

# EMR

## - Software & Hardware

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# Pieces of Puzzle

- Software
- Hardware
- Soft-Hard-Ware
- How to go about?



# S/w & H/w

- Software? - Mind
- Hardware? - Money

# Software

## Front End

- VB
  - Easy
  - Inexpensive
- Java/ J2EE
  - Cost effective

# Software

- Java/ J2EE/ .Net
  - Integration
  - Web based
  - Internet Browser
  - Internet + VPN

# Software

## Back End


- Linux
  - Redhat
- MS 2000
- Unix

# Software

## Database

- Oracle
- MS – SQL 2000
- DB2
- Interbase

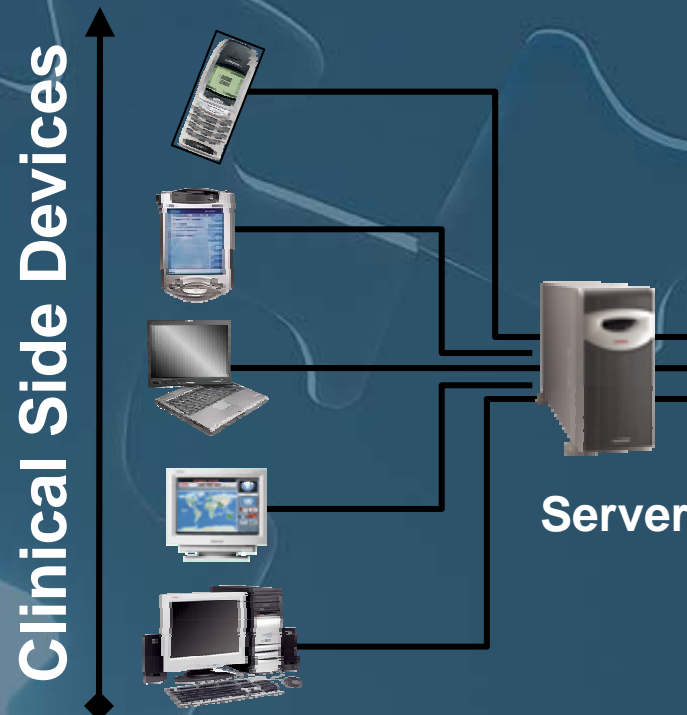
# Software

- 
- To comply with Standards
    - HL-7
    - DICOM
    - CPT for Surgical Procedures
    - SOAP (Protocol)
    - HIPA for Insurance
    - NABL (National Accreditation Board for Labs)
  - Interface with other applications



# H/W– Clinical Aspect

- TCs
- PCs
- Digital Pad
- PDA
- Scanners
  - Document
  - Film





# H/W– Clinical Aspect

- Interfacing hardware with equipment
  - Imaging Equipment
    - Fundus Camera, OCT, HRT etc
  - Diagnosis Data Equipment
    - HFA, Auto-Ref, Auto-Keratometer, DBR etc
- Wireless Network
  - Security



# H/W- IT Systems Aspect

- Server
  - Application
  - Database
  - Backup
  - Others
- Desktop Workstations



# H/W- IT Systems Aspect

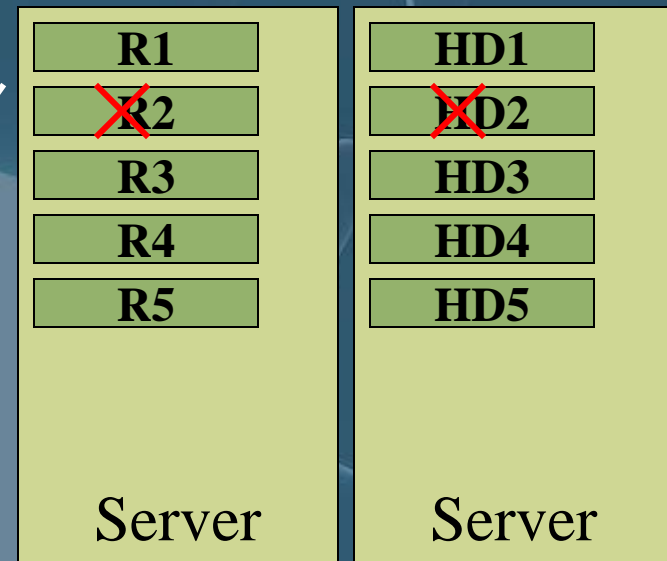
- Hardware
  - High processing speeds to run difficult networks
  - High storage capacity
  - Although equipment will continue to become more compact, faster & cheaper – What is purchased today will work effectively in office for next 5yrs.

