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

From: [Health] [mailto act.gov.au]

Sent: Thursday 21 June 2018 8:19

To: [Wind act.gov.au]

Cc: [Mandapati, Sirisha (Health) < [Mandapati, Sirisha (Health

Subject: RE: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Hi

Thanks for the feedback.

ould you hold on from loading the RIS data into EI and Scheduling for now as our test team is still working on the patient merges?

I will let you know when the merges have been finalised for you to go ahead with the load.

The test work has been delayed as we thought the patients had not been loaded into the system yet, now that we have confirmation, the testers are working on it.

I will look into your comments and get back to you soon.

Thanks,

Hi All,

I'm importing the data for the Cycle 5 and noticed the following:

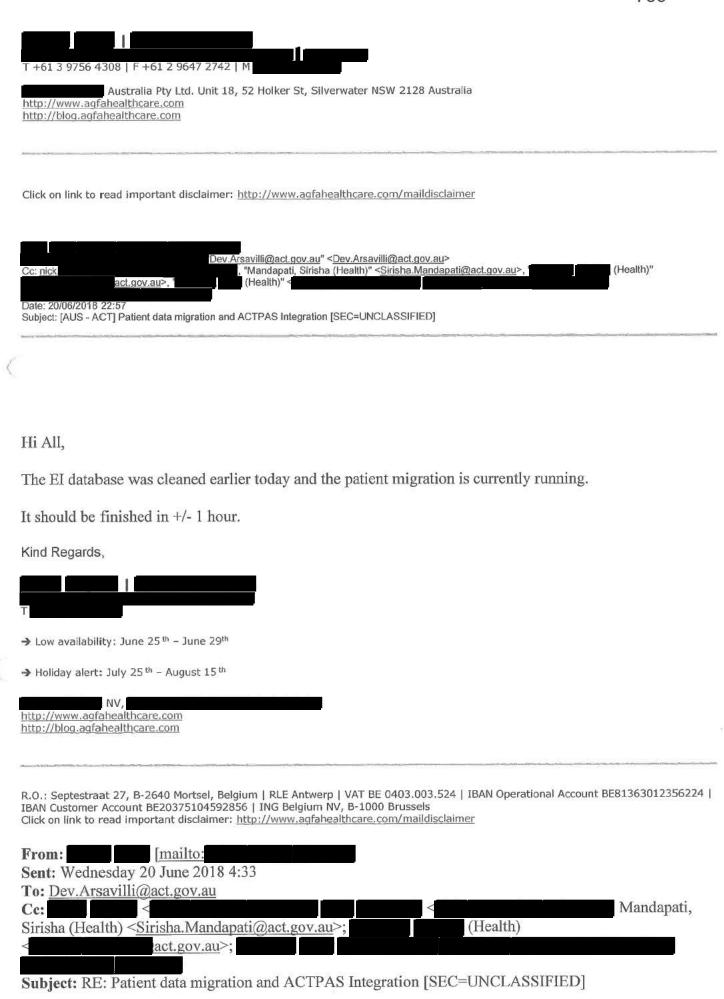
- Attachment file
 - Has 2 entries that contain a pipe (|) sign in the actual text in the extract.
 These need to be escaped / replaced with \F\.
 - +/- 50.000 entries have an empty 'content', I removed these during import
- Req proc
 - The procedure code and description for code 'NM' is not unique. I'm not sure this
 was mentioned before as we didn't have any issues with this so far I think. But the
 procedure code and descriptions need to be unique combinations for EI migrations.

Kind Regards,

T → Low availability: June 25 th – June 29 th → Holiday alert: July 25 th – August 15 th
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
Sent: Thursday 21 June 2018 7:12 To:
We would like to run Cycle 5 image migration as follows:
 Process to begin at 08:00 (our time) Friday 22 June or as soon as possible afterwards once RIS migration complete. Peak and off-peak hours to remain as before, i.e. peak 5:00 – 22:00, off-peak 22:00 to 05:00, all Saturday and Sunday to be off-peak until 05:00 Monday. Run 12 threads during peak hours and 20 threads off-peak. Scott Barrett to have a support number to call in case the process must be paused due to adverse system impacts.
Mark Duggan will be notifying MI users that the test will be in progress.
Thanks
IDIS Delivery Manager - UCPH Digital Solutions Program Phone: 02 6174 8768 Mobile:
From: [mailto: [mailto: Sent: Thursday, 21 June 2018 2:18 PM To:]
Cc: Arsavilli, Dev < Dev. Arsavilli@act.gov.au >; Mandapati, Sirisha (Health) < Sirisha. Mandapati@act.gov.au >; (Health) < act.gov.au >; (Health)
Subject: Re: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]
Hi The Control of the Control of th
I placed the rest of the files to be migrated to the folder 'Cycle 5\Cycle 5 Files 20062018" on the desktop of the migration server.
Hi Bara
Please confirm

