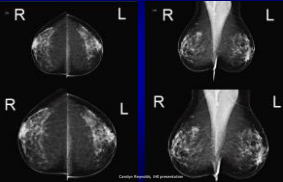


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Variances in image size

- Typical "Fit to Viewport" effect

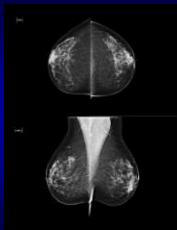


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Recognizing tissue vs air

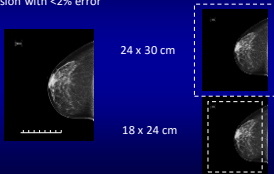
- Window / Level adjustments
 - Recognize skin line
 - Pad outside data to pre-determined value
- Maintain black air gap during window / level operations and inverted pixel data



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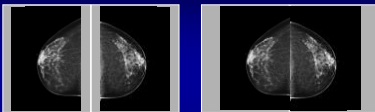
True size film printing

- Film size vs. detector size
- Precision with <2% error



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Printing: minimal borders at chest wall



Centered images

Images offset on chest wall side:
Minimal borders

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Mammography Image: Integration via IHE

- Meets desire to have multiple FFDM vendors, and use any vendor's workstation for diagnosis
- Ensures FFDM modalities provide adequate information for downstream applications
- Ensures systems support required data objects for interoperability
- Defines image display and printing operations for effective and efficient diagnosis

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IHE profiles
Radiation Exposure Monitoring

Integrating the Business Example

IHE
IHE Radiology (RAD)
Technical Framework
Volume 1
IHE RAD TT-1
Integration Profiles

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Radiation Exposure Monitoring

- Create, store, manage, retrieve, and use the DICOM Radiation Dose Structured Report object

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Radiation Exposure Monitoring (REM) – 2012

The profile allows dose information to be collected and evaluated without imposing a significant administrative burden on staff

The profile describes how radiation reporting systems can submit dose reports to centralized registries

The REM Profile requires imaging modalities to export radiation exposure details in a standard format

The radiation reporting systems is expected to perform relevant dose QA analysis

IHE Radiation Exposure Monitoring Profile

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IHE-RO

- Radiation Oncology implementations
- Uniquely applied to interoperability challenges in management of RO operations and workflow
- Detailed overview in the subsequent presentations

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Summary

- From limited expectations & planned extinction, IHE is expanding and evolving to solve critical clinical interoperability needs
- IHE defines Integration Profiles that use standards to solve interoperability problems
- The Technical Framework contains the Integration Profiles that have gone through the validation (connectathon) process
- Specifying IHE Integration Profiles in RFPs ensures compatibility and functionality for given tasks and interoperability

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