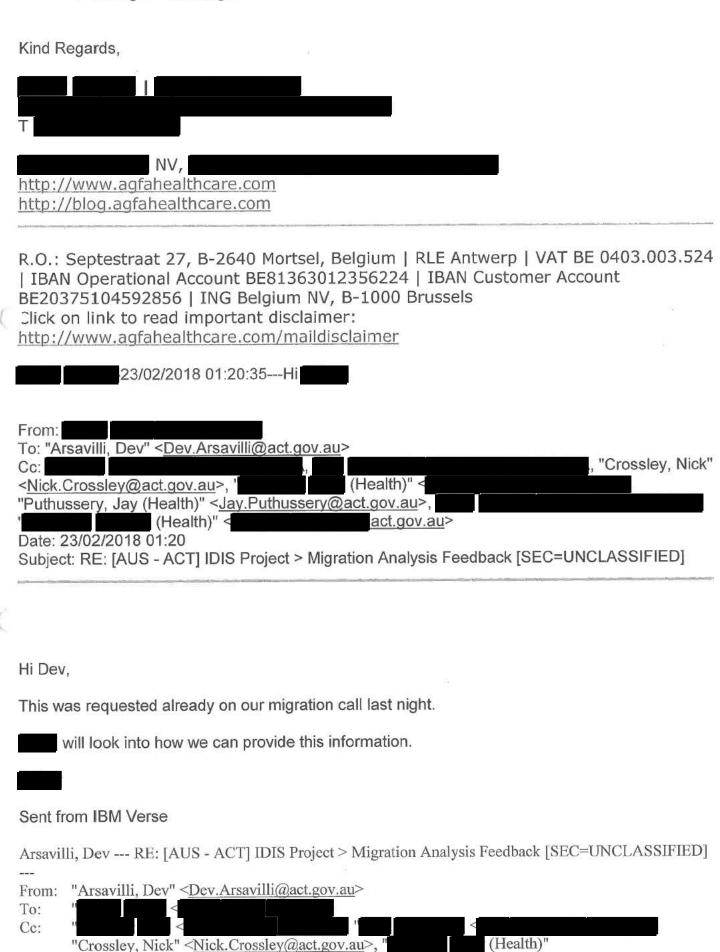
<0.A86E.gif> <1.2482.gif>



"Puthussery, Jay (Health)" < <u>Jay.Puthussery@act.gov.au</u> >, " Date: Fri, 23 Feb 2018 10:09 "Puthussery, Jay (Health)" < <u>Jay.Puthussery@act.gov.au</u> >, " (Health)" < <u>act.gov.au</u>
Subject:RE: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]
Hi
Could we get some stats on what was migrated this week during peak hours and off-peak hours? This will help us to go to Scott's team to determine the next batch.
Kind Regards,
Dev
Dev Arsavilli Project Manager Phone: 02 6174 8729 Mobile Email: Dev.Arsavilli@act.gov.au Future Capability and Governance Branch Digital Solutions Division Health Directorate ACT Government
2-6 Bowes Street, Phillip ACT GPO Box 825, Canberra ACT 2601 act.gov.au
From: [mailto] Sent: Thursday, 22 February 2018 7:49 PM
To: act.gov.au> Cc: Arsavilli@act.gov.au>; City of the alth of the act.gov.au act.gov.a
Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]
Hi All

An update on yesterdays status email.

HL7 migration

- The 17 orders with 0 byte attachments have now been migrated without the 0 byte attachment.
 - Correct attachments are still migrated towards EI and the linked reports also migrated.

DICOM migration

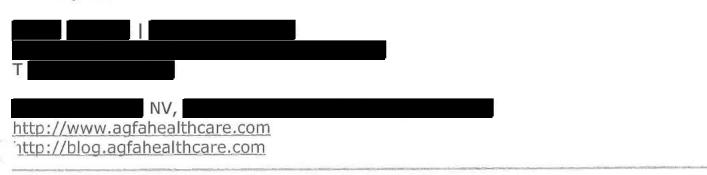
- 6791 studies with a full match (StudyUID + PID + AccNr) have been migrated towards EI
 - o 29 studies failed validation because the number of images in El is less then in the extracts (expected to be the 'soft delete' issue)
- 15 studies without HL7 data have not been migrated

- 1214 studies that need an accession number update are currently being migrated
- Performance status (as requested during the status meeting)

To do

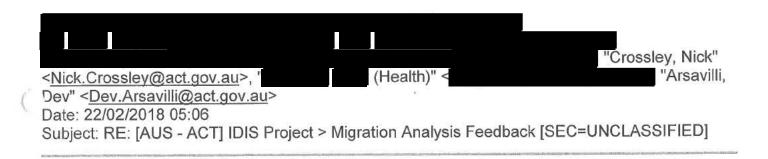
 Once the (FMG) migration is finished, provide a list with failed studies and/or validation errors.

Kind Regards,



R.O.: Septestraat 27, B-2640 Mortsel, Belgium | RLE Antwerp | VAT BE 0403.003.524 | IBAN Operational Account BE81363012356224 | IBAN Customer Account BE20375104592856 | ING Belgium NV, B-1000 Brussels Click on link to read important disclaimer:

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Hi

Thanks for the updates.

Responding to my action items from below

The 15 records in the DICOM extract do not have any entries in the RIS extract. These are the Studies that we have been discussing about. The given options were to migrate them as DICOM based images or create a corresponding RIS record for the same.

I have raised this question with the business and haven't had a decision yet. Could we migrate these studies as DICOM based images for this test cycle?

The blank/empty scanned documents can be ignored, I have asked Siemens to exclude them from the extract for the subsequent loads.

Could the orders be migrated ignoring the attachments for now?

Thanks,

IDIS Data Migra Mobile : Email:	ation Analyst - UCPH D act.gov.au	igital Solutions Program
From: [mailto:	E	
Sent: Wednesday, 21 February 2018 9:	52 PM	
To: <		
Cc: <	<	Crossley, Nick
< Nick. Crossley@act.gov.au>;	(Health) <	act.gov.au>;
(Health) <	<	7
Subject: [AUS - ACT] IDIS Project > Migr	ation Analysis Feedback [SI	EC=UNCLASSIFIED]

HL7 migration

Hi All,

Duplicate accession numbers

@ I agree, the correct numbers and all situations are now also mentioned below.

Test migration summary

the ORM migration to scheduling can be tested / executed based on the data in the AMT database

The HL7 test migration has completed (MFN/ADT/ORM/ORU) with an exception on 17 requested procedures.

The reason for this is a problem in the attachments. For +/- 84 attachments referenced in our current extract the

filesize is 0 bytes and not a valid tiff file (see screenshot). This is not accepted by EI and failes the complete

order during the valdiation.

Is their a way to exclude these files? Or, maybe they are an incorrect extract and they shouldn't be empty?

This morning we already updated out tool to detect this before sending the message to EI, but we still need to

mark the orders as failed at the end of the migration, because we couldn't migrate everything that was provided to us in the extracts.