# Hardware

- Storage
  - Typical EMR Requirement 3 Terabytes in 2 to 3 years
  - Scalability upto 5 TB
  - Archiving Policy
    - Online
    - Offline
    - Inline

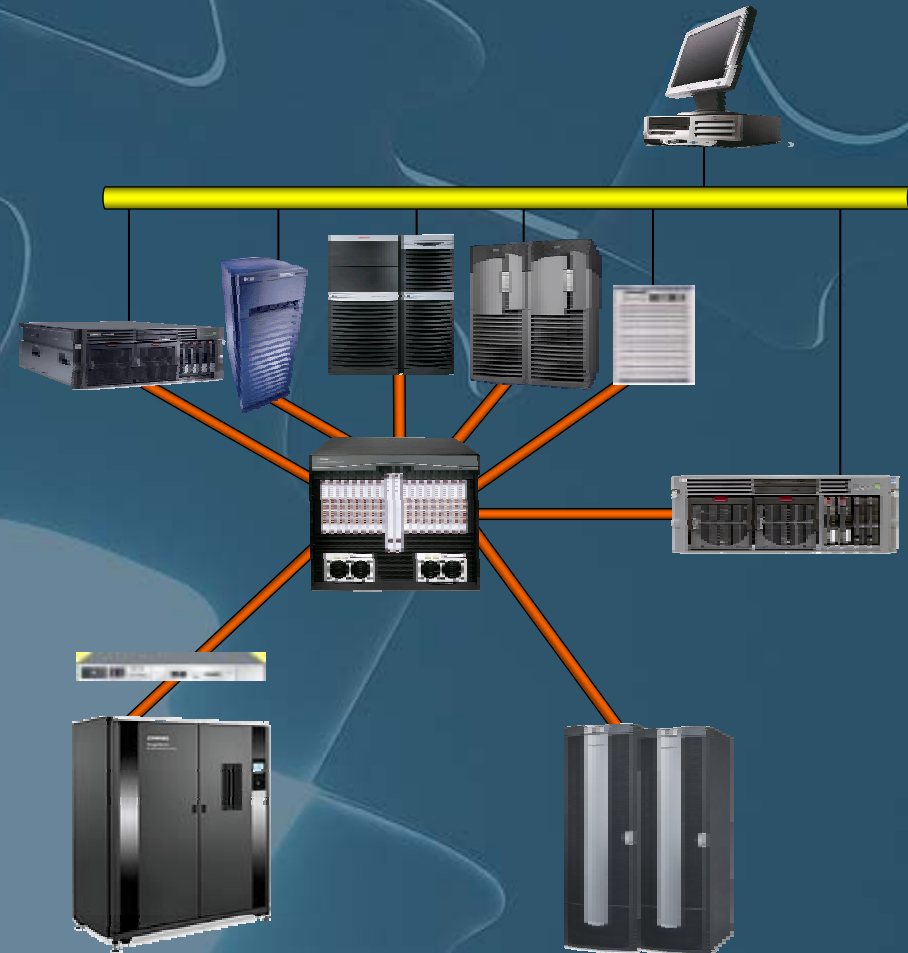
# Hardware

- Storage
  - High Availability
  - Proven track-record
  - Depends on criticality
  - Basic
    - Redundant Array of Inexpensive Disks- RAID
      - RAID Level 5



