

Warm Regards,
 [REDACTED]

From: [REDACTED] [REDACTED] (Health)
Sent: Wednesday, 10 January 2018 9:40 AM
To: [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au> Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au>; Garbuio, Paul (Health) <Paul.Garbuio@act.gov.au>;
 [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au>; Griffiths, Jessica (Health) <Jessica.Griffiths@act.gov.au>
Subject: RE: Data Migration questions for RIS PACS system admin team [SEC=UNCLASSIFIED]

Good Morning.

One more for discussion: RIS-PACS for space availability for 300Gb.

Warm Regards,
 [REDACTED]

From: [REDACTED] [REDACTED] (Health)
Sent: Tuesday, 9 January 2018 4:48 PM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au>;
 Garbuio, Paul (Health) <Paul.Garbuio@act.gov.au>; [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au>; Griffiths,
 Jessica (Health) <Jessica.Griffiths@act.gov.au>
Subject: RE: Data Migration questions for RIS PACS system admin team [SEC=UNCLASSIFIED]

All,

Notes and actions from today's meeting. Please add anything I missed (including actions for Scott).

Cancelled procedures with no associated Study images but have valid results

In general these should be legitimate, but should usually have a valid cancellation reason.

Action: SS to provide samples for RISPACS to check. Possibly include breakdown of cancellation reasons.

Action: TP to include in Data Migration Audit specification.

Completed procedures with no associated Studies or results

Uncertain as to cause or validity of these cases.

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These would normally be valid. Should be associated with specific modalities only.

Can check radiographer notes – should indicate reason for lack of image.

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Would expect to migrate as-is.

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Can be very common, though mainly should date from 2010 – 2012.

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Study details in PACS with no corresponding accession number or StudyUID details in RIS

These are unexpected; not sure of the possible causes:

Possibly due to PACS-generated accession numbers that have not been properly corrected by linking back to the order. Calvary?

Could be duplicate images that can be discarded during migration.

Action: SS to provide full list for RISPACS to check.

Action: TP to include in Data Migration Audit specification.

Completed procedures with valid study details in RIS but no corresponding images in PACS

Could these be images that have been deleted from PACS but not cleared up in the RIS?

Action: SS to provide samples for RISPACS to check.

Action: TP to include in Data Migration Audit specification.

Another previously issue not previously identified was raised during the meeting:

Hidden Images:

Should these be migrated?

How do we identify?

Other items discussed:

Multiple Accession numbers against the same Study UID; only one accession number in the PACS for that study:

Usually valid with the additional accession numbers linked to a 'primary'.

Recommendation: That when records migrated, drop study UID from all accession number except the one linked in the PACS. All accession numbers can still be found, but image only available via primary number or patient search.

Action: SS to provide samples for RISPACS to check.

Action: TP to include in Data Migration Audit specification. A summary report to be produced as part of Migration for ongoing BAU support.

Multiple Study UIDs against the same Accession number:

These are likely to be valid; can arise where a combined procedure (e.g. foot and ankle) has included separate studies. Usually only a few records in each case, but there are outliers with many studies.

Recommendation: That when records migrated, amend the accession number to ensure uniqueness by appending a sequence number (.nnn). All occurrences of the accession number will be returned by a search on the original number.

Action: SS to provide samples for RISPACS to check, especially of the outlier cases.

Action: TP to include in Data Migration Audit specification.

██████████ | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: 02 6174 8768 | Mobile: ██████████ | Email: ██████████@act.gov.au

Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government

Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | www.act.gov.au

From: Barrett, Scott (Health)

Sent: Thursday, 21 December 2017 11:44 AM

To: ██████████ (Health) <██████████>

Cc: ██████████ (Health) <██████████@act.gov.au>; ██████████ (Health) <██████████@act.gov.au>

Subject: RE: Data Migration questions for RIS PACS system admin team [SEC=UNCLASSIFIED]

Hi ██████████

No problem at all, we are all back on deck by that point.

Looking at the questions, they all look like plausible scenarios within the system that are associated to poor work practice or administrative errors.

Thanks

Scott

Scott Barrett | Manager

Direct Phone: 02 6174 8039 | Direct Email: scott.barrett@act.gov.au

Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: DSD.DIS@act.gov.au

Technology Operations Branch | Digital Solutions Division | Health Directorate | ACT Government

Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | act.gov.au

From: [REDACTED] (Health)

Sent: Thursday, 21 December 2017 11:37 AM

To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>

Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>

Subject: FW: Data Migration questions for RIS PACS system admin team [SEC=UNCLASSIFIED]

Scott,

Can we request some time with your team early in the New Year to discuss a few questions we have around the validity of the data we are getting from Siemens for migration? The below are the short forms of the questions; we can fully explain each one at the time.

We also have some questions around the use of some of the RIS user fields; if your team has any information on what is contained in them we can discuss that as well.

Any time you are available from the 8th would be great.

Thanks

[REDACTED]
 Phone: 02 6174 8768 | Mobile: [REDACTED] | Email: [REDACTED]
 Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
 Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | www.act.gov.au

From: [REDACTED] (Health)

Sent: Thursday, 21 December 2017 11:13 AM

To: [REDACTED] (Health) <[REDACTED]>

Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>

Subject: Data Migration questions for RIS PACS system admin team [SEC=UNCLASSIFIED]

Hi [REDACTED]

Below are a few questions that I can think of

Are the below scenarios valid

Cancelled procedures with no associated Study images but have valid results?

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Study details in PACS with no corresponding accession number or StudyUID details in RIS?

Completed procedures with valid study details in RIS but no corresponding images in PACS?

Regards,

[REDACTED]
 Mobile: [REDACTED] | Email: [REDACTED]@act.gov.au

Heland, Rebecca (Health)

From: [REDACTED] (Health)
Sent: Wednesday, 10 January 2018 1:06 PM
To: Barrett, Scott (Health)
Cc: [REDACTED] (Health); Garbuio, Paul (Health); [REDACTED] (Health); Griffiths, Jessica (Health); [REDACTED] (Health)
Subject: RE: Data Migration questions for RIS PACS system admin team [SEC=UNCLASSIFIED]
Attachments: RISPACS_DataIssues_samples.xlsx

Hi Scott,
 Attached is a sheet with data samples for each of the scenarios below.
 Let me know if you need any further details.
 Thanks,
 [REDACTED]

Mobile: [REDACTED] Email: [REDACTED]@act.gov.au

From: [REDACTED] (Health)
Sent: Tuesday, 9 January 2018 4:48 PM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; Garbuio, Paul (Health) <Paul.Garbuio@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; Griffiths, Jessica (Health) <Jessica.Griffiths@act.gov.au>
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These are unexpected; not sure of the possible causes:

Scott

Scott Barrett | Manager

Direct Phone: 02 6174 8039 | Direct Email: scott.barrett@act.gov.au

Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: DSD.DIS@act.gov.au

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[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: 02 6174 8768 | Mobile: [REDACTED] | Email: [REDACTED]

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Sent: Thursday, 21 December 2017 11:13 AM

To: [REDACTED] (Health) <[REDACTED]>

Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>

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Regards,

[REDACTED] | IDIS Data Migration Analyst - UCPH Digital Solutions Program

Mobile: [REDACTED] | Email: [REDACTED]@act.gov.au

Heland, Rebecca (Health)

From: Griffiths, Jessica (Health)
Sent: Wednesday, 10 January 2018 11:20 AM
To: [REDACTED] (Health); Barrett, Scott (Health)
Cc: [REDACTED] (Health); [REDACTED] (Health); Garbuio, Paul (Health); [REDACTED] (Health)
Subject: RE: Data Migration questions for RIS PACS system admin team [SEC=UNCLASSIFIED]

Hi Scott,

Your actions in red below.

Thanks,
 Jess

Jess Griffiths | RIS Admin Project Officer – Integrated Diagnostic Imaging Solution Project
 Phone: (02) 61748730 | Email: Jessica.Griffiths@act.gov.au
 Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
 Canberra Hospital, Garran ACT | PO Box 11, Woden ACT 2606 | act.gov.au

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These would normally be valid. Should be associated with specific modalities only.

Can check radiographer notes – should indicate reason for lack of image.

Procedure code will often be 'consultation'

Would expect to migrate as-is.

Action: SB to follow up with Mark- possible options: migrate as is, migrate with a standard report "no report at time of conversion" or Radiologist report.

Action: SS to provide samples for RISPACS to check. Possibly include breakdown of procedure codes and/or modalities.

Action: TP to include in Data Migration Audit specification.

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These are unexpected; not sure of the possible causes:

Possibly due to PACS-generated accession numbers that have not been properly corrected by linking back to the order. Calvary?