Examples can easily be found on the share, we have 1050 files like this at the moment:

<2.42C6.gif>

DICOM migration

- The crosscheck against the orders in EI was executed and the studies have been marked for migration depending on their match with the orders in EI.
 - o 6774 studies have a full match (StudyUID + PID + AccNr)
 - o 1214 studies have an accession number with .01/.02 in the HL7 extract.
 @AII => In this case the accession number from the HL7 extracts needs to be used to update the DICOM headers, correct?
 - 17 studies have an order that was not migrated to El because of the attachment problem mentioned above

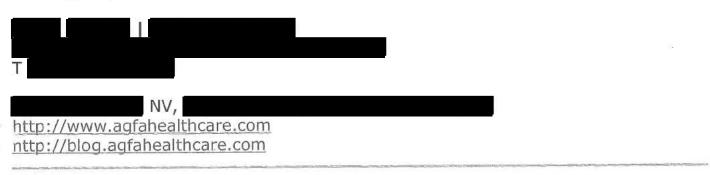
<3.21EC.gif>

 The migration for the batch 'MATCH_STUDYUID+PID+ACCNR' was started (with the amount of threads as agreed)

To do

- After currrent batch) Configure FlexMedGate (FMG) to update the accession numbers as agreed + execute the batch 'MATCH_STUDYUID+PID-ACCNR'
- ?) Check why 15 records in DICOM extract don't have an entry in HL7 extracts ? / Siemens ?) Have a look at the '0 bytes' attachments, extract problem or really something to ignore ?

Kind Regards,



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Date: 21/02/2018 07:56

Subject: Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi

I spoke with today and the 84 duplicate accession number is expected. It was agreed that the accession numbers in the PACS file would not be re-sequenced and would be left as is in the PACS. This would server as a way to determine those PACS studies that would need to be sent through FlexMedGate to have the DICOM tags updated to the new re-sequenced accession number? It this how the PACS studies with an altered accession number was to be handled?

Kind Regards,



http://www.agfahealthcare.com http://blog.agfahealthcare.com

<3.4288.jpeg>

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Date: 21/02/2018 12:26 AM

Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

So ... you guys aren't sleeping a lot :) ?

The extra file has been imported and the validation problems are solved now.

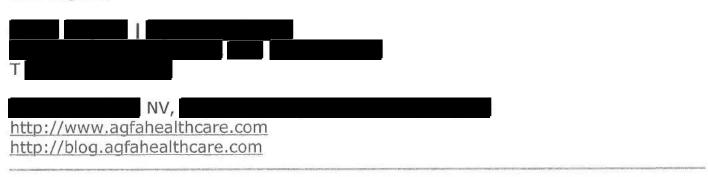
Executed steps after this:

- The ADT migration was executed and completed towards Scheduling & EI (over Rhapsody)
- The ORM migration was executed and completed towards EI
- The ORU migration was started (and should be finished way before the time you read this)
- The imported DICOM data was validated
 - 84 records have an accession number that is used on multiple records (These are ignored) (Examples:
- The HL7 <> DICOM crosscheck was updated and tested

What still needs to be done (tomorrow):

- Check failures on order migration (18 failed messages, this has a high change of being a bug in our validation)
- Execute the HL7 <> DICOM crosscheck once the HL7 migration is completed
- Execute the DICOM migration for the studies with an order in EI (that have validated)

Kind Regards,



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Date: 20/02/2018 12:39

Subject: Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi
Here is a doctors file containing the missing doctors. Please process using this also.
[attachment "RIS_MISSING_DOCTORS.txt" deleted by
Kind Regards,
T +61 3 9756 4645 F +61 7 3356 6683 M +
http://www.agfahealthcare.com http://blog.agfahealthcare.com
<6.4402.jpeg>
Click on link to read important disclaimer: http://www.agfahea/thcare.com/mai/disclaimer
From: To: Cc: Nick.Crossley@act.gov.au , "Crossley, Nick" Date: 20/02/2018 08:03 PM Subject: Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]
Hi,
This is the full list
[attachment "Missing_Physicians.txt" deleted by
Kind Regards,

Agfa HealthCare NV,

http://www.agfahealthcare.com http://blog.agfahealthcare.com

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Date: 20/02/2018 10:55

Subject: Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Can you provide a list of all the missing doctor codes?

Sent from my iPhone

On 20 Feb 2018, at 8:14 pm, wrote:

Hi All,

I have been working with the HL7 extracts set with the new RIS service.txt file.

Import / validation results:

- Physicians: All good
- Patients: All good
- Service Request: +/- 4000 records have a 'Requesting Physician ID' that is not in the Physician extract (examples:
- Request Proc: Ok, failed records are linked to failed service requests
- Reports: Ok, failed records are linked to failed service regeusts

To continue we will need an updated physician file that contains the missing data.

Kind Regards,

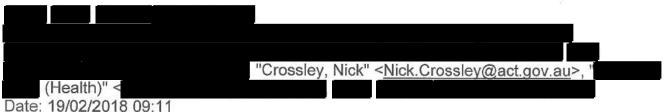


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19/02/2018 09:11:40---Hi All, I have been working on the HL7 test migration, but I have not been able to finish the test m



Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi All.

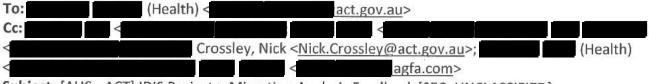
I have been working on the HL7 test migration, but I have not been able to finish the test migration.

The following steps have been executed:

- Removing all data from the EI DEV cluster (database and caches)
- Removing all data from the migration server database (HL7 and DICOM schema's)
- Import / validation of the HL7 extracts
 - Here I noticed the problem that was reported by Basically the HL7 service request file is a copy of the DICOM 'study' file.

Kind Regards,

	1120
Т	
NV,	
http://www.agfahealthcare.com http://blog.agfahealthcare.com	
nttp.//blog.agraneatricare.com	
R.O.: Septestraat 27, B-2640 Mortsel, Belgium RLE Antwerp VAT BE 04 IBAN Operational Account BE81363012356224 IBAN Customer Account BE20375104592856 ING Belgium NV, B-1000 Brussels Click on link to read important disclaimer: http://www.agfahealthcare.com/maildisclaimer	
(Health)"08/02/2018 04:29:04Hi The PatientID for the s 220480.	Study in RIS
"Crossley, Nick" <nick.crossley@act.gov.au>, '</nick.crossley@act.gov.au>	
(Health)" <	
Date: 08/02/2018 04:29 Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIF	FIED]
	WARRY OF WARRY OF THE PARTY OF
Hi	
The PatientID for the Study in RIS is	
The PatientID for the same study in PACS is It looks like the PatientID for this patient was merged from. The merge	seems to have
happened successfully in RIS, but not in PACS and hence the difference I will discuss this with the business to understand how a merge works and also analyse the d	ata for such
mismatches.	
I will get back to you with more details and we can then work out a solution for such studies	Ē.
Thanks,	
IDIS Data Migration Analyst - UCPH Digital Solutions Progra	m
Mobile : Email: act.gov.au	***
From: [mailto	
Sent: Tuesday, 6 February 2018 7:59 PM	



Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi,

After checking the 'Not visible in EI' studies that the images are indeed in EI (as the migration tools reported).