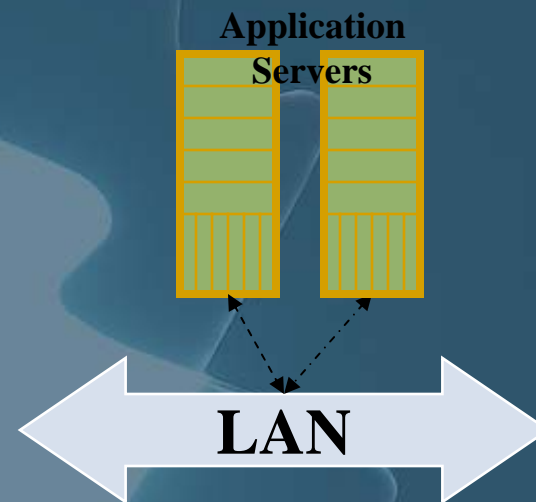
# Hardware

- Storage
  - Sophisticated
    - SAN
      - Ideal
      - Expensive



# Hard-Soft-Ware

- Redundancy/ Load Balanced
  - Application Server
  - Database Server





# Hard-Soft-Ware

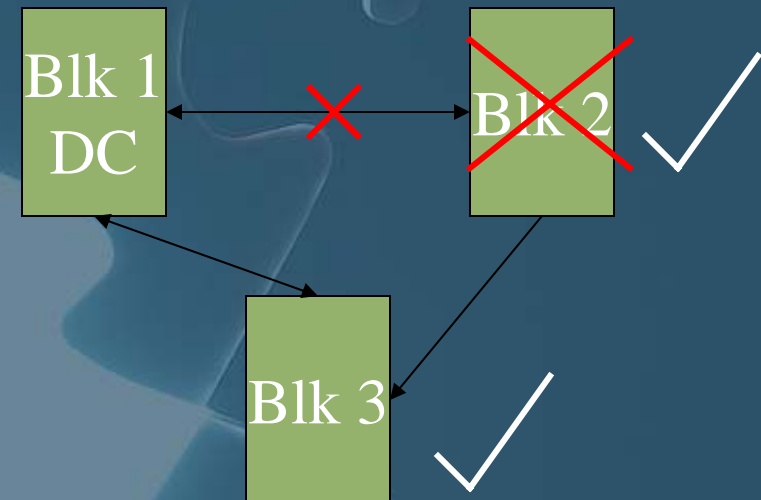
- Redundancy/ Load Balanced

- Networking


- Switches
- Connectivity

- Power

- UPS for an UPS



# Hard-Soft-Ware

- 
- Backup Policy
    - Log backup
      - Typically 15 mins
      - Disk to disk
    - Overall backup
      - End of the day
      - Disk to Disk to Tape
        - HD-HD-ALT



# H/W- IT Systems Aspect

- Network
  - Design addressing the extra-Bandwidth Requirements
  - Redundancy
- Disaster Recovery