Could be duplicate images that can be discarded during migration.

Action: SB to look into.

Action: SS to provide full list for RISPACS to check.

Action: TP to include in Data Migration Audit specification.

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██████

██████ | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: 02 6174 8768 | Mobile: ████████ | Email: ██████████

Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government

Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | www.act.gov.au

From: Barrett, Scott (Health)

Sent: Thursday, 21 December 2017 11:44 AM

To: ████████ (Health) <████████████████████>

Cc: ████████ (Health) <████████████████████@act.gov.au>; ████████ (Health) <████████████████████@act.gov.au>

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To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>

Cc: [REDACTED] (Health) <[\[REDACTED\]@act.gov.au](mailto:[REDACTED]@act.gov.au)>; [REDACTED] (Health) <[\[REDACTED\]@act.gov.au](mailto:[REDACTED]@act.gov.au)>

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[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: 02 6174 8768 | Mobile: [REDACTED] | Email: [REDACTED]

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Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | www.act.gov.au

From: [REDACTED] (Health)

Sent: Thursday, 21 December 2017 11:13 AM

To: [REDACTED] (Health) <[\[REDACTED\]@act.gov.au](mailto:[REDACTED]@act.gov.au)>

Cc: [REDACTED] (Health) <[\[REDACTED\]@act.gov.au](mailto:[REDACTED]@act.gov.au)>

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Regards,

[Redacted signature block]

Mobile : [Redacted] Email: [Redacted] [act.gov.au](mailto:[Redacted]@act.gov.au)

Heland, Rebecca (Health)

From: [REDACTED] <[REDACTED]>
Sent: Tuesday, 9 January 2018 6:00 PM
To: [REDACTED]
Cc: [REDACTED] (Health); [REDACTED] (Health); Crossley, Nick; [REDACTED]
Subject: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Hi,

These are the correct details for the AMT server.

Kind Regards,

[REDACTED]
 [REDACTED]
 [REDACTED]

Holiday alerts:

- 18/12/2017 until 21/12/2017 only 50% available
- 22/12/2017 until 29/12/2017 not available

[REDACTED] NV, [REDACTED]
<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>

[REDACTED]
 [REDACTED] Nick.Crossley@act.gov.au
 Date: 09/01/2018 00:06
 Subject: Re: FW: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Hi [REDACTED]

Both devices need to be added to Siemens PACS.

I have copied the AMT servers details from [REDACTED] email below and have also included the hostname/FQDN. The IP address he provided appears to be incorrect. [REDACTED] is the IP address/host I have provided below the correct server?

AMT

- AE Title: AMT
- IP Address: eimigration01.act.gov.au (10.24.2.38)
- Port: 104
-

Kind Regards,

[REDACTED]
 [REDACTED]
 T +61 3 9756 4645 | F +61 7 3356 6683 | M [REDACTED]

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

Click on link to read important disclaimer: <http://www.agfahealthcare.com/maildisclaimer>

[REDACTED]
[REDACTED]
Date: 09/01/2018 07:15 AM

Subject: FW: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

[REDACTED]

I note that Chris hasn't copied this to you, though you are probably aware of the detail since Chris has spoken with you. Can you work with [REDACTED] to get things set up ready for a test of the image transfer and then we will look to schedule with Chris.

Thanks

[REDACTED]

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program
Phone: 02 6174 8768 | Mobile: [REDACTED] | Email: [REDACTED]@act.gov.au
Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | www.act.gov.au

From: Pearce, Christopher (Health)

Sent: Monday, 8 January 2018 4:41 PM

To: [REDACTED] (Health) <[REDACTED]>

Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; Barrett, Scott (Health) <Scott.Barrett@act.gov.au>; Alam, Azwer (Health) <Azwer.Alam@act.gov.au>

Subject: RE: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Hi [REDACTED]

I have spoken to [REDACTED] & [REDACTED] to clarify what the AMT device is below.

[REDACTED] has said only the EI needs to be setup in the Siemens PACS.

I have setup the EI in the Siemens PACS as per below details to allow Q/R to be performed.

Let me know if the AMT also needs to be setup after all – I will need to be supplied with the AMT hostname/FQDN for this.

The details for the Siemens PACS:

Hostname: PACS-SDM

FQDN: pacs-sdm.rispacs.siemens

AET: PACSSDM

PORT: 2002

IP Address: 147.212.128.97

When you are ready to attempt a Q/R of images I would recommend that we arrange a mutual time for this so that I can check the Siemens PACS logs in real-time and we can troubleshoot any issues.

Primary culprit for DICOM communication blocks - ? Has the Medical Imaging Firewall configured to allow the EI to query/ PACS to return the images to EI?

Regards,

Chris

Chris Pearce | PACS Administrator

Direct Phone: 02 61747961 | Direct Email: Christopher.Pearce@act.gov.au

Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: DSD.DIS@act.gov.au

Technology Operations Branch | Digital Solutions Division | Health Directorate | ACT Government

Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | act.gov.au

From: Barrett, Scott (Health)

Sent: Monday, 8 January 2018 2:33 PM

To: Alam, Azwer (Health) <Azwer.Alam@act.gov.au>; Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>

Cc: [REDACTED] (Health) <[REDACTED]>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>

Subject: FW: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Gents,

Please can you assist [REDACTED] with the below request.

Thanks

Scott

Scott Barrett | Manager

Direct Phone: 02 6174 8039 | Direct Email: scott.barrett@act.gov.au

Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: DSD.DIS@act.gov.au

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Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | act.gov.au

From: [REDACTED] (Health)

Sent: Monday, 8 January 2018 2:30 PM

To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>

Cc: Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>

Subject: FW: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Scott,

Does your team have the information on setting up connections to the Siemens DICOM image store as mentioned below by [REDACTED] from Agfa? My understanding is that the Agfa connection points need to be defined in Siemens and the Siemens equivalent provided to Agfa, but my level of knowledge here is precisely zero so will take your advice on whether this needs to go to Siemens for resolution.

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: 02 6174 8768 | Mobile: [REDACTED] | Email: [REDACTED]

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To: [REDACTED] (Health) <[REDACTED]@act.gov.au>

Cc: [REDACTED] <[REDACTED]>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]>

Subject: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Hi [REDACTED]

The HL7 data has been migrated for the provided period.

For the DICOM migration I have only executed the validation of the files. I don't think I have received the actual DICOM connection information for the Siemens PACS to direct my C-MOVE migration requests to.

To be sure, I'll add the AMT and EI DICOM details again so that they can also be checked/created in Siemens:

AMT

- AE Title: AMT
- IP Address: 10.69.32.20
- Port: 104

EI

- AE Title: EIDEV_PRIORS
- IP Address: eidc1devcs.act.gov.au (10.24.2.66)
- Port: 104

The 46 reports that didn't pass validation failed, because they are linked to the 46 StudyUIDs in req proc that failed to validate. These failed because of the duplicate StudyUID.

Kind Regards,

[REDACTED]
[REDACTED]
T [REDACTED]

Holiday alerts:

- 18/12/2017 until 21/12/2017 only 50% available
- 22/12/2017 until 29/12/2017 not available

[REDACTED] NV, [REDACTED]
<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>

[REDACTED] "Crossley, Nick"
<Nick.Crossley@act.gov.au>, [REDACTED] (Health)" <[REDACTED]@act.gov.au>
Date: 20/12/2017 01:24
Subject: RE: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Hi [REDACTED]
Thanks for the feedback.

Just a quick confirmation, has HL7 and DICOM been migrated to Dev EI. We see numbers for the RIS data (Patients, Orders and Reports), but not for Studies..

Report: 46 linked to a failed reference in Req Proc. Are these report records missing a reference in requested procedure because the requested procedure records with non-unique StudyUIDs have been excluded from the load??

Thanks,

Mobile : [REDACTED] | Email: [REDACTED]@act.gov.au

From: [REDACTED] (Health)

Sent: Wednesday, 20 December 2017 11:16 AM

To: [REDACTED] (Health) <[REDACTED]@act.gov.au>

Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>

Subject: RE: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Thanks [REDACTED]

That looks like a pretty good outcome. If [REDACTED] needs any additional information on specific records we'll come back to you.

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: 02 6174 8768 | Mobile: [REDACTED] | Email: [REDACTED]

Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | www.act.gov.au

From: [REDACTED] [mailto:[REDACTED]]

Sent: Tuesday, 19 December 2017 8:23 PM

[REDACTED] Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>

Subject: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Hi All,

I have imported the received extracts into our tools, a summary below.