The problem is that they don't match up with the HL7 order with the same Study UID and EI has created a

'DICOM based' order with it's of Study UID.

<0.276E.gif>

HL7 extract:

<0.58B6.gif>

DICOM extract:

<0.6264.gif>

Would it be possible to check the Siemens system for this StudyUID and check what the Patient ID is ?

Maybe this patient is merged or updated somewhere during our process?

Kind Regards,



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Date: 05/02/2018 23:52 Subject: RE: ACTH IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]
Hi Below are the details for the sample set of studies :
XA multi frame
Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in Siemens PACS. AMT => 2 EI => 1 (1 frame) - 1 image and 1 Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in Siemens PACS. AMT => 5 EI => 4 (220 frames) - 4 images and 1 Exam Protocol sent from modality This will be discussed with Siemens, to identify the exam protocols and exclude them from the count of images for a Study
Partial migrated (AMT + El image count for reference):
AMT => 6 EI => 5 - Only 5 images exist for this Study UID not 6 AMT => 4 EI => 2 - Only 2 images exist for this Study UID not 4 This will also be discussed with Siemens, to identify the mismatch between the number indicated by the database and the actual number of images
Not visible in EI:
this Study UID AMT => 2 EI => null - 2 images exist for AMT => 2 EI => null - 2 images exist for AMT => 337 EI => null - 337 images exist for AMT => 337 EI => null - 337 images exist for this Study UID Could you please look into these, the images do exist for these studies? Let me know if you need any further details.

Regards,

| IDIS Data Migration Analyst - UCPH Digital Solutions Program
| Email: | Lact.gov.au
| From: | [mailto: | Sent: Tuesday, 30 January 2018 3:35 PM
| To: | (Health) <

(Health) <

act.gov.au>; Crossley, Nick < Nick.Crossley@act.gov.au>;



Subject: ACTH IDIS Project > Migration Analysis Feedback

Hi

Please see feedback below from following the analysis of the studies migrated so far. Could you please perform the checks as requested below and provide feedback to

[KD] - I took a closer look at the migrated studies with this as result:

- We know that the HL7 <> DICOM crosscheck didn't work as expected and we have some studies in the EI DEV that didn't have a migrated order in EI. This crosscheck will be tested on the 20% extract
- In total we had 7871 studies that had to be moved and 166 that had been marked as 'IGNORE' because of the issue with duplicate StudyUIDs (discussed on last call)
 - We had no failed moves (so all studies from Siemens at least moved something to EI)
 - 7825 studies have been migrated successfully and are validated (same amount of images for each StudyUID)
 - 46 studies have been migrated, but don't validate correctly (no error codes during migration received).

We have 3 types of problems:

- 5 XA studies don't validate because they are multiframe. In the extract we have the amount of instances as 'DICOM objects'. We always seem to get 1 object less from Siemens, but they are multiframe in EI, so hard to match up. Need to know correct amount in Siemens to be sure.
- 13 studies have images in EI, but the amount doesn't match up with the extracts.
 These are 'partial migrated', but maybe the number of images in the extract is just incorrect.
- 28 studies don't have any images in El

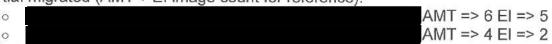
Could you ask the customer to check the actual amount of objects and/or images for these random

studies from the 46 studies that don't validate:

XA multiframe



Partial migrated (AMT + El image count for reference):



Not visible in EI:



Kind Regards,



Australia Pty Ltd. Unit 18, 52 Holker St, Silverwater NSW 2128

Australia

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21

Heland, Rebecca (Health)	
From: Sent: To: Cc: Subject: Attachments:	Monday, 26 February 2018 10:50 PM Arsavilli, Dev; Puthussery, Jay (Health); Crossley, Nick; (Health); (Health) Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED] Missing_patients_physicians.txt
Kind Regards,	
NV, http://www.com http://blog.agfahealthcare.com	
IBAN Customer Account BE203751045	Belgium RLE Antwerp VAT BE 0403.003.524 IBAN Operational Account BE81363012356224 92856 ING Belgium NV, B-1000 Brussels her: http://www.agfahealthcare.com/maildisclaimer
<pre><jay.puthussery@act.gov.au>, "Crossley, N Date: 26/02/2018 12:19 Subject: Re: [AUS - ACT] IDIS Project > Mig</jay.puthussery@act.gov.au></pre>	"Arsavilli, Dev" <dev.arsavilli@act.gov.au>, "Puthussery, Jay (Health)" lick" <nick.crossley@act.gov.au>, aration Analysis Feedback [SEC=UNCLASSIFIED]</nick.crossley@act.gov.au></dev.arsavilli@act.gov.au>
Hi Can you provide a list of the posent from my iPhone	atient and doctor ID's that are missing and I will follow this up tomorrow.
On 26 Feb 2018, at 10:17 pm,	<pre>wrote:</pre>
	into AMT, but we are missing a lot of patients and physicians in ld the data from the previous extracts we seem to be missing
Can someone have a look at this of extracts?	and create new (full) patient and doctor extracts for this set
Kind Regards,	
T NV, http://www.agfahealthcare.com http://blog.agfahealthcare.com	

R.O.: Septestraat 27, B-2640 Mortsel, Belgium RLE Antwerp VAT BE 0403.003.524 IBAN Operational Account BE81363012356224 IBAN Customer Account BE20375104592856 ING Belgium NV, B-1000 Brussels Click on link to read important disclaimer: http://www.agfahealthcare.com/maildisclaimer 26/02/2018 11:11:34Hi Thanks for the feedback. If you are happy with the completion of the first batch, the sec
, "Arsavilli, Dev" < Dev. Arsavilli@act.gov.au >, "Puthussery, Jay (Health)" < Jay. Puthussery@act.gov.au >, "Crossley, Nick" < Nick. Crossley@act.gov.au >, " (Health)" < act.gov.au >, " act.gov.au >, " Date: 26/02/2018 11:11 Subject: Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]
Hi Table
Thanks for the feedback. If you are happy with the completion of the first batch, the second batches data is located on the migration in the following location:
F:\ACT_DATA\20180223\RIS_PACS_Extract_23Feb2018\
Can we look at processing this second batch?
Kind Regards,
T +61 3 9756 4645 F +61 7 3356 6683 M +61 409 932 687
http://www.agfahealthcare.com http://blog.agfahealthcare.com
<0.12BA.jpeg>
Click on link to read important disclaimer: http://www.agfahealthcare.com/maildisclaimer
26/02/2018 07:23:56 PMHi All, DICOM migration status The test DICOM migration completed on Saturday. The migration status
"Arsavilli, Dev" < Dev. Arsavilli@act.gov.au >, "Puthussery, Jay (Health)" < Jay. Puthussery@act.gov.au >, "Crossley, Nick" < Nick. Crossley@act.gov.au >, "Date: 26/02/2013 07:23 PM Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]
LE AU

Hi All,

DICOM migration status

The test DICOM migration completed on Saturday. The migration status file is attached below to give a basic idea of the performance that was measured.