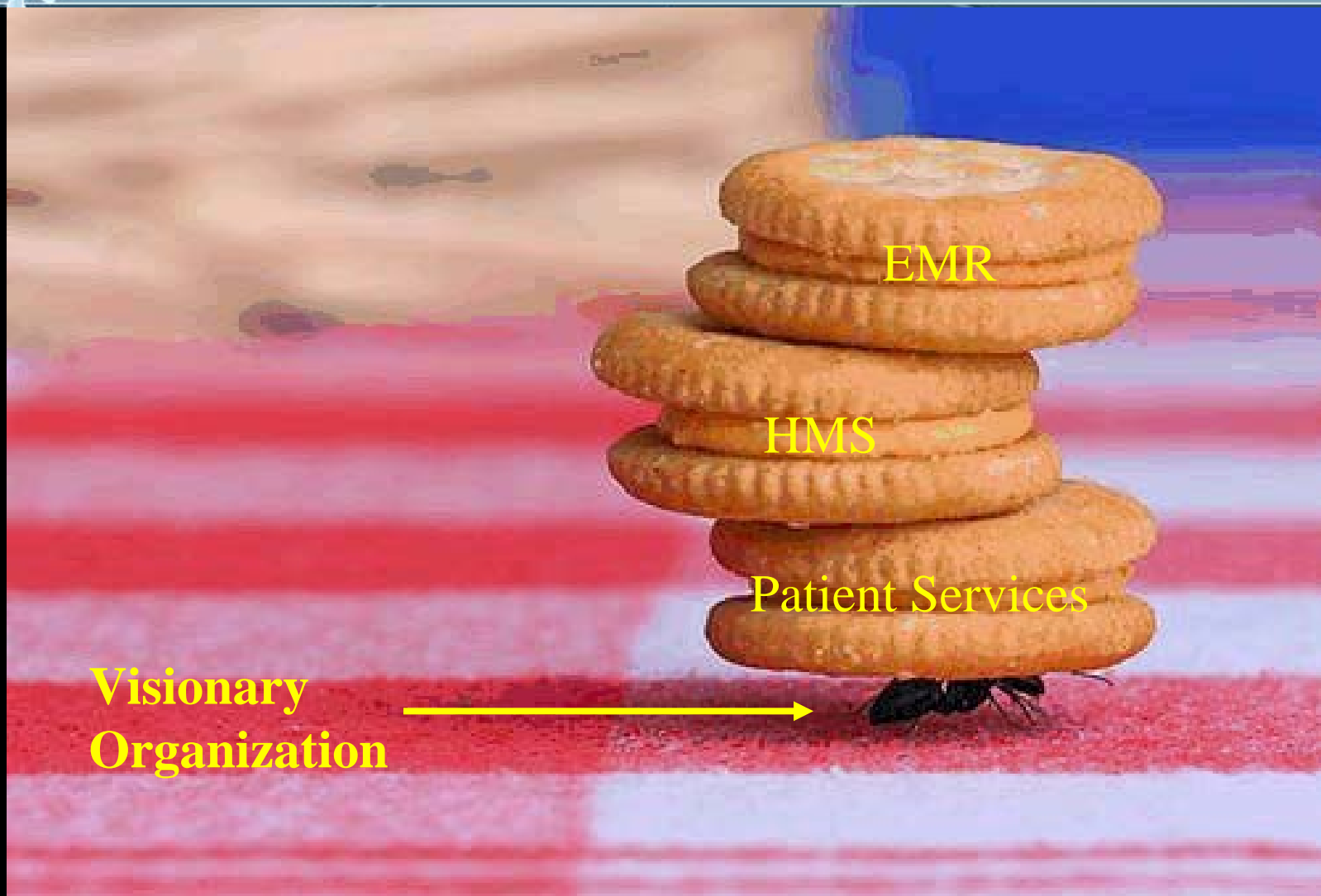


# When to go for EMR?

1. Starting a new clinic
2. Remodelling a old clinic
3. Adding a remote clinic
4. Availability of funds
5. Current billing or scheduling software needs updating
6. Concerns about the practice's ability to meet the Health care financing administration's billing guidelines and to provide appropriate legible documentation

# How to go about?

1. In-house/ Out-Sourced
2. Analysis of the current system
3. Depicting the required system
4. GAP!
5. Identifying the developers
6. Process of making it
7. IMPLEMENTATION (Plan & Execution)
8. Maintenance



EMR

HMS

Patient Services

**Visionary  
Organization**





A Sankara Nethralaya Presentation...

***Thank You!***



# Need?



**Need = Requirements + Expectations**



# Need

- Requirement
  - Medical Record (Physical)
- Expectations
  - Image Management
  - Direct Data Acquisition
  - Intuitive



# S/W- Clinical Aspect

- Data Interfaces
  - Other packages
  - Equipment
    - Slit Lamp Imaging, Fundus Imaging, HRA/ HRT/OCT/ GDx & others
    - Auto-Ref data, DBR/ Keratometer Values, Perimeter Data, etc
- Avoid dead data!
  - Documents as images
  - Images without any search-ability

# S/W- Clinical Aspect

- Standards
  - ANSI HISPP
  - ANSI HISB
  - CPRI
  - FESMCC
  - HIMA
  - HIMSS
  - HOST
  - MRI
  - NIST
  - WEDI
  - ANSI ASC X12
  - ASTM Committee E31
  - HL-7
  - HIBCC
  - IEEE
  - NCCLS
  - DICOM
  - NCPDP
  - NISO
  - NUBC
  - ACGIH
  - Facct
  - JCAHO
  - NCQA
  - URAC
- DHHS Data Council
- HISSB
- NCVHS
- CEN/TC 251
- EDIFACT
- ICE
- NAHDO
- NAPHSIS
- NASIRE
- NHIRC
- COSTART
- CPT-4
- HCPCS - HCFA
- ICD
- AICD-10 CM
- ICDH
- ICPC
- LOINC
- NDC
- SNOMED
- UMLS
- LTCCUDS
- MDS
- UACDS
- UHDDS



# S/W- Clinical Aspect

- Standards
- **CPT-4 - Current Procedural Terminology**
- Created and maintained by the American Medical Association, which holds the copyright. Required for reporting of outpatient procedures and physician services in the United States.



# How to purchase an EMR?

- Software not able to offer similar guarantees as Hardware companies
- Need a successful software company who can offer a long-term technical support and frequent updates.