HL7

Validation results:

- Physician: No file, so I created a dummy physician
- Patients: All good
- Service Request: All good
- Requested Proc: 46 StudyUID not unique (known issue)
- Report: 46 linked to a failed reference in Req Proc
- Attachments: No file provided

Migration to EI:

<Nick.Crossley@act.gov.au>

Date: 19/12/2017 07:00

Subject: RIS PACS Extract [SEC=UNCLASSIFIED]

Hi [REDACTED]

Below are the details for the extract handed over:

Service Request, Requested Procedure, and Report: The extract contains data for a 20 day period from the 01/Jan/2013 to 20/Jan/2013

Where a study is associated to multiple linked Accession numbers, no modifications have been implemented yet, therefore Study UIDs will not be unique in the Requested Procedure file.

RIS has multiple accession numbers with the same study, but PACS has the study associated to one of the accession numbers only. Need to discuss this further with AGFA to find a resolution for the StudyUIDs to be unique in the RequestedProcedures file.

Some procedures are missing a StudyUID but have an associated report, questions will be raised with Siemens to clarify its validity. (62 records)

Some procedures with valid StudyUIDs have no associated reports, this will be confirmed with Siemens too. (4 records)

Some studies in RIS have no corresponding records in PACS, this will be discussed with Siemens. (119 records)

Blank study and series descriptions have been defaulted to 'Unknown'

There were some records with a blank series_number, this will be raised with Siemens, but for now they have been defaulted to 0.

Thanks,

[REDACTED]

[REDACTED] | IDIS Data Migration Analyst - UCPH Digital Solutions Program

Mobile : [REDACTED] Email: [REDACTED]@act.gov.au

This email, and any attachments, may be confidential and also privileged. If you are not the intended recipient, please notify the sender and delete all copies of this transmission along with any attachments immediately. You should not copy or use it for any purpose, nor disclose its contents to any other person.

Heland, Rebecca (Health)

From: [REDACTED] <[REDACTED]>
Sent: Tuesday, 9 January 2018 10:07 AM
To: [REDACTED] (Health); [REDACTED]
Cc: [REDACTED] (Health); Crossley, Nick
Subject: Re: FW: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Hi [REDACTED]

Both devices need to be added to Siemens PACS.

I have copied the AMT servers details from [REDACTED] email below and have also included the hostname/FQDN. The IP address he provided appears to be incorrect. [REDACTED] is the IP address/host I have provided below the correct server?

AMT

- AE Title: AMT
- IP Address: eimigration01.act.gov.au (10.24.2.38)
- Port: 104
-

Kind Regards,

[REDACTED]
 [REDACTED]
 T +61 3 9756 4645 | F +61 7 3356 6683 | [REDACTED]

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

Click on link to read important disclaimer: <http://www.agfahealthcare.com/maildisclaimer>

From: [REDACTED]
 [REDACTED]
 Date: 09/01/2018 07:15 AM
 Subject: FW: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

[REDACTED]

I note that Chris hasn't copied this to you, though you are probably aware of the detail since Chris has spoken with you. Can you work with [REDACTED] to get things set up ready for a test of the image transfer and then we will look to schedule with Chris.

Thanks

[REDACTED]

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program
 Phone: 02 6174 8768 | Mobile: [REDACTED] | Email: [REDACTED]
 Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
 Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | www.act.gov.au

From: Pearce, Christopher (Health)
Sent: Monday, 8 January 2018 4:41 PM

To: ██████████ (Health) <██████████>
Cc: ██████████ (Health) <██████████@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; Barrett, Scott (Health) <Scott.Barrett@act.gov.au>; Alam, Azwer (Health) <Azwer.Alam@act.gov.au>
Subject: RE: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Hi ██████████

I have spoken to ██████████ & Nick to clarify what the AMT device is below.

██████████ has said only the EI needs to be setup in the Siemens PACS.

I have setup the EI in the Siemens PACS as per below details to allow Q/R to be performed.

Let me know if the AMT also needs to be setup after all – I will need to be supplied with the AMT hostname/FQDN for this.

The details for the Siemens PACS:

Hostname: PACS-SDM
 FQDN: pacs-sdm.rispacs.siemens
 AET: PACSSDM
 PORT: 2002
 IP Address: 147.212.128.97

When you are ready to attempt a Q/R of images I would recommend that we arrange a mutual time for this so that I can check the Siemens PACS logs in real-time and we can troubleshoot any issues.

Primary culprit for DICOM communication blocks - ? Has the Medical Imaging Firewall configured to allow the EI to query/ PACS to return the images to EI?

Regards,

Chris

Chris Pearce | PACS Administrator
 Direct Phone: 02 61747961 | Direct Email: Christopher.Pearce@act.gov.au
 Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: DSD.DIS@act.gov.au
 Technology Operations Branch | Digital Solutions Division | Health Directorate | ACT Government
 Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | act.gov.au

From: Barrett, Scott (Health)
Sent: Monday, 8 January 2018 2:33 PM
To: Alam, Azwer (Health) <Azwer.Alam@act.gov.au>; Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>
Cc: ██████████ (Health) <██████████> ██████████ (Health) <██████████@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>
Subject: FW: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Gents,

Please can you assist ██████████ with the below request.

Thanks

Scott

Scott Barrett | Manager
 Direct Phone: 02 6174 8039 | Direct Email: scott.barrett@act.gov.au
 Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: DSD.DIS@act.gov.au
 Technology Operations Branch | Digital Solutions Division | Health Directorate | ACT Government
 Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | act.gov.au

From: ██████████ (Health)
Sent: Monday, 8 January 2018 2:30 PM

To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>
Subject: FW: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Scott,

Does your team have the information on setting up connections to the Siemens DICOM image store as mentioned below by [REDACTED] from Agfa? My understanding is that the Agfa connection points need to be defined in Siemens and the Siemens equivalent provided to Agfa, but my level of knowledge here is precisely zero so will take your advice on whether this needs to go to Siemens for resolution.

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program
 Phone: 02 6174 8768 | Email: [REDACTED]
 Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
 Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | www.act.gov.au

From: [REDACTED] [mailto:[REDACTED]]
Sent: Wednesday, 20 December 2017 5:41 PM
To: [REDACTED] (Health) <[REDACTED]@act.gov.au>
Cc: [REDACTED] <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>
Subject: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Hi [REDACTED]

The HL7 data has been migrated for the provided period.

For the DICOM migration I have only executed the validation of the files. I don't think I have received the actual DICOM connection information for the Siemens PACS to direct my C-MOVE migration requests to.

To be sure, I'll add the AMT and EI DICOM details again so that they can also be checked/created in Siemens:

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The 46 reports that didn't pass validation failed, because they are linked to the 46 StudyUIDs in req proc that failed to validate. These failed because of the duplicate StudyUID.

Kind Regards,

[REDACTED]
 T [REDACTED]

Holiday alerts:

- 18/12/2017 until 21/12/2017 only 50% available
- 22/12/2017 until 29/12/2017 not available

From: [REDACTED] [mailto:[REDACTED]]
 Sent: Tuesday, 19 December 2017 8:23 PM
 To: [REDACTED] (Health) <[REDACTED]@act.gov.au>
 Cc: [REDACTED] <[REDACTED]> [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]> Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]>
 Subject: [AUS - ACT] RIS PACS Extract [SEC=UNCLASSIFIED]

Hi All,

I have imported the received extracts into our tools, a summary below.

HL7

Validation results:

- Physician: No file, so I created a dummy physician
- Patients: All good
- Service Request: All good
- Requested Proc: 46 StudyUID not unique (known issue)
- Report: 46 linked to a failed reference in Req Proc
- Attachments: No file provided

Migration to EI:

The data that was validated has now been migrated to the DEV EI cluster.
 These are the totals of the migrated data, no migration or validation errors have been detected.

- Patients: 4593
- Orders: 8280
- Reports: 8190

DICOM

This was the first test to import the DICOM format. All 3 flat files have the correct format and have been imported correctly into the AMT database.

Validation:

(No crosschecks with the HL7 data have been made yet)

- Accession Number checks: 166 duplicate accession numbers detected
- Patient ID checks: No problems detected
- StudyUID checks: No problems detected

No checks on patient names have been executed, because the data is anonymized

Kind Regards,

[REDACTED] | [REDACTED]

T

Holiday alerts:

- 18/12/2017 until 21/12/2017 only 50% available
- 22/12/2017 until 29/12/2017 not available

NV,
<http://www.agfahealthcare.com>
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 | 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)" <act.gov.au>,
 (Health)" <act.gov.au>, "Crossley, Nick"
 <Nick.Crossley@act.gov.au>

Date: 19/12/2017 07:00

Subject: RIS PACS Extract [SEC=UNCLASSIFIED]

Hi

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Blank study and series descriptions have been defaulted to 'Unknown'

There were some records with a blank series_number, this will be raised with Siemens, but for now they have been defaulted to 0.