 $DICOM\ migration,\ Start\ time,\ peak/off-peak\ hours\ and\ number\ of\ threads\ to\ be\ confirmed.$

Kind Regards,



Hi Dev.

I checked with and and the clearing out of the Test data in Dev will impact the BI work that is being done by and a global resource. However I thing it is best to put this work on hold and proceed as planned with the clearing of the DBs and migration tasks. The BI work can recommence after this.

Kind Regards,



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

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

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

From: "Arsavilli, Dev" < Dev. Arsavilli@act.gov.au>

"Mandapati, Sirisha (Health)" <Sirisha.Mandapati@act.gov.au>

Date: 20/06/2018 11:22
Subject: RE: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Hi

Please see the activities outlined below by for Cycle 5 Data Migration.

Day 1(Wed - 20/06/2018)

AGFA

- Wipe off all data from the existing environment. (Testing team have given their approval, activities might need the existing data).
- · Load Patient data.

Day 2(Thursday - 21/06/2018)

Health

- Test team to work on a few patient merges to test the process that has been outlined in the email below (Migrated RIS data to reference current active Patient IDs).
- to provide RIS and PACS extract files.
- to provide a list of accession numbers to the test team for on demand image pull testing.
- DICOM migration, Start time, peak/off-peak hours and number of threads to be confirmed.

AGFA

- Load RIS data into EI and Scheduling.
- · Schedule DICOM image migration for Friday morning our time.
- to provide details/steps to perform on demand image pull.

Day 3(Fri - 22/06/2018) onwards (for a week)

Health

• Test team to test on demand image pull. Continue with the test cases related to RIS data migration and DICOM image migration.

Any issues please could you let me know?

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
Sent: Wednesday, 20 June 2018 7:56 AM To: Cc: Arsavilli, Dev < Dev. Arsavilli@act.gov.au>; act.gov.au>; Subject: RE: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]
OK, thanks We'll let you know the detail in the next few days as we prepare for the next round.
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: [mailto: ont: Tuesday, 19 June 2018 7:00 PM o: [Health] <
Hi
I have never reached the theoretical limit, but indeed, at some point the performance will decline. We normally execute migration on well performing systems with anything between 10 and 32 threads. If you can provide me an overview of the amount of threads and the time window to be configured I can easily set that up during the next tests.
Kind Regards,
T → Low availability: June 25 th – June 29 th → Holiday alert: July 25 th – August 15 th
Agfa HealthCare NV, http://www.agfahealthcare.com http://blog.
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
From: (Health) [mailto: Sent; Tuesday 19 June 2018 2:51 To: Cc: Arsavilli, Dev < Dev. Arsavilli@act.gov.au>; (Health) Act.gov.au>;
Subject: RE: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

As part of Test cycle 5 we would also like to further test the potential limits on the number of threads we run for image migration during peak and off-peak times. This will also hopefully include increased off-peak hours. To assist us to decide on thread counts, is there a theoretical maximum number of threads that we could run? I would expect that at some point adding threads would be counter-productive because of the load.

At this point we are thinking of running 10-12 threads during peak and monitoring impact closely, and 20-25 threads during off-peak, depending on whether those numbers are feasible.

Your advice would be appreciated.

Thanks

| IDIS Delivery Manager - UCPH Digital Solutions Program
| Phone: 02 6174 8768 | Mobile: | Email: | 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: (Health)

Sent: Tuesday, 19 June 2018 10:24 AM

To: Cc: (Health) < Tony (act.gov.au); Arsavilli, Dev < Dev.Arsavilli@act.gov.au);

Subject: RE: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Hi,

As part of our next round of testing (test cycle 5), we would like to test the below scenario by loading patient data first and getting our test team to merge a few Patient IDs before loading the related RIS/PACS data.

I would like to hand over the patient data file for this cycle which is about 2 MB in size. An ftp location was to be provided by AGFA for this cycle of test data, could you please pass on the details to me and I will upload the file very soon.