We didn't receive any migration errors while moving the data towards EI, but we do have 43 studies that fail validation. Ask discussed before, this is probably

all linked to an incorrect number of images in the extracts linked to the soft-deletion on Siemens side.

Performance

[attachment "[AUS - ACT] DICOM Migration Status.xlsx" deleted by

Failed validation

Attached you can find the list of the studies that have failed validation. This list can be used to verify if the reason for the failure is really the amount of objects that is wrong due to the soft-delete count.

[attachment "[AUS - ACT] DICOM Migration - Validation failed list - v1.xlsx" deleted by AWGEJ/AGFA]

Kind Regards,



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23/02/2018 07:45:56---Hi All, DICOM migration status The migration of the studies that need an accession number update is

"Arsavilli, Dev" <<u>Dev.Arsavilli@act.gov.au</u>>, "Puthussery, Jay (Health)" <<u>Jay.Puthussery@act.gov.au</u>>, Date: 23/02/2018 07:45

Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi All.

DICOM migration status

The migration of the studies that need an accession number update is still running and is expected take another 44 hours without interruptions. These studies are slower because they all have large amounts of images.

[attachment "[AUS - ACT] DICOM Migration Status.xlsx" deleted by Migration performance

With the limited amount of threads that are allowed to be used, we will need to make a decision on what to do with these test batches (use more threads or make the test sets smaller).

Also, we still have not performed any performance tests, so at this point we have no idea of what performance is possible for the production migration. These test batches seem like the perfect time to execute tests with higher thread counts.

By default we start with 5 threads and go up to 15 or 20 threads to find the point where the performance stops increasing with more threads. Then we pick a thread count 2 to 5 threads less then that number. (Depending on the time frame the customer has to complete the migration)

Studies migrated during peak and off-peak hours

The provided excel file contains an overview of the migration including the amount of studies / images

that have been migrated per hour. The chart on the first tab, is build from data on the second tab in the file.

In total we have migrated:

- 6228 studies / 819.223 images between 22h00 and 05h00
- 966 studies / 345.037 images between 05h00 and 22h00

<0.A86E.gif> <1.2482.gif>

Kind Regards,



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23/02/2018 01:20:35---Hi

From:
To: "Arsavilli, Dev" < Dev.Arsavilli@act.gov.au >
Cc: " "Puthussery, Jay (Health)" < Jay.Puthussery@act.gov.au >, " (Health)"
| "Puthussery, Jay (Health)" < Jay.Puthussery@act.gov.au >, " (Health)" |
Date: 23/02/2018 01:20

Subject: PF: (All IS: ACT UNIS Project > Migration Application Facethook (CFC-UNIC ACCUSED))

Subject: RE: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi Dev,

This was requested already on our migration call last night.

will look into how we can provide this information.

Sent from IBM Verse

Arsavilli, Dev --- RE: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED] --- From: "Arsavilli, Dev" < a second second

Date: Fri, 23 Feb 2018 10:09

Subject:RE: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi

Could we get some stats on what was migrated this week during peak hours and off-peak hours?

This will help us to go to Scott's team to determine the next batch.

Kind Regards,

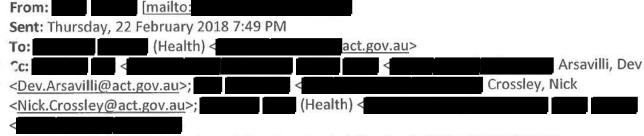
Dev

Dev Arsavilli | Project Manager

Phone: 02 6174 8729 | Mobile | Email: Dev.Arsavilli@act.gov.au

Future Capability and Governance Branch | Digital Solutions Division | Health Directorate | ACT Government

2-6 Bowes Street, Phillip ACT | GPO Box 825, Canberra ACT 2601 | act.gov.au



Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi All.

An update on yesterdays status email.

HL7 migration

 The 17 orders with 0 byte attachments have now been migrated without the 0 byte attachment.

Correct attachments are still migrated towards El and the linked reports also migrated.

DICOM migration

- 6791 studies with a full match (StudyUID + PID + AccNr) have been migrated towards El
 - o 29 studies failed validation because the number of images in El is less then in the extracts (expected to be the 'soft delete' issue)
- 15 studies without HL7 data have not been migrated
- 1214 studies that need an accession number update are currently being migrated
- Performance status (as requested during the status meeting)

To do

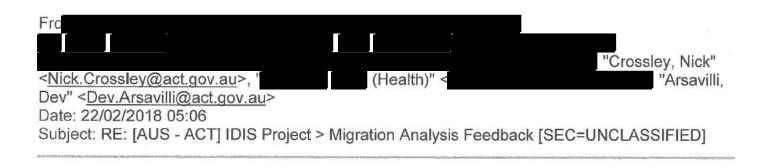
Once the (FMG) migration is finished, provide a list with failed studies and/or validation errors.

Kind Regards,

NV,
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Hi

Thanks for the updates.

Responding to my action items from below

The 15 records in the DICOM extract do not have any entries in the RIS extract. These are the Studies that we have been discussing about. The given options were to migrate them as DICOM based images or create a corresponding RIS record for the same.

I have raised this question with the business and haven't had a decision yet. Could we migrate these studies as DICOM based images for this test cycle?

The blank/empty scanned documents can be ignored, I have asked Siemens to exclude them from the extract for the subsequent loads.

Could the orders be migrated ignoring the attachments for now?

Thanks,

Mobile :	IDIS Data Migrat Email:	ion Analyst - UCPH Di act.gov.au	igital Solutions Program
From:	[mailto esday, 21 February 2018 9:52	DM	
To: Cc:	esday, 21 February 2018 9:52		Crossley, Nick

<nick.crossley@act.gov.au>;</nick.crossley@act.gov.au>	(Health) <	act.gov.au>;	
(Health) <	<		
Subject: [AUS - ACT] IDIS Project > Migrati	ion Analysis Feedback [SE	EC=UNCLASSIFIED]	

Hi All.

HL7 migration

- Duplicate accession numbers
 - @Nick, I agree, the correct numbers and all situations are now also mentioned below.
- Test migration summary

the ORM migration to scheduling can be tested / executed based on the data in the AMT database

The HL7 test migration has completed (MFN/ADT/ORM/ORU) with an exception on 17 requested procedures.

The reason for this is a problem in the attachments. For +/- 84 attachments referenced in our current extract the

filesize is 0 bytes and not a valid tiff file (see screenshot). This is not accepted by EI and failes the complete

order during the valdiation.