Thanks,

██████████ | IDIS Data Migration Analyst - UCPH Digital Solutions Program
Mobile : ██████████ | Email: ██████████@act.gov.au

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Heland, Rebecca (Health)

From: [REDACTED] (Health)
Sent: Monday, 8 January 2018 5:09 PM
To: [REDACTED] (Health); [REDACTED] (Health)
Cc: [REDACTED] Griffiths, Jessica (Health)
Subject: RE: Accession numbers

Importance: High

Hey all,

Where did we get to with this??

[REDACTED]

[REDACTED]
 Phone: 02 6174 8729 | Mobile: [REDACTED] | E-Mail : [REDACTED]@act.gov.au
 Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
 Building 1, Lv 10 Canberra Hospital, Garran ACT | PO Box 11, WODEN ACT 2606 | www.act.gov.au

From: [REDACTED] [mailto:[REDACTED]]
Sent: Wednesday, 20 December 2017 3:03 PM
To: [REDACTED] (Health) <[REDACTED]@act.gov.au>
Cc: [REDACTED] <[REDACTED]>
Subject: Re: Accession numbers

Hi [REDACTED]

We require that each study has a unique accession numbers. If there are multiple studies that contain the same accession number then we can only import one of those. It is a case of referential integrity in our system and that we enforce accession numbers to be unique. Our suggestion is that if two studies contain the same accession number, eg [REDACTED], then we suggest that they are transformed to [REDACTED] and [REDACTED]

Kind Regards,

[REDACTED]
 T +61 3 9756 4645 | F +61 7 3356 6683 | M [REDACTED]

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<http://blog.agfahealthcare.com>

Click on link to read important disclaimer: <http://www.agfahealthcare.com/maildisclaimer>

[REDACTED]
 Date: 20/12/2017 12:45 PM
 Subject: Accession numbers

What is the risk of not providing unique accession numbers?

- If this is not done, will it affect the ability to search accession numbers?
Will searches not return the expected results for the modified accession numbers?

Can you please provide more details?

Thank you ☺

M

██████████ | Project Director - Integrated Diagnostic Imaging Solution Project
Phone: 02 6174 8729 ██████████ | E-Mail ██████████
Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
Building 1, Lv 10 Canberra Hospital, Garran ACT | PO Box 11, WODEN ACT 2606 | www.act.gov.au

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Heland, Rebecca (Health)

From: Sankararaj, Prathiba (Health)
Sent: Monday, 8 January 2018 12:32 PM
To: [REDACTED] (Health); [REDACTED] (Health)
Subject: Data migration Strategy or Design [SEC=UNCLASSIFIED]

Hi,

I am trying to gather information and docs related to Data migration. Can you please send information you got for Data migration?

Regards,
Prathiba

...a (Health)

██████████ (Health)

Monday, 8 January 2018 10:47 AM

██████████ (Health)

Subject:

Non unique StudyUIDS (migration meeting on 21Dec2017) [SEC=UNCLASSIFIED]

Hi ██████████

Here is what we discussed about non unique StudyUIDS in the Requested Procedure file.

The Requested Procedure file expects unique StudyUIDs, existing system has multiple accession numbers linked to the same StudyUID. To be able to migrate it has been decided that StudyUIDs for accession numbers which are not referenced in PACS will be blanked out. This will be done on our end as part of the transformations.

Migrating data using this approach will mean link between linked accession numbers and StudyUIDs will be lost.

AGFA has accepted to take this to the business for approval.

Questions for the business should be around how often are accession numbers used to pull out study details and what are the consequences of not being able to map a study to a linked accession number?

Regards,

██████████ | IDIS Data Migration Analyst - UCPH Digital Solutions Program

Mobile : ██████████ | Email: ██████████@act.gov.au



REGISTER OF PURCHASING DECISION (ROPD)

NonStock Requisition (REF No.):

1. General description of what is to be purchased: Siemens PACS data migration for the Integrated Diagnostic Imaging Solution (IDIS) Project	
2. Purchases under \$25K only require one written quotation, once obtained please proceed to <u>box 3</u>. If over \$25K (3) written quotes must be obtained. If three quotes were obtained please proceed to <u>box 3</u>. If not please identify justification for not obtaining required number of quotes below {please tick or check appropriate box} NOTE: Chief Executive Authorisation is required for orders over \$25K where less than three (3) quotes have been sourced	
i.	<input checked="" type="checkbox"/> The required supplies are only available from the one supplier in Australia or only one supplier has the necessary technical expertise to supply and provide satisfactory back-up, spare parts, maintenance, support or warranty.
ii.	<input type="checkbox"/> For reasons of overall economy the requirement must be compatible with existing equipment or the area has standardised on a particular item after inviting tenders/quotations for the original equipment.
Other: P	
3. Outline quotes obtained and justification for purchasing decision:	
Supplier: Siemens Quote: \$58,906.10 (inc GST) \$53,551 (ex GST) Contract awarded to Supplier: <u>Siemens</u> Comments in support of purchasing decision: Information Professionals was assessed to be the best value for money. They demonstrated extensive testing experience, have testing experience for government ICT solutions and are able to commence this work as a matter of priority. Their rates were reasonable and as expected based on previous procurements and assessment against the other potential vendors.	
4. Source of Funding:	
1. Recurrent Expense <input type="checkbox"/> Budget 2. P&E Program <input type="checkbox"/> 3. Donation <input type="checkbox"/> 4. Special Purpose <input type="checkbox"/> Funding Other: <u>UCPH Digital Solutions Program Budget (\$28M) Capital Cost Centre 66806 – Project Code 21437 (IDIS)</u>	
5. Endorsements: Purchase Requests must be endorsed by relevant delegates (as appropriate). Refer to ACT Health Procurement Guideline for specific guidance on endorsements required:	
Biomedical Engineering: _____ Injury Prevention Management: _____ Information Management (IT): <u>Peter O'Halloran CIO</u> Sterilising Services: _____ Property Management & Maintenance: _____ Infection Control: _____ Product Manager: _____ Other: _____	

NOTE: Source Funding and Endorsements MUST be completed, otherwise the Purchase Request may not be processed.

6. Purchasing Approval:

Requesting Officer: Sandra Cook, Director Signature:  Date: 22/12/17
 Authorising Officer: Chris Bone Ag DO Signature:  Date: 22/12/17
 Authorising Officer: Peter O'Halloran, CIO

NOTE: Chief Executive Authorisation is required for orders over \$25K where less than three (3) quotes have been sourced

ACT Health Supply Services USE ONLY

Purchasing Officer: _____ Signature: _____ Date: ____/____/____

NOTE: This document is to be attached to the supplier quotations and a non-stock requisition before being sent to the Authorising Officer and ACT Health Supply Services



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i. <input checked="" type="checkbox"/>	The required supplies are only available from the one supplier in Australia or only one supplier has the necessary technical expertise to supply and provide satisfactory back-up, spare parts, maintenance, support or warranty.
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3. Outline quotes obtained and justification for purchasing decision:	
Supplier: Siemens Quote: \$58,906.10 (inc GST) \$53,551 (ex GST) Contract awarded to Supplier: Siemens Comments in support of purchasing decision: Information Professionals was assessed to be the best value for money. They demonstrated extensive testing experience, have testing experience for government ICT solutions and are able to commence this work as a matter of priority. Their rates were reasonable and as expected based on previous procurements and assessment against the other potential vendors.	
4. Source of Funding:	
1. Recurrent Expense <input type="checkbox"/>	2. P&E Program <input type="checkbox"/>
Budget	3. Donation <input type="checkbox"/>
	4. Special Purpose <input type="checkbox"/>
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5. Endorsements: Purchase Requests must be endorsed by relevant delegates (as appropriate). Refer to ACT Health Procurement Guideline for specific guidance on endorsements required:	
Biomedical Engineering: _____	Injury Prevention Management: _____
Information Management (IT): Peter O'Halloran CIO	Sterilising Services: _____
Property Management & Maintenance: _____	Infection Control: _____
Product Manager: _____	Other: _____

NOTE: Source Funding and Endorsements MUST be completed, otherwise the Purchase Request may not be processed.