Could you please look into wiping off all existing data in EI and Scheduling and load the first batch of Patient data for test cycle 5.

Thanks,

Hi

The migration strategy (document attached) described a scenario for HL7 that is a little bit different. The difference is that we would like to receive the patient/doctor/order/report data at the same time, with data until the cut-off point that was chosen.

You questions is still valid in this scenario, but it shouldn't cause for a problem:

- When a patient id is merge in EI, the old patient id will be created if it isn't known. So that is can actually merge that old to the new patient ID.
- This way, the old PID will be known in EI and in the HL7 migration database.
- When the message is send in with the OLD PID (from HL7 migration), EI will still
 know the OLD PID and link the order to that patient entry (so linked to the NEW PID
 that has a 'MERGED' entry in the database)

What I also want to add is the scenario where a patient is updated by the live feed and old data is still present to be migrated in the HL7 migration database:

 In this case, the patient will be known with more recent (correct) data in EI and known with old (incorrect) data in the HL7 migration database. The migrator tool will also handle this, by always checking if a patient is already
present in EI and actually reading the data from EI, to generate the HL7 migration
messages. So this avoid overwriting correct data with old data.

Kind Regards,
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
From: (Health) [mailto: act.gov.au]
Sent: Wednesday 13 June 2018 8:50
<pre>c:</pre>
Hi Table
Could you please look into the below data migration question relating to ACTPAS integration.
From what I understand so far, the migration activities involved are as following:
All patient data up to a specific cut-off date will be extracted, cleansed and transformed. While the patient data is being worked on, all ADT messages will be queued from the cut-off date onwards.
Patient data will then be provided to AGFA and will be loaded. ACTPAS interface will then be turned on and the queued messages will be applied to keep the data up-to-date.
RIS data up till the same cut-off date will be extracted/transformed and provided to AGFA for loading (note the time lag between
the patient data load and the RIS data load). Any patient merges applied on the patient data from the cut-off date up till the RIS data load will now have to be implemented on
the RIS data. Question: If PatientID is merged to PatientID is the time lag between patient data load and RIS data load, the
provided RIS data will have services/procedures against the old PatientID III this RIS data be identified and merged to the new PatientID as part of data migration?
Thanks,
IDIS Data Migration Analyst - UCPH Digital Solutions Program Mobile : Dact.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: Sent: To: Cc: Subject:	Monday, 25 June 2018 3:45 PM Arsavilli, Dev; (Health); (Health); (SEC=UNCLASSIFIED)	
Hi Please see my comment below in Thanks,	purple regarding the missing results for cancelled exams.	
IDIS Data Migration Email:	Analyst - UCPH Digital Solutions Program act.gov.au	
From: (Health) ent: Friday, 22 June 2018 10:30 To: Cc: Arsavilli, Dev <dev.arsavilli@a <="" p=""> Subject: RE: RIS Extracts and Atta</dev.arsavilli@a>	AM	
Sorry for the late reply. Please see my comments below.		
Thanks,		
IDIS Data Migration /	Analyst - UCPH Digital Solutions Program act.gov.au	
From: [mailto] ent: Thursday, 21 June 2018 10:5 To: (Health) < Cc: Arsavilli, Dev < Dev. Arsavilli@a Subject: RE: RIS Extracts and Attack	act.gov.au>	
Hello		
Can you please provide some clar	ity around the latest round of issues.	
Service and Exam files had a dupli this myself and have loaded the fi	cate header row in the extract file (last row was a header row), I have corrected le successfully. Corrected	
- Question about this ac	are missing extracted result records (exists in the DB but not extracted) cession number was raised previously as well ed exams seem to have signed off reports, why was this not extracted?	

All these exams are orphaned exams. Not sure why these exams are the way they are as the process seem backwards from the results and this cannot be done. None of these exams contain a row in the historical exam tables (activity, activity_info), which are a requirement for any exam that has a result. This is not allowed in the system. Can you please check with business and work out how these exams ended up in this situation? I will check with the business and let you know

SS – Business has confirmed that the above exams have no report bodies to be extracted. No correction needed.

The following accession numbers do not have an associated Study_UID (exists in the DB but not extracted)



These are cancelled exams with associated studies, why was this not extracted? Corrected

Scanned docs, interactive docs and zSeg docs for cancelled exams have not been included. Working on this

Following accession numbers do not have the outside film and scheduling notes text attachment data: we are not sure on this one. Cancelled exams with no historical details will not have outside films. And we do not see any scheduling notes for the exams below. What is your expectation here?