Is their a way to exclude these files? Or, maybe they are an incorrect extract and they shouldn't be empty?

This morning we already updated out tool to detect this before sending the message to El, but we still need to

mark the orders as failed at the end of the migration, because we couldn't migrate everything that was provided to us in the extracts.

Examples can easily be found on the share, we have 1050 files like this at the moment:

<2.42C6.gif>

DICOM migration

- The crosscheck against the orders in EI was executed and the studies have been marked for migration depending on their match with the orders in EI.
 - o 6774 studies have a full match (StudyUID + PID + AccNr)
 - 1214 studies have an accession number with .01/.02 in the HL7 extract.
 - @AII => In this case the accession number from the HL7 extracts needs to be used to update the DICOM headers, correct?
 - 17 studies have an order that was not migrated to EI because of the attachment problem mentioned above
 - 15 studies have a study uid that is not in the HL7 extracts

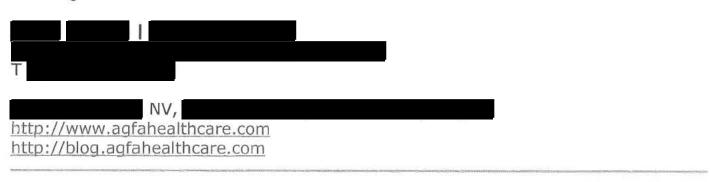
<3.21EC.gif>

 The migration for the batch 'MATCH_STUDYUID+PID+ACCNR' was started (with the amount of threads as agreed)

To do

- After currrent batch) Configure FlexMedGate (FMG) to update the accession numbers as agreed + execute the batch 'MATCH_STUDYUID+PID-ACCNR'
- () Check why 15 records in DICOM extract don't have an entry in HL7 extracts
- (Siemens ?) Have a look at the '0 bytes' attachments, extract problem or really something to ignore ?

Kind Regards,



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Hi

I spoke with today and the 84 duplicate accession number is expected. It was agreed that the accession numbers in the PACS file would not be re-sequenced and would be left as is in the PACS. This would server as a way to determine those PACS studies that would need to be sent through FlexMedGate to have the DICOM tags updated to the new re-sequenced accession number? It this how the PACS studies with an altered accession number was to be handled?

Kind Regards,

T +61 3 9756 4645	F +61 7 3356 6683 M +61	

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<3.4288.jpeg>

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From:	
To:	
Co:	"Crossley, Nick"
< <u>Nick.Crossley@act.gov.au</u> >, "	(I) 14-23 - 2015 - 2015
< act.gov.au>, " (Health)" <	

Date: 21/02/2018 12:26 AM

Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

So ... you guys aren't sleeping a lot :) ?

The extra file has been imported and the validation problems are solved now.

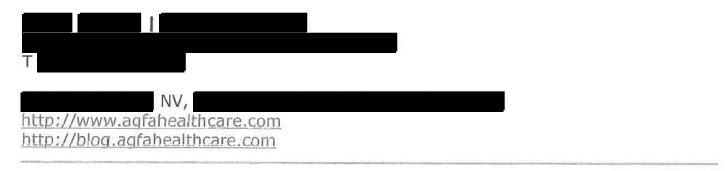
Executed steps after this:

- The ADT migration was executed and completed towards Scheduling & El (over Rhapsody)
- The ORM migration was executed and completed towards El
- The ORU migration was started (and should be finished way before the time you read this)
- The imported DICOM data was validated
 - 84 records have an accession number that is used on multiple records (These are ignored) (Examples:
- The HL7 <> DICOM crosscheck was updated and tested

What still needs to be done (tomorrow):

- Check failures on order migration (18 failed messages, this has a high change of being a bug in our validation)
- Execute the HL7 <> DICOM crosscheck once the HL7 migration is completed
- Execute the DICOM migration for the studies with an order in EI (that have validated)

Kind Regards,



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Here is a doctors file containing the missing doctors. Please process using this also.

[attachment "RIS_MISSING_DOCTORS.txt" deleted by

Kind Regards,

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<6.4402.jpeg>

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Nick.Crossley@act.gov.au , " Nick.Crossley@act.gov.au , " Nick.Crossley@act.gov.au , " Act.gov.au, " Date: 20/02/2018 08:03 PM Subject: Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=U]	"Crossley, Nick" NCLASSIFIED]
Hi,	
This is the full list	
[attachment "Missing_Physicians.txt" deleted by	ı
Kind Regards,	
Agfa HealthCare NV, http://www.agfahealthcare.com http://blog.agfahealthcare.com	

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Date: 20/02/2018 10:55

Subject: Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi

Can you provide a list of all the missing doctor codes?

Sent from my iPhone

On 20 Feb 2018, at 8:14 pm, wrote:

Hi All,

I have been working with the HL7 extracts set with the new RIS_service.txt file.

Import / validation results:

- Physicians: All good
- · Patients: All good
- Service Request: +/- 4000 records have a 'Requesting Physician ID' that is not in the Physician extract (examples: 4574812J,0227762B,0271098J,409984AW,0271098J)
- Request Proc: Ok, failed records are linked to failed service regeusts
- · Reports: Ok, failed records are linked to failed service requests

To continue we will need an updated physician file that contains the missing data.

Kind Regards,



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19/02/2018 09:11:40---Hi All, I have been working on the HL7 test migration, but I have not been able to finish the test m

To: ' (Health)" <

"Crossley, Nick" < Nick. Crossley@act.gov.au >, "

(Health)" <

Date: 19/02/2018 09:11

Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi All,

I have been working on the HL7 test migration, but I have not been able to finish the test migration.

The following steps have been executed:

- Removing all data from the EI DEV cluster (database and caches)
- Removing all data from the migration server database (HL7 and DICOM schema's)
- Import / validation of the HL7 extracts
 - Here I noticed the problem that was reported by in another email.
 Basically the HL7 service request file is a copy of the DICOM 'study' file.

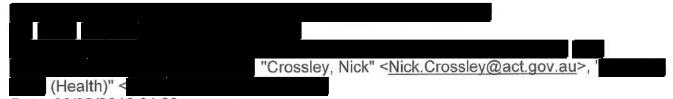
Kind Regards,



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" (Health)" ---08/02/2018 04:29:04---Hi The PatientID for the Study in RIS is 220480.



Date: 08/02/2018 04:29

Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

The PatientID for the Study in RIS is The PatientID for the same study in PACS is It looks like the PatientID for this patient was merged from the looks like t
I will get back to you with more details and we can then work out a solution for such studies.
Thanks,
IDIS Data Migration Analyst - UCPH Digital Solutions Program Email: act.gov.au
From: [mailto] Sent: Tuesday, 6 February 2018 7:59 PM To: (Health) < act.gov.au > (Health) < (Health) < act.gov.au > (Health
Hi,
After checking the 'Not visible in EI' studies that the images are indeed in EI (as the migration tools reported). The problem is that they don't match up with the HL7 order with the same Study UID and EI has created a 'DICOM based' order with it's of Study UID.
<0.276E.gif> HL7 extract:
<0.58B6.gif>
DICOM extract:
<0.6264.gif>
Would it be possible to check the Siemens system for this StudyUID and check what the Patient ID is ? Maybe this patient is merged or updated somewhere during our process ?
Kind Regards,

T NV, http://www.agfahealthcare.com

http://blog.agfahealthcare.com

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ćrom: "	(Health)" <	act.gov.au>	
To:			
Cc: "Crossley, Nic	k" < Nick. Crossley@act.gov.	au>,	9
	, :		
Date: 05/02/2018	23:52		
Subject: RE: ACT	H IDIS Project > Migration A	nalysis Feedback [SEC=UN	CLASSIFIED1

Hi Below are the details for the sample set of studies :

XA multi frame

Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in Siemens PACS.

AMT => 2 EI => 1 (1 frame) - 1 image and 1

Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in Siemens PACS.

AMT => 5 EI => 4 (220 frames) - 4 images

and 1 Exam Protocol sent from modality

This will be discussed with Siemens, to identify the exam protocols and exclude them from the count of images for a Study

Partial migrated (AMT + EI image count for reference):

for this Study UID not 6

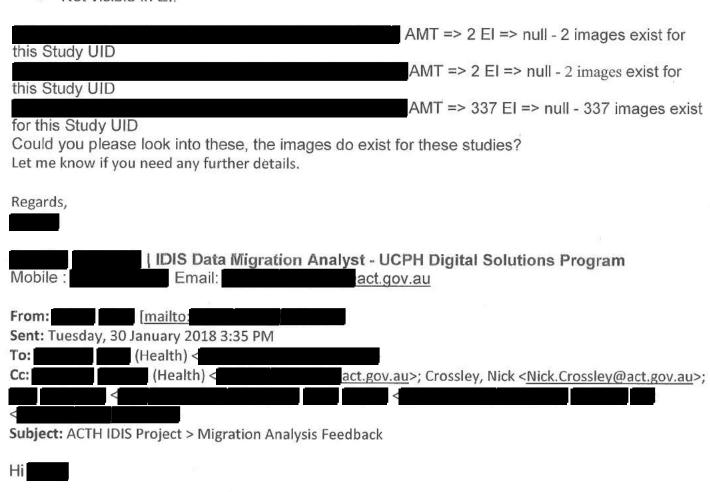
AMT => 6 EI => 5 - Only 5 images exist

AMT => 4 EI => 2 - Only 2 images exist

for this Study UID not 4

This will also be discussed with Siemens, to identify the mismatch between the number indicated by the database and the actual number of images

Not visible in FI:



[KD] - I took a closer look at the migrated studies with this as result:

you please perform the checks as requested below and provide feedback to

 We know that the HL7 <> DICOM crosscheck didn't work as expected and we have some studies in the EI DEV that didn't have a migrated order in EI. This crosscheck will be tested on the 20% extract

Please see feedback below from following the analysis of the studies migrated so far. Could

- In total we had 7871 studies that had to be moved and 166 that had been marked as 'IGNORE' because of the issue with duplicate StudyUIDs (discussed on last call)
 - We had no failed moves (so all studies from Siemens at least moved something to EI)
 - 7825 studies have been migrated successfully and are validated (same amount of images for each StudyUID)
 - 46 studies have been migrated, but don't validate correctly (no error codes during migration received).

We have 3 types of problems:

- 5 XA studies don't validate because they are multiframe. In the extract we have the amount of instances as 'DICOM objects'. We always seem to get 1 object less from Siemens, but they are multiframe in EI, so hard to match up. Need to know correct amount in Siemens to be sure.
- 13 studies have images in EI, but the amount doesn't match up with the extracts.

These are 'partial migrated', but maybe the number of images in the extract is just incorrect.

28 studies don't have any images in El

Could you ask the customer to check the actual amount of objects and/or images for these random

studies from the 46 studies that don't validate:

XA multiframe

 AMT => 2 EI => 1 (1 frame)
 AMT => 5 EI => 4 (220 frames)

 Partial migrated (AMT + EI image count for reference):

 AMT => 6 EI => 5
 AMT => 4 EI => 2

 Not visible in EI:

 AMT => 2 EI => null
 AMT => 2 EI => null
 AMT => 337 EI => null

Kind Regards,



Australia Pty Ltd. Unit 18, 52 Holker St, Silverwater NSW 2128

Australia

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Heland, Rebecca (Health)

From:

Sent:

Monday, 26 February 2018 9:12 PM

To:

Cc:

(Hoalth)

Arsavilli, Dev; Puthussery, Jay (Health); Crossley, Nick;

(Health); (Health)

Subject:

Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi

Thanks for the feedback. If you are happy with the completion of the first batch, the second batches data is located on the migration in the following location:

F:\ACT DATA\20180223\RIS PACS Extract 23Feb2018\

Can we look at processing this second batch?

Kind Regards,

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, "Arsavilli, Dev" <Dev.Arsavilli@act.gov.au>, "Puthussery, Jay (Health)" <Jay.Puthussery@act.gov.au>,
A, "Crossley, Nick" <Nick.Crossley@act.gov.au>,

Date: 26/02/2018 07:23 PM

Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi All,

DICOM migration status

The test DICOM migration completed on Saturday. The migration status file

is attached below to give a basic idea of the performance that was measured.

We didn't receive any migration errors while moving the data towards EI, but we do have 43 studies that fail validation. Ask discussed before, this is probably all linked to an incorrect number of images in the extracts linked to the soft-deletion on Siemens side.

Performance

[attachment "[AUS - ACT] DICOM Migration Status.xlsx" deleted by

Failed validation

Attached you can find the list of the studies that have failed validation. This list can be used to verify if the reason for the failure is really the amount of objects that is wrong due to the soft-delete count.

[attachment "[AUS - ACT] DICOM Migration - Validation failed list - v1.xlsx" deleted by

Kind Regards,



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From: AXKQB/AGFA
To: Arthur NAWVR/AGFA@AGFA
Cc: AXRKB/AGFA@AGFA, "Arsavilli, Dev" < Dev. Arsavilli@act.gov.au> "Puthusserv...Jay (Health)" < Jav Puthusserv@act.gov.au>, AWGE_I/AGFA@AGFA, "Crossley, Nick" < Nick Crossley@act.gov.au>, (Health)" < AXKQB/AGFA@AGFA
Date: 23/02/2018 07:45
Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi All,

DICOM migration status

The migration of the studies that need an accession number update is still running and is expected take another 44 hours without interruptions. These studies are slower because they all have large amounts of images.

[attachment "[AUS - ACT] DICOM Migration Status.xlsx" deleted by Migration performance

With the limited amount of threads that are allowed to be used, we will need to make a decision on what to do with these test batches (use more threads or make the test sets smaller).