6. Purchasing Approval:Requesting Officer: Sandra Cook, Director Signature:  Date: 22/12/17Authorising Officer: Chris Bone A/g Oo Peter O'Halloran, CIO Signature:  Date: 22/12/17

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ACT Health Supply Services USE ONLY

Purchasing Officer: _____ Signature: _____ Date: / /

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ii. <input type="checkbox"/>	For reasons of overall economy the requirement must be compatible with existing equipment or the area has standardised on a particular item after inviting tenders/quotations for the original equipment.
Other: P	
3. Outline quotes obtained and justification for purchasing decision:	
Supplier: <u>Siemens</u> Quote: <u>\$224,246 (inc GST) \$203,860 (ex GST)</u> Contract awarded to Supplier: <u>Siemens</u> Comments in support of purchasing decision: Siemens is the incumbent vendor. A contract for a new RIS-PACS solution has been procured from AGFA and it is now required to migrate data from the Siemens system into the new AGFA system. Siemens are the only vendor that can provide this service.	
4. Source of Funding:	
1. Recurrent Expense <input type="checkbox"/> Budget 2. P&E Program <input type="checkbox"/> 3. Donation <input type="checkbox"/> 4. Special Purpose <input type="checkbox"/> Funding	
Other: <u>UCPH Digital Solutions Program Budget (\$28M) Capital Cost Centre 66806 – Project Code 21437 (IDIS)</u>	
5. Endorsements: Purchase Requests must be endorsed by relevant delegates (as appropriate). Refer to ACT Health Procurement Guideline for specific guidance on endorsements required:	
Biomedical Engineering: _____ Injury Prevention Management: _____ Information Management (IT): <u>Peter O'Halloran CIO</u> Sterilising Services: _____ Property Management & Maintenance: _____ Infection Control: _____ Product Manager: _____ Other: _____	

NOTE: Source Funding and Endorsements MUST be completed, otherwise the Purchase Request may not be processed.

6. Purchasing Approval:Requesting Officer: Mark Duggan Signature: *Mark Duggan* Date: 22/12/17Authorising Officer: Chris Bone Signature: *Chris Bone* Date: 22/12/17

NOTE: Chief Executive Authorisation is required for orders over \$25K where less than three (3) quotes have been sourced

ACT Health Supply Services USE ONLY

Purchasing Officer: _____ Signature: _____ Date: / /

NOTE: This document is to be attached to the supplier quotations and a non-stock requisition before being sent to the Authorising Officer and ACT Health Supply Services

PURCHASE REQUEST FOR NONSTOCK GOODS AND SERVICES (THIS IS NOT AN OFFICIAL PURCHASE ORDER)

Areas indicated with an Asterisk * to be completed by the Requesting Officer.

* What is the purpose of this Request: Please Tick/Check One: Goods Services Consultancy

Branch/Section/Ward/Department *

Digital Solutions Division, Corporate

Delivery Address *

ACT Health Bowes Street and associated ACT Health facilities

The Canberra Hospital Garran ACT

Request Date *: 12/12/2017

Delivery Point *: Y



ACT
Government

Health

Supply Services DelDkt No :

* Qty Req'd	* Issue/UOM	* Part/Cat No.	* Item Description (per the detail obtained from the Supplier Quotation)	* Dangerous Goods (Y/N)	* Cold Freight (Y/N)	* Tax Name	* Est Unit Cost (excl. Tax)	* Tax Amount
1			PACS Data Migration Professional Services	N	N	GST	\$53,551	10%

* Est. Total (incl. Tax) \$: \$58,906.10

* Entity Code	* Cost Centre	* Natural Account	* Project Code	* Agency Specific	* Trading Code
	66806		21437	9999	99

Supplier Details *

Siemens Healthcare Pty Ltd

885 Mountain Highway

Bayswater, VIC 3153

Supplier ABN:

QUOTE REF *

OTHER REF *

ACT Government Guidelines for Purchasing:

If the value of this Requisition is:

- Under \$25,000, One written quote required;
- \$25,000 to under \$200,000, A minimum of three written quotes required, or Chief Executive (CE) approval where less than 3 quotes;
- \$200,000 and above, Must Invite Public Tender, or Chief Executive (CE) approval where a restricted/single select tender process is undertaken.

* Please Ensure Supplier Quotation is Valid.

Requesting Officer's Name (Printed) *

Mark Duggan, Director Medical Imaging

Telephone Number *

47254

Email Address *

Mark.duggan@act.gov.au

Certificate by Authorised Officer

I certify that:

- under the Financial Management Act (1996), I am authorised by the Chief Executive Officer of the Department/Authority to make this commitment and approve the total value of this requisition;
- funds are available and expenditure is essential; and
- the financial coding is correct.

Authorised Officer's Signature

Authorised Officer's Name (Printed)

Authorised Officer's Position Title

Position Number

Purchasing Officer's Notes:

Purchase Order No.: H

Please Send Your Purchase Request and ALL Relevant Documentation by FAX: 62050806 or via Email To: acthealthsupply@act.gov.au

PURCHASE REQUEST FOR NONSTOCK GOODS AND SERVICES (THIS IS NOT AN OFFICIAL PURCHASE ORDER)

Areas indicated with an Asterisk * to be completed by the Requesting Officer:

* What is the purpose of this Request: Please Tick/Check One: Goods Services Consultancy

Branch/Section/Ward/Department *

Digital Solutions Division, Corporate

Delivery Address *

ACT Health Bowes Street and associated ACT Health facilities

The Canberra Hospital Garran ACT

Request Date : 12/12/2017

Delivery Point : Y



ACT
Government

Health

Supply Services DelDkt No :

Qty Req'd	Issue/UOM	Part/Cat No.	Item Description (per the detail obtained from the Supplier Quotation)	Dangerous Goods (Y/N)	Cold Freight (Y/N)	Tax Name	Est Unit Cost (excl. Tax)	Tax Amount
1			RIS Data Migration Professional Services	N	N	GST	\$203,860	10%
* Est. Total (incl. Tax) \$:							\$224,246	

Entity Code	Cost Centre	Natural Account	Project Code	Agency Specific	Trading Code
	66806		21437	9999	99

Supplier Details *

Siemens Healthcare Pty Ltd

885 Mountain Highway

Bayswater, VIC 3153

Supplier ABN:

QUOTE REF *

OTHER REF *

Requesting Officer's Name (Printed) *

Mark Duggan, Director Medical Imaging

Telephone Number *

47254

Email Address *

Mark.duggan@act.gov.au

Certificate by Authorised Officer

I certify that:

- (i) under the Financial Management Act (1996), I am authorised by the Chief Executive Officer of the Department/Authority to make this commitment and approve the total value of this requisition;
- (ii) funds are available and expenditure is essential; and
- (iii) the financial coding is correct.

Authorised Officer's Signature

[Signature]

Authorised Officers Name (Printed)

Chris Rose

Authorised Officer's Position Title

Ag DC

Position Number

Purchasing Officer's Notes:

Purchase Order No.: H

ACT Government Guidelines for Purchasing:

If the value of this Requisition is:

- Under \$25,000, One written quote required;
- \$25,000 to under \$200,000, A minimum of three written quotes required, or Chief Executive (CE) approval where less than 3 quotes;
- \$200,000 and above, Must Invite Public Tender, or Chief Executive (CE) approval where a restricted/single select tender process is undertaken;

* Please Ensure Supplier Quotation is Valid.

Please Send Your Purchase Request and ALL Relevant Documentation by FAX: 62050806 or via Email To: acthealthsupply@act.gov.au






ACT
Government

Chief Minister, Treasury and
Economic Development

Consult IT Panel

SCHEDULE 5 - Work Order

WORK ORDER FOR <i>Solution Architecture, Technical Analysis, Data Analysis, Integration Analysis</i>	
NOTE: This Work Order is issued by the Territory in accordance with the terms and conditions of the ICT Consulting and related Business Services Agreement Ref C2009.234 which the Territory and the Contractor entered into on 24-Nov-2009 and any additional terms and conditions specified in this Work Order.	
1	Date: 16/01/2017
2	ID of Work Order:
3	Contractor Name: Oakton Services Pty Ltd
4	Specified Personnel Name: Multiple
5	Specified Services: (Scope of Work, designated role and specific tasks to be performed) A service of multiple skill sets to undertake a work package related to data, integration, and technical solution architecture. The work package is for the RIS-PACs replacement project to have the technical architecture, data and integration current state analysed and documented to support a Statement of Work for Technical Implementation and Data Migration and subsequent Contract Negotiation for the project.
6	Services: (details of the relevant services to be delivered) Services and agreed deliverables associated with: Technical Analysis Data Analysis Integration Analysis Architecture & Solutions Design Contract duration 8 weeks maximum, capped at \$150,000 ex GST (\$165,000 GST inc.)
7	Limitation of Contractor's Liability for this Work Order: (if applicable) N/A
8	Additional Terms and Conditions applicable to this Work Order: N/A
9	Applicable Third Party Warranties: N/A
10	Warranty Period: N/A
11	Remote Vendor Access Policy: (if applicable) N/A
12	Delivery Location: Required on site at ACT Health Canberra Hospital Woden campus and other locations within ACT offices as required.
13	Total Cost: Contract duration 8 weeks maximum, capped at \$150,000 ex GST (\$165,000 GST inc.)
14	Breakdown costs associated with total cost:
15	Additional Service Levels: (if applicable) N/A

16	Work Order Term:	Start 23 January 2017 <i>6 February 8V</i> 40 hours per week, 8 weeks maximum from start date with no possibility of further extensions.
17	Deliverables by Specified Personnel:	Technical Analysis <ol style="list-style-type: none"> 1. Interface analysis (approx. 38 systems) 2. Develop interface specifications 3. Technical Analysis 4. Current state architecture Data Migration <ol style="list-style-type: none"> 1. Current state analysis of data 2. Develop data specification current state in preparation for data migration
18	Directorate Contact:	Sarah Norton Sarah.norton@act.gov.au 02 6265 0412
19	Approvals for insurance (and communications) costs: (as applicable)	Not Used
	Approved by Financial Delegate: Signature:  Name: <u>Shaun Strachan</u> Date: <u>01-02-2017</u>	Approved by Contractor: Signature:  Name: <u>Michelle Salovei</u> Date: <u>02/02/2017</u>
	Approved by SS ICT – Contracts and Licensing Manager: Signature:  Name: <u>STEVE RUSSELL</u> Date: <u>1/2/17</u>	

Contractor must not commence the provision of these Services until both the Financial Delegate AND SS ICT- Contracts and Licensing Manager has signed a copy of this Schedule 5, and has been provided to the Contractor.

Heland, Rebecca (Health)

From: Duggan, Mark (Health)
Sent: Thursday, 21 December 2017 4:28 PM
To: O'Halloran, Peter (Health); Cook, Sandra (Health)
Subject: RIS data migration and Siemens support extension
Attachments: DG Brief IDIS RIS migration and extension to Siemens support agreement.docx; Attachment B 072.ACT.CM.18 Canberra Hospital.pdf; Attachment A 1-EZG77P-0 - The Canberra Hospital - RIS Data Migration Services (002).pdf

Hi Peter and Sandra,

Apologies this is late. Chris said as long as it is with DDG's office tomorrow we will be fine. Once you review and are happy I will get Mel to TRIM it so we can action.

Two questions, what is the cost centre for the support agreement extension and are you happy with the sign off and action officer.

I have attached attachments A & B to support the minute.

Thank you,

Mark.

Mark Duggan
Ag Manager
Medical Imaging
Canberra Hospital & Health Services
mark.duggan@act.gov.au
Phone: 6174 7254
Mobile: [REDACTED]

Heland, Rebecca (Health)

From: [REDACTED] <[REDACTED]>
Sent: Thursday, 21 December 2017 3:01 PM
To: [REDACTED] (Health); [REDACTED] (Health)
Cc: [REDACTED] Crossley, Nick; [REDACTED] (Health)
Subject: RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Thank you [REDACTED] will advise the team.

Happy holidays to you and the rest of your team!

Kind Regards,

[REDACTED]
Siemens Healthcare Pty Ltd
 30 Herring Road
 Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: [REDACTED]

Email: [REDACTED]

Internet: www.healthcare.siemens.com.au

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From: [REDACTED] (Health) [mailto:[REDACTED]act.gov.au]
Sent: Thu, 21 December 2017 2:49 PM
To: [REDACTED] (Health)
Cc: [REDACTED] (Health); [REDACTED] Crossley, Nick; [REDACTED] (Health)
Subject: RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Thanks [REDACTED]

We are awaiting reply from AGFA and we are also getting in touch with the RIS PACS admin team for some of the questions below.

But here are a few that I have answers for

In cases where Activity.ord_for_dtime or Activity.proc_dtime is unavailable default it with the value '19000101'.
 For records where Series_Number is unavailable default it with '0'(zero).

I will get in touch with you regarding the other outstanding questions when we hear from AGFA and the admin team.

Have a good break!! Talk to you in the New Year!

Thanks,

██████████ | IDIS Data Migration Analyst - UCPH Digital Solutions Program
 Mobile: ██████████ Email: ██████████@act.gov.au

From: ██████████ [mailto:██████████@act.gov.au]
Sent: Wednesday, 20 December 2017 9:44 AM
To: ██████████ (Health) <██████████@act.gov.au>; ██████████ (Health) <██████████@act.gov.au>
Cc: ██████████ (Health) <██████████@act.gov.au>; ██████████ <██████████@act.gov.au>; ██████████ <██████████@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; ██████████ (Health) <██████████@act.gov.au>
Subject: RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hello ██████████

Please find my response below.

Kind Regards,

██████████
 ██████████
Siemens Healthcare Pty Ltd
 160 Herring Road
 Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009
 Mobile: ██████████
 Email: ██████████
 Internet: www.healthcare.siemens.com.au

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From: ██████████ (Health) [mailto:██████████@act.gov.au]
Sent: Tue, 19 December 2017 5:51 PM
To: ██████████ ██████████ ██████████ ██████████ ██████████ Crossley, Nick; ██████████ (Health) ██████████
Subject: RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hi ██████████

Thanks for the RIS mapping and the extracts.

I haven't had a chance to look at the mapping yet, but the extracts are looking better.

Some outstanding issues from my previous feedback and some issues discovered while I was working on the transformations for AGFA are listed below:

What date time column have the files been filtered on? The only date that I found in the file was the CreatedDateTime in the result file where the date ranges outside the 01-Jan to 20-Jan 2013, some dates are in 2014?(this will help me validate coverage of the extracts on my end).

[ME] field valued: activity.proc_dtime (This is the time the exam was ended by the technician)

[SS]Thanks, that will help me with my analysis. But is it valid for an exam ended in the month of Jan 2013 to have reports created in 2014(CreatedDateTime ranges from 2013-2014 in the extrcats)

[ME] Reports will need to be read to work out what happened

OrderCreationDateTime and ScheduledStudydateTime(many dates in the Activity and Activity info tables) – which dates correspond to these?? What are our alternatives? (You have suggested using End procedure Date Time, will confirm with AGFA). The exam file has an additional '|', the ScheduledStudyDateTime therefore shows as '|'
[ME] Currently these 2 fields have been left empty until further notice. The extra '|' issue has been addressed on the new extracts

[SS]Can we have OrderCreationDateTime mapped to Activity.ord_for_dtime and ScheduledStudydatettime mapped to Activity.proc_dtime

[ME] what if both are purged or no data available.....what is the fall back?

Study UIDs duplicated where same study is associated to linked accession numbers, does PACS have the studies associated to all the accession numbers or just the one linked accession number, we need the Study UIDs to be unique, can this be discussed further?

[ME] In most cases where exams have been linked in RIS, PACS will hold 1 record (chosen SUID depends on order chosen at the modality). we do not have a way to tell which exams have a reference in PACS and which do not, doing this maybe a risk. This should be a task for your team and AGFA as you will have both the RIS and PACS extracts in hand and therefore minimizing any risks to the equation for such scenario.

[SS] Thanks, this will be discussed with AGFA

I think cancelled exams with no results should be excluded from the exam file (will confirm with AGFA). Status 'P' stands for preliminary, which I think will be used for results which have been drafted but not validated yet.

[ME] we left the CM exams with 'P' status on in the report file until further notice

[ME] Please also note that some 'CA' exams have a real report attached to them. We have decided to include these in the extract until further notice

[SS] All result records which are not a real report should be excluded from the extract.

Is it valid to have procedures with no studies but associated reports?

This will be discussed with the business as well.

ctivity.ord_for_dtime has not been answered, what value does this field store

[ME] it is not activity, it is visit_activity.ord_for_dtime, and that is the time the exam was set to be performed.

[SS]Both visit_activity and activity tables have a column called ord_for_dtime. As far as I understand the activity table is a complete copy of all activities (the one which does not get purged and therefore should be used for our extracts)

[ME] what if both are purged or no data available.....what is the fall back?

Study_description and Series_description is blank for some records.

[ME] No changes until further notice

[SS] where no description available in the system, this can be defaulted to 'unknown'

[ME] Ok

Some Study_UIDs in the RIS extract do not have corresponding PACS Study records and some Study_UIDs in PACS have no information in the RIS extract.

[SS]RIS PACS mismatch has not been resolved yet. The most recent extracts have the same number of mismatching records as the previous one.

[ME]Again this should be part of your QA. There is no way for us to tell what is what in either systems as they each are independent. Note that this behaviour is not uncommon. However With the extracts in hand, your team and Agfa should identify these. Using the front end apps should also help in this process. Please also note that not all

exams have study uid's or results, not every exam in the system is resulted and may or may not have images attached to them. That is just normal workflows.