On further analysis, I found the Attachments content for the above exams did have the outside film and scheduling details, but the data itself had a carriage return, which meant the data from the column was split into multiple rows. In future could carriage returns be replaced with a space ('') and any pipes(|) in the data be escaped as '\F\'

StudyStatus mapping for cancelled exams should be 'CA', the extract has it mapped as 'CN' Corrected. ScheduledStudyDateTime(Procedure extract) for cancelled exams to be mapped to visit_activity.ord_for_dtime, this is a mandatory field in AGFA, so cannot be left blank, business decision is to map it to ord_for_dtime (not specified in the specifications as mapping has not been included as part of the document) Corrected.

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



Please consider the environment before printing this email

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

	Wed, 20 June 2018 11:40 AM
,	Arsavilli, Dev; (Health); (Health); (SEC=UNCLASSIFIED)
	Hi Thanks for the extracts and sorry for the late feedback.
	The extracts look good but they do have a few issues as described below:
	Service and Exam files had a duplicate header row in the extract file (last row was a header row), I have corrected this myself and have loaded the file successfully.
	The following accession numbers are missing extracted result records (exists in the DB but not extracted) — Question about this accession number was raised previously as well —all these below cancelled exams seem to have signed off reports, why was this not extracted?
	The following accession numbers do not have an associated Study_UID (exists in the DB but not extracted) These are cancelled exams with associated studies, why was this not extracted?
	Scanned docs, interactive docs and zSeg docs for cancelled exams have not been included.
	Following accession numbers do not have the outside film and scheduling notes text attachment data:
	StudyStatus mapping for cancelled exams should be 'CA', the extract has it mapped as 'CN' ScheduledStudyDateTime(Procedure extract) for cancelled exams to be mapped to visit_activity.ord_for_dtime, this is a mandatory field in AGFA, so cannot be left blank, business decision is to map it to ord_for_dtime (not specified in the specifications as mapping has not been included as part of the document)
	Could you please look into these and get them fixed Thanks,
	IDIS Data Migration Analyst - UCPH Digital Solutions Program Email: act.gov.au
	From: (Health) Sent: Wednesday, 13 June 2018 4:01 PM To: Arsavilli, Dev < Dev.Arsavilli@act.gov.au>; (Health) < Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]

Just found one additional issue with the Procedure extract: Study details for acc_itn = has not been correctly extracted. The DB has 2 confirmed studies for the accession number, the extract has one row with accession number = and Study_UID = ". Could youget this checked?
I have completed all my verification checks on RIS, this email trail has a complete list of all RIS issues found so far.
I will send you a separate email for the additional PACS records needed.
Thanks,
IDIS Data Migration Analyst - UCPH Digital Solutions Program Email: act.gov.au
From: (Health) Sent: Wednesday, 13 June 2018 11:41 AM To: (Health) < (Healt
Below are my findings for the text attachments data. Please pass this on to your team and let me know if you need any further clarifications.
Still to match the RIS and PACS extract for the given period, I will get back to you with any feedback on that.
1. Scheduling notes 1, 2, 3 and 4 not extracted
2. MBSCodes mapping not as expected: For Exams, where the procedure is mapped to multiple cpt_codes, the codes haven't been extracted as expected: Example: Acc_itn dtl_svc_code cpt_code1 cpt_code2 cpt_code3 Attachment.content Only 2 of the codes extracted out of 4
For Exams, where the procedure is mapped to a customised cpt_code(mapping in cpt_data, cpt_codes), the code
has not been extracted Example: Acc_itn dtl_svc_code cpt_codes.cpt_code Attachment.content 7029518 MustCode 60069 MBSCodes:Mustcode The customised code mapping has not been extracted
3. Cancellation reason not extracted Example Acc_itn cancellation dtime init Reason Attachment.content 5:00 CJP CHANGE OF EXAM FOR CORRECT CHARGING CANCELLATION_REASON:
4. Outside film not extracted: 25 Acc_itns found in the extract that should have been mapped as 'Y', the remaining data should have been mapped as 'N' Below are a few examples