Also, we still have not performed any performance tests, so at this point we have no idea of what performance is possible for the production migration. These test batches seem like the perfect time to execute tests with higher thread counts.

By default we start with 5 threads and go up to 15 or 20 threads to find the point where the performance stops increasing with more threads. Then we pick a thread count 2 to 5 threads less then that number. (Depending on the time frame the customer has to complete the migration)

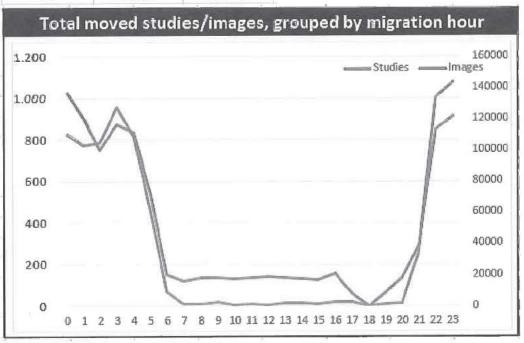
· Studies migrated during peak and off-peak hours

The provided excel file contains an overview of the migration including the amount of studies / images that have been migrated per hour. The chart on the first tab, is build from data on the second tab in the file.

In total we have migrated:

- 6228 studies / 819.223 images between 22h00 and 05h00
- 966 studies / 345.037 images between 05h00 and 22h00

STUDIES/IMAGES MOVED PER HOUR				
Hour of day	Studies	Images		
0	825	136454		
1	771	120167		
2	786	100466		
3	953	116391		
4	814	111389		
5	453	71226		
6	69	20088		
7	13	16.372		
8	13	18.176		
9	19	18.030		
10	8	17.635		
11	11	18.223		
12	8	18.662		
13	16	18.341		
14	17	17.599		
15	13	16.672		
16	22	20.766		
17	19	7847		
18	0	0		
19	10	8.646		
20	14	18108		
21	261	38.646		
22	1.005	112899		
23	1.074	121457		



Kind Regards,



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To: "Arsavilli, Dev" <dev.arsavilli@act.gov.au></dev.arsavilli@act.gov.au>	
"Crossley, Nick" <nick.crossley@act.gov.au>, act.gov.au>, "Puthussery, Jay (Health)" <jay.puthussery@act.gov.au>, act.gov.au></jay.puthussery@act.gov.au></nick.crossley@act.gov.au>	(Health)" (Health)"
Date: 23/02/2018 01:20 Subject: RE: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]	18

Hi Dev,

This was requested already on our migration call last night.

will look into how we can provide this information.

Sent from IBM Verse

Arsavilli, Dev --- RE: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED] ---From: "Arsavilli, Dev" <Dev.Arsavilli@act.gov.au> To: Cc: "Crossley, Nick" <Nick.Crossley@act.gov.au>, ' "Puthussery, Jay (Health)" <Jay.Puthussery@act.gov.au>, ' (Health)" act.gov.au> Date: Fri, 23 Feb 2018 10:09

Subject:RE: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi

Could we get some stats on what was migrated this week during peak hours and off-peak hours? This will help us to go to Scott's team to determine the next batch.

Kind Regards,

Dev

				1 17
Dev Arsavilli Project Manager				
Phone: 02 6174 8729 Mobile	Email: Dev	.Arsavilli@	act.gov.au	
Future Capability and Governance Bra Government	nch Digital Solu	itions Divis	ion Health Di	rectorate ACT
2-6 Bowes Street, Phillip ACT GPO Bo	x 825, Canberra A	CT 2601	act.gov.au	
From: [mailto				
Sent: Thursday, 22 February 2018 7:49	PM			
To: (Health) <	A CONTRACTOR OF THE PARTY OF TH	ov.au>		
Cc: <		<		Arsavilli, Dev
<dev.arsavilli@act.gov.au>;</dev.arsavilli@act.gov.au>	<		Crossley	, Nick
<nick.crossley@act.gov.au>;</nick.crossley@act.gov.au>	(Health) <			
<				
Subject: [AUS - ACT] IDIS Project > Mig	ration Analysis Fe	edback [SE	C=UNCLASSIFIE	[D]

Hi All,

An update on yesterdays status email.

HL7 migration

 The 17 orders with 0 byte attachments have now been migrated without the 0 byte attachment.

Correct attachments are still migrated towards El and the linked reports also migrated.

DICOM migration

- 6791 studies with a full match (StudyUID + PID + AccNr) have been migrated towards EI
 - 29 studies failed validation because the number of images in EI is less then in the extracts (expected to be the 'soft delete' issue)
- 15 studies without HL7 data have not been migrated
- 1214 studies that need an accession number update are currently being migrated
- Performance status (as requested during the status meeting)

To do

Once the (FMG) migration is finished, provide a list with failed studies and/or validation errors.

Kind Regards,



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		"Crossley, Nick"
< Nick. Crossley@act.gov.au>, '	(Health)" <	"Arsavilli,
Dev" < Dev. Arsavilli@act.gov.au>		
Date: 22/02/2018 05:06		
Subject: RE: [AUS - ACT] IDIS Project :	Migration Analysis Feed	back [SEC=UNCLASSIFIED]

Hi

Thanks for the updates.

Responding to my action items from below

The 15 records in the DICOM extract do not have any entries in the RIS extract. These are the Studies that we have been discussing about. The given options were to migrate them as DICOM based images or create a corresponding RIS record for the same.

I have raised this question with the business and haven't had a decision yet. Could we migrate these studies as DICOM based images for this test cycle?

The blank/empty scanned documents can be ignored, I have asked Siemens to exclude them from the extract for the subsequent loads.

Could the orders be migrated ignoring the attachments for now?

Thanks,

IDIS	Data Migration A	nalyst - UCPH	Digital Solutio	ns Program	
Mobile : Em	nail:	act.gov.a	<u>u</u>	e (* ± 5. ▼ . 58-5	
From: [mailto:					
Sent: Wednesday, 21 Februa	ary 2018 9:52 PM				
To:		I			
Cc:		<		Crossley,	
<pre>< Crossley@act.gov.au></pre>	;	(Health) <	act.	gov.au>;	
(Health) <		<			
Subject: [ALIS - ACT] IDIS Pro	viect > Migration A	nalysis Foodback	[SEC-LINCLASSIE	ED]	

Hi All,

HL7 migration

- Duplicate accession numbers
 - agree, the correct numbers and all situations are now also mentioned below.
- Test migration summary

the ORM migration to scheduling can be tested / executed based on the data in the AMT database

The HL7 test migration has completed (MFN/ADT/ORM/ORU) with an exception on 17 requested procedures.

The reason for this is a problem in the attachments. For +/- 84 attachments referenced in our current extract the

filesize is 0 bytes and not a valid tiff file (see screenshot). This is not accepted by EI and failes the complete

order during the valdiation.

Is their a way to exclude these files? Or, maybe they are an incorrect extract and they shouldn't be empty?

This morning we already updated out tool to detect this before sending the message to El, but we still need to

mark the orders as failed at the end of the migration, because we couldn't migrate everything that was provided to us in the extracts.

Examples can easily be found on the share, we have 1050 files like this at the moment:

۰ ∭ « eim	igration 01. act.g	ov.au > attachment_da	ata\$ ▶ Attachments ▶ Scan_d	ocuments		v ċ
	Name		Date modified	Туре		Size
	SCAN	_683.tif	20/01/2018 9:53 AM	TIFF image		0 KB
ıds	SCAN	_916.tif	20/01/2018 9:53 AM	TIFF image		0 KB
laces	SCAN	_922.tif	20/01/2018 9:53 AM	TIFF image		0 KB
	SCAN	_919.tif	20/01/2018 9:53 AM	TIFF image		0 KB
'AMTSERVE	SCAN	_972.tif	20/01/2018 9:53 AM	TIFF image		0 KB
	SCAN_	_1017.tif	20/01/2018 9:53 AM	TIFF image	8	0 KB

DICOM migration

- The crosscheck against the orders in EI was executed and the studies have been marked for migration
 - depending on their match with the orders in El.
 - 6774 studies have a full match (StudyUID + PID + AccNr)
 - o 1214 studies have an accession number with .01/.02 in the HL7 extract.
 @AII => In this case the accession number from the HL7 extracts needs to be used to update the DICOM headers, correct?
 - 17 studies have an order that was not migrated to EI because of the attachment problem mentioned above
 - 15 studies have a study uid that is not in the HL7 extracts

ਜ਼ਿ count ੴ	🔳 migration_status 🎨	▼ batch 🗞
1,214	NOT_STARTED	MATCH_STUDYUID+PID-ACCNR
6,774	NOT_STARTED	MATCH_STUDYUID+PID+ACCNR
17	NOT_STARTED	NO_ORDER_HL7_FAILED
15	NOT_STARTED	NOT_IN_HL7_EXTRACTS

The migration for the batch 'MATCH STUDYUID+PID+ACCNR' was started (with the amount of threads as agreed)

To do

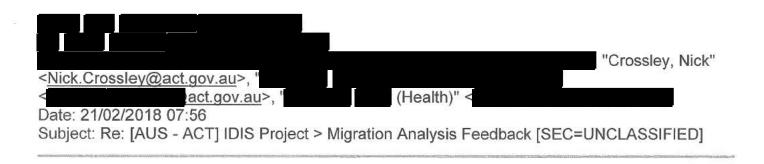
- After currrent batch) Configure FlexMedGate (FMG) to update the accession numbers as agreed + execute the batch 'MATCH STUDYUID+PID-ACCNR'
- ?) Check why 15 records in DICOM extract don't have an entry in HL7 extracts ? / Siemens ?) Have a look at the '0 bytes' attachments, extract problem or really something to ignore?

Kind Regards,



R.O.: Septestraat 27, B-2640 Mortsel, Belgium | RLE Antwerp | VAT BE 0403.003.524 | IBAN Operational Account BE81363012356224 | IBAN Customer Account BE20375104592856 | ING Belgium NV, B-1000 Brussels Click on link to read important disclaimer:

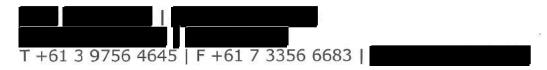
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Hi

I spoke with today and the 84 duplicate accession number is expected. It was agreed that the accession numbers in the PACS file would not be re-sequenced and would be left as is in the PACS. This would server as a way to determine those PACS studies that would need to be sent through FlexMedGate to have the DICOM tags updated to the new re-sequenced accession number? It this how the PACS studies with an altered accession number was to be handled?

Kind Regards,



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Date: 21/02/2018 12:26 AM

Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

So ... you guys aren't sleeping a lot :) ?

The extra file has been imported and the validation problems are solved now.

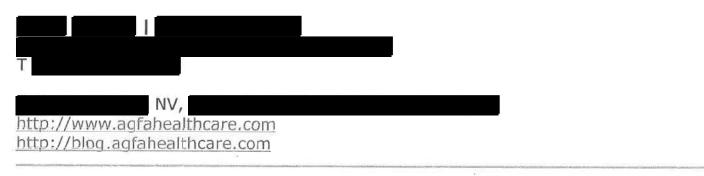
Executed steps after this:

- The ADT migration was executed and completed towards Scheduling & EI (over Rhapsody)
- The ORM migration was executed and completed towards El
- The ORU migration was started (and should be finished way before the time you read this)
- The imported DICOM data was validated
 - 84 records have an accession number that is used on multiple records (These are ignored) (Examples:
- The HL7 <> DICOM crosscheck was updated and tested

What still needs to be done (tomorrow):

- Check failures on order migration (18 failed messages, this has a high change of being a bug in our validation)
- Execute the HL7 <> DICOM crosscheck once the HL7 migration is completed
- Execute the DICOM migration for the studies with an order in EI (that have validated)

Kind Regards,



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Hi

Here is a doctors file containing the missing doctors. Please process using this also.

[attachment "RIS MISSING DOCTORS.txt" deleted by

Kind Regards,

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From: To: , "Crossley, Nick" Cc: <Nick.Crossley@act.gov.au>, act.gov.au>, " (Health)" <

Date: 20/02/2018 08:03 PM

Subject: Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi,

This is the full list

[attachment "Missing_Physicians.txt" deleted by

Kind Regards,

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Date: 20/02/2018 10:55

Subject: Re: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Can you provide a list of all the missing doctor codes?

Sent from my iPhone

On 20 Feb 2018, at 8:14 pm,

Hi All,

I have been working with the HL7 extracts set with the new RIS_service.txt file.

Import / validation results:

- Physicians: All good
- Patients: All good
- Service Request: +/- 4000 records have a 'Requesting Physician ID' that is not in the Physician extract (examples:
- · Request Proc: Ok, failed records are linked to failed service requests
- Reports: Ok, failed records are linked to failed service regeusts

To continue we will need an updated physician file that contains the missing data.

Kind Regards,

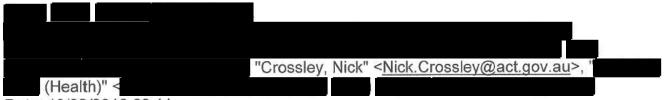


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Kevin 19/02/2018 09:11:40---Hi All, I have been working on the HL7 test migration, but I nave not been able to finish the test m



Date: 19/02/2018 09:11

Subject: [AUS - ACT] IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi All,

I have been working on the HL7 test migration, but I have not been able to finish the test migration.

The following steps have been executed:

- Removing all data from the El DEV cluster (database and caches)
- Removing all data from the migration server database (HL7 and DICOM schema's)
- Import / validation of the HL7 extracts
 - Here I noticed the problem that was reported by in another email.
 Basically the HL7 service request file is a copy of the DICOM 'study' file.

Kind Regards,