Some additional feedback:

In the extracts a linefeed has been replaced with '\br.\'. AGFA's specifications indicate the linefeed needs to be replaced with \.br\, can that be corrected

[ME] Ok

The series extract has a few records with a missing Series_number, I am guessing the reason why they are missing is because they are unavailable in the system, I will confirm with AGFA if this can be defaulted with some value.

Let me know if you need any further details.

Thanks,

██████████ | IDIS Data Migration Analyst - UCPH Digital Solutions Program
Mobile: ██████████ Email: ██████████@act.gov.au

From: ██████████ [mailto:██████████]
Sent: Monday, 18 December 2017 2:42 PM
To: ██████████ (Health) <██████████@act.gov.au>; ██████████ (Health) <██████████@act.gov.au>
Cc: ██████████ (Health) <██████████@act.gov.au>; ██████████ <██████████@act.gov.au>; ██████████ (Health) <██████████@act.gov.au>
Subject: RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hello ██████████

Please find my responses below.

I will send a separate email to access RIS/PACS extracts and Mappings Document.


As always, please review and advise of any issues.

Kind Regards,

██████████
██████████
Siemens Healthcare Pty Ltd
160 Herring Road
Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009
Mobile: ██████████
Email: ██████████
Internet: www.healthcare.siemens.com.au

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From: [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]
Sent: Wed, 13 December 2017 12:13 PM
To: [REDACTED]
Cc: [REDACTED] Crossley, Nick; [REDACTED] (Health)
Subject: RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hi [REDACTED]

Thanks for the extracts and thank you for validating the extracts on your end. The RIS and the PACS extract formats are now looking good.

I do have some feedback/questions on the extracts. We have got the data in the format that we wanted, my feedback is more about the data itself.

RIS

What date time column have the files been filtered on? The only date that I found in the file was the CreatedDateTime in the result file where the date ranges outside the 01-Jan to 20-Jan 2013, some dates are in 2014?(this will help me validate coverage of the extracts on my end).

[ME] field valued: activity.proc_dtime (This is the time the exam was ended by the technician)

Duplicate patient data to be removed from the extract.

[ME] This has been addressed on the new extracts

Leading 0s to be removed from PatientID (PatientID from RIS does not match PatientID from PACS)

[ME] This has been addressed on the new extracts

Requesting Physician details (missing for most of the services) (We haven't received the mappings yet, but my guess is that the requesting physician details come from the ordering doctor, the system seems to have ordering doctor details for more records than what's in the extract)

[ME] This has been addressed on the new extracts

OrderCreationDateTime and ScheduledStudydateTime(many dates in the Activity and Activity info tables) – which dates correspond to these?? What are our alternatives? (You have suggested using End procedure Date Time, will confirm with AGFA). The exam file has an additional '|', the ScheduledStudyDateTime therefore shows as '|'

[ME] Currently these 2 fields have been left empty until further notice. The extra '|' issue has been addressed on the new extracts

Accession numbers sequencing was requested as .01 and .02(can this be corrected)?

Example

Original Accession number: [REDACTED] Modified: [REDACTED] and [REDACTED]

[ME] This has been addressed on the new extracts

Study UUIDs duplicated where same study is associated to linked accession numbers, does PACS have the studies associated to all the accession numbers or just the one linked accession number, we need the Study UUIDs to be unique, can this be discussed further?

[ME] In most cases where exams have been linked in RIS, PACS will hold 1 record (chosen SUID depends on order chosen at the modality). we do not have a way to tell which exams have a reference in PACS and which do not, doing this maybe a risk. This should be a task for your team and AGFA as you will have both the RIS and PACS extracts in hand and therefore minimizing any risks to the equation for such scenario.

Some exams are missing a StudyInstance UID, I understand the ones with a Status 'CA' (cancelled) will not have one, but what about the completed (Status - CM) ones?

[ME] Will get back to you on that

Again, I understand cancelled exams with no results but what about the completed exams, why are they missing a result body?

[ME] Exams have not been performed and there could be many reasons for this. Please check with Business I think cancelled exams with no results should be excluded from the exam file (will confirm with AGFA). Status 'P' stands for preliminary, which I think will be used for results which have been drafted but not validated yet.

[ME] we left the CM exams with 'P' status on in the report file until further notice

[ME] Please also note that some 'CA' exams have a real report attached to them. We have decided to include these in the extract until further notice

The TranscriptionistFirstName seems to have been populated with the first and last name and the TranscriptionistLastName seems like a code value or ID for the same, can this be fixed?

[ME] This has been addressed on the new extracts

Will the accession numbers be modified in the results file for the next extract?

[ME] This is still on hold

Activity.ord_for_dtime has not been answered, what value does this field store

[ME] it is not activity, it is visit_activity.ord_for_dtime, and that is the time the exam was set to be performed.

PACS

Some Study_UIDs in the RIS extract do not have corresponding PACS Study records and some Study_UIDs in PACS have no information in the RIS extract.

The study file specification indicates multiple Modalities to be extracted under the same column 'Modality'. The study extract has different rows for studies under different modalities, this needs to be fixed. The modalities can be comma separated. (I will confirm with AGFA if ',' is their preferred separator)

[ME] This has been addressed on the new extracts

There are some records where the study_ref, modality, Study_UID has been duplicated, I would have expected the study_ref to be unique for the study records.

[ME] This has been addressed on the new extracts

The accession numbers in PACS have not been modified (Will confirm with AGFA if the PACS is expected to have the modified accession numbers).

[ME] No changes

Study_description and Series_description is blank for some records.

[ME] No changes until further notice

Institution name is the same as the department name in the study file?

[ME] Same data in DB

Is the series number meant to be unique for a study?

[ME] will get back to you on that

Is the image number meant to be unique for a series?

[ME] will get back to you on that

Will the optional fields be included in the next extract?

[ME] No, still working on that

We can discuss all of this in detail at our regular meeting today at 2:00pm.

Regards,

[REDACTED]
 [REDACTED] | IDIS Data Migration Analyst - UCPH Digital Solutions Program
 Mobile : [REDACTED] | Email: [REDACTED]@act.gov.au

From: [REDACTED] [mailto:[REDACTED]]
Sent: Friday, 8 December 2017 3:18 PM
To: [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]>
Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]> <[REDACTED].com>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>
Subject: RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hi [REDACTED] and [REDACTED]

I also forgot to mention that PACS extracts will not contain optional fields at this stage as further investigation is required to work out proper mapping with the Agfa spec.

Kind Regards,

[REDACTED]
Siemens Healthcare Pty Ltd
 160 Herring Road
 Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009
 Mobile: [REDACTED]
 Email: [REDACTED]
 Internet: www.healthcare.siemens.com.au

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From: [REDACTED]
Sent: Fri, 8 December 2017 3:05 PM
To: [REDACTED] (Health); [REDACTED] (Health)
Cc: [REDACTED] (Health); [REDACTED] 'Crossley, Nick'; [REDACTED] (Health)
Subject: RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hello [REDACTED] and [REDACTED]

Please find on a separate email a link to access both RIS and PACS newest extracts.

Extracts Date Range for both PACS and RIS: 01/01/2013 – 20/01/2013

As previously discussed, all efforts were spent making sure the extracts meet as close as possible the Agfa spec document.

We have replaced the FillerOrderNumber by the Accession Number as requested but I was also advised that many exams do contain the FillerOrderNumber from ACT/CAL which seem to have its own combination (i.e. [REDACTED] hence why the IssuerOfFillerOrderNumber was 'Siemens' or 'PAS' depending on where it came

from originally. Either way it does not play a role for PACS but maybe something for you and your team to think about.

The ScheduledStudyDateTime is a required field on the procedure file but I was advised that this is data we purge from our side and therefore will be blank. We can set this up to be the 'End procedure DateTime', Please check with Agfa and let me know if the workaround works for you?

Finally, Exams where a report do not exist were set with a status 'P' to keep up with the Spec document.

Please thoroughly examine the files and let me know if this works for you or if anything was missed

Thank you kindly for your patience throughout this process!

Kind Regards,

Siemens Healthcare Pty Ltd

160 Herring Road
Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: [REDACTED]

Email: [REDACTED]

Internet: www.healthcare.siemens.com.au



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From: [REDACTED]

Sent: Thu, 7 December 2017 3:50 PM

To: [REDACTED]

Cc: [REDACTED] (Health); [REDACTED] Crossley, Nick; [REDACTED] (Health); [REDACTED] (Health)

Subject: RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hello [REDACTED]

I can confirm that the modified accession numbers will be available on the request file as seen below.

[REDACTED]

As for the Report file, this will need to be discussed internally but will most likely not be available on the next batch of extracts.