Example Acc_itn add	m by details not extracted: lendum dtime addendum by Attachment.content 017-07-30 14:46:00 ADDENDUM_BY_DETAILS:	
Thanks,		
Mobile :	IDIS Data Migration Analyst - UCPH Digital Solutions Prog Email: act.gov.au	ıram
To: Cc:	(Health) ay, 12 June 2018 5:36 PM (Health) (Health) (RIS Extracts and Attachments (2 months) [SEC=UNCL)	i, Dev < <u>Dev.Arsavilli@act.gov.au</u> > ASSIFIED]
i Thanks for th	he extracts:	
My feedback	k is as follows	
1. Data for ca	cancelled exams (data from dbo.visit_activity) has not	been extracted.
All rows mar	udies should have been excluded, but have been included rked with a study status 'L' should have been excluded	Study
acc_itn	Study_UID	Status
		i
		i

3. Result not extracted for acc_itn = (is this a one with the incorrect header template)?

4. There are some scanned images that associate to more than one accession numbers. The attachments extract fails to capture this. One such example:
Scan_image_itn acc_itn type REFERRAL
REFERRAL
But the attachment extract has the following: FN acc_itn type Code Content PAS RP SCAN DOCUMENT REFERRAL SCAN .tif
The link between Acc_itn and the scanned image is lost
5. Duplicate rows of text attachments where code = 'Migrated_reptdata'
6. Accession numbers in text attachments have been sequenced (.02,.03) – no sequencing needed, one attachment to be produced for every accession number.
7. Text attachment content format not as expected: Example:
Financial Class code to be extracted not description, extract has 'MEDICARE SHARED', but it should have 'B9' Pregnancy mapping, extract has ('Y','N','U'), expected values ('yes','no','unknown') Exam sub division mapping, extract has ('L','R','B'), expected values ('left','right','bilateral') Please refer to mapping and example in the extraction specifications for all of the above
I haven't had a chance to look at the data and format of MIGRATED_PROCDATA and MIGRATED_REPTDATA yet, I will check them soon and give you my feedback. I will also be working on any mismatches between RIS and PACS data, data extracts for any identified mismatches will have to be provided.
Let me know if you would like to discuss some of this over the phone for further clarification. We could arrange to talk sometime tomorrow.
Thanks,
IDIS Data Migration Analyst - UCPH Digital Solutions Program Mobile : Email
From: Arsavilli, Dev
Sent: Tuesday, 12 June 2018 12:53 PM To: (Health)
cc: Crossley, Nick < Nick.Crossley@act.gov.au>;
Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]
Thank you for helping us with this. is looking in to this and hope that there will not be any issues.
Kind Regards,
Dev
Dev Arsavilli Project Manager

| Mobile | Email: <u>Dev.Arsavilli@act.gov.au</u> | ad Governance Branch | Digital Solutions Division | Health Directorate | ACT Government | Phillip ACT | GPO Box 825, Canberra ACT 2601 | act.gov.au

| mailto | esday, 12 June 2018 12:37 AM | | (Health) < | act.gov.au > | | (Health) < | Crossley, Nick < Nick.Crossley@act.gov.au >; | Subject: RIS Extracts and Attachments (2 months)

Hello

Just to let you know that RIS attachments and extracts are now available.

All documents can be picked up from: SIESDM2: /data/mnt/syspart01/syngo

```
Jun 8 05:02 dischment idocs.dat
Jun 11 23:03 attachment scans.dat
Jun 11 23:03 attachment zseg.dat
Jun 11 23:01 doctors.rpt
Jun 11 23:04 exam attachment.dat
Jun 11 23:04 exams.dat
Jun 7 11:46 doc
Jun 11 23:05 patients.dat
Jun 11 23:05 result attachment.dat
Jun 11 23:06 results.dat
Jun 7 10:33 seems
Jun 11 23:06 service.dat
```

Please let me know if you have 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



Please consider the environment before printing this email

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

Sent: Wed, 6 June 2018 2:45 PM To: (Health) (Health) (Health) Cc: Crossley, Nick; Arsavilli, Dev; (Subject: RE: Today's call [SEC=UNCLASSIFIED]
We should be OK to meet on Friday. If you do have any further updates on the RIS extracts/attachments, please do let us know. Thanks,
IDIS Data Migration Analyst - UCPH Digital Solutions Program Mobile :
Sent: Wednesday, 6 June 2018 2:36 PM To: (Health) < act.gov.au>; (Health) Cc: Crossley, Nick < Nick. Crossley@act.gov.au>; Arsavilli, Dev < Dev. Arsavilli@act