About the FillerOrderNumber topic, what do you want to appear under the IssuerOfFillerOrderNumber? currently 'Siemens' and 'PAS' are the values. I cannot also promise that this will be made available in the next batch but will push for it.

Kind Regards,

[REDACTED]

Siemens Healthcare Pty Ltd
160 Herring Road
Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: [REDACTED]

Email: [REDACTED]

Internet: www.healthcare.siemens.com.au



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From: [REDACTED] [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]

Sent: Thu, 7 December 2017 3:15 PM

To: [REDACTED]

[REDACTED] Crossley, Nick; [REDACTED] [REDACTED] (Health); [REDACTED] (Health)

Subject: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hi [REDACTED]

We have discussed this with AGFA and it has been confirmed that the 'requested procedure' and the 'report' files will both need the modified accession numbers.

This will ensure referential integrity on Agfa's side, as accession numbers in both files will directly match up.

Example:

Requested Procedure
 Accession number Study UID

[REDACTED]
 [REDACTED]

Report

Accession number Report Body

[REDACTED] Patient: ** Result: Normal

[REDACTED] Patient: ** Result: Normal

Therefore the same result body will be duplicated across multiple rows, when the result is associated to multiple studies.

Though it will be good to have this worked out for the coming extract, if not workable in the given timeframes, I can work with a file with duplicate accession numbers which can then be modified on our end to add the sequencing.

The other thing that we discussed with AGFA was regarding this question that I had raised previously, Question from me - FillerOrderNumber mapped as acc_itn + ord_no + seq_no, is this the same combination used as FillerOrderNumber in PACS as well?

Answer from Siemens: No it is not the case on PACS. Accession number is the ID used between RIS and PACS and therefore should match. The combination was created for the purpose of the RIS extracts as Agfa expects a FillerOrderNumber.

Since the FillerOrderNumber is not used to match RIS and PACS, the filler order numbers can be populated with the accession number only, instead of the acc_itn + ord_no + seq_no.

The FillerOrderNumber will always be the non-modified accession number (all 3 files Service Request, Requested Procedure and Report).

Again though it will be good to have this implemented in the coming extracts, if not possible, I could work on this update as part of my transformations for now.

Let me know if you need any further details.

Thanks,

[REDACTED]

[REDACTED] IDIS Data Migration Analyst - UCPH Digital Solutions Program
 Mobile : [REDACTED] Email: [REDACTED]@act.gov.au

From: [REDACTED] (Health)

Sent: Wednesday, 6 December 2017 2:37 PM

To: [REDACTED] <[REDACTED]>

Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health)

<[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]> Crossley, Nick

<Nick.Crossley@act.gov.au>; [REDACTED] <[REDACTED]> [REDACTED] (Health)

<[REDACTED]@act.gov.au>

Subject: RE: PACS Extract [SEC=UNCLASSIFIED]

[REDACTED]

As discussed today, we will run through the scenario again with Agfa tomorrow at our regular meeting, and confirm the approach that will work best for them. We will then confirm with you in writing.

Regards

[REDACTED]

██████████ | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: 02 6174 8768 | Mobile: ██████████ | Email: ██████████

Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government

Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | www.act.gov.au

From: ██████████ [mailto:██████████]

Sent: Friday, 1 December 2017 3:45 PM

To: ██████████ (Health) <██████████>

Cc: ██████████ (Health) <██████████@act.gov.au>; ██████████ (Health)

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

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

Subject: RE: PACS Extract [SEC=UNCLASSIFIED]

Hello ██████████

I went back to the team about this and the feedback is that we can generate the necessary records to the request file where multiple Study UID's exist for an accession number. However we are not comfortable with generating these records to the other files such as the result file for dummy accession numbers.

Kind Regards,

Siemens Healthcare Pty Ltd

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From: ██████████ (Health) [mailto:██████████]

Sent: Thu, 30 November 2017 11:03 AM

To: ██████████

Cc: ██████████ (Health); ██████████ (Health); ██████████ Crossley, Nick;

Nick ██████████

Subject: RE: PACS Extract [SEC=UNCLASSIFIED]

Thanks ██████████

The Service request file is OK as is, because it just has the FillerOrderNumber. The one row there is fine.

However, if you can create the additional rows in the Report file that will mean that each accession number in the requested procedure will be linked to a report record, even though it will be the same report for each of the generated accession numbers. For example:

Original accession number: [REDACTED], with 3 Study UUIDs, and one report 'abc' that covers all 3 studies.

In the report file, it will be:

Modified: [REDACTED] UID 1 Report abc

[REDACTED] UID 2 Report abc

[REDACTED] UID 3 Report abc

Thanks

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: [REDACTED] | Mobile: [REDACTED] | Email: [REDACTED]

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From: [REDACTED] [mailto:[REDACTED]]

Sent: Thursday, 30 November 2017 12:51 AM

To: [REDACTED] (Health) <[REDACTED]>

Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health)

<[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]> Crossley, Nick

<Nick.Crossley@act.gov.au>; [REDACTED] <[REDACTED]>

Subject: RE: PACS Extract [SEC=UNCLASSIFIED]

Hello [REDACTED]

Currently we are creating a record in the service, request and result files per each accession number. For multiple Study UID's per accession number, are you expecting an additional record on all 3 files? This is because the Filler order number and all the other information would stay the same.

Please find below answer to [REDACTED] question

FillerOrderNumber mapped as acc_itn + ord_no + seq_no, is this the same combination used as FillerOrderNumber in PACS as well?

Answer: No it is not the case on PACS. Accession number is the ID used between RIS and PACS and therefore should match. The combination was created for the purpose of the RIS extracts as Agfa expects a FillerOrderNumber.

Kind Regards,

Siemens Healthcare Pty Ltd

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Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: [REDACTED]

Email: [REDACTED]

Internet: www.healthcare.siemens.com.au



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From: [REDACTED] (Health) [mailto:[REDACTED]]

Sent: Wed, 29 November 2017 2:17 PM

To: [REDACTED]

[REDACTED] Crossley, Nick; Nick [REDACTED] (Health)

Subject: RE: PACS Extract [SEC=UNCLASSIFIED]

[REDACTED], that should be OK for now.

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: [REDACTED] | Mobile: [REDACTED] | Email: [REDACTED]

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From: [REDACTED] [mailto:[REDACTED]]

Sent: Wednesday, 29 November 2017 1:58 PM

To: [REDACTED] (Health) <[REDACTED]>

Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]>

[REDACTED]@com>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] <[REDACTED]>

[REDACTED] (Health) <[REDACTED]@act.gov.au>

Subject: RE: PACS Extract [SEC=UNCLASSIFIED]

Thank you [REDACTED]

I will pass along the information and will let you know.

If the outcome remains the same from our side, are you happy to keep things as is and use [REDACTED] process to massage the data?

Kind Regards,

Siemens Healthcare Pty Ltd

160 Herring Road
Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: [REDACTED]

Email: [REDACTED]

Internet: www.healthcare.siemens.com.au



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From: [REDACTED] (Health) [mailto:[REDACTED]act.gov.au]
Sent: Wed, 29 November 2017 1:03 PM
To: [REDACTED]
Cc: [REDACTED] (Health); Crossley, Nick; Nick [REDACTED] (Health)
Subject: FW: PACS Extract [SEC=UNCLASSIFIED]

[REDACTED]

[REDACTED] has done some work in this space (see below for her explanation) as part of our own investigations of the issue. While we have been working with an older copy of the database until we install the most recent copy you provided, if you restrict your extract to before July this year then what she has provided should allow you to match the rows and replace with her data.

Let us know if that option will work, otherwise just send the extract with duplicate accession number rows and [REDACTED] will look to massage it while she is doing other field transforms prior to sending it to Agfa.

Regards

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program
 Phone: [REDACTED] | Mobile: [REDACTED] | Email: [REDACTED]
 Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
 Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | www.act.gov.au

From: [REDACTED] (Health)
Sent: Wednesday, 29 November 2017 12:50 PM
To: [REDACTED] (Health) <[REDACTED]>
Subject: FW: PACS Extract [SEC=UNCLASSIFIED]

Hi [REDACTED]

I have worked out the sequencing for all accession numbers with multiple Studies.(production backup from July 2017)

Attached is a list of all such accession numbers and the associated Study_UIDs.

I have used a '.' to separate the acc_itn and the seqno, but will send through an updated list depending on the feedback from AGFA (AGFA yet to confirm the special character to be used as a separator).

Will this help, can we get this included in the next extract?

Regards,

[REDACTED] | IDIS Data Migration Analyst - UCPH Digital Solutions Program
 Mobile : [REDACTED] | Email: [REDACTED]act.gov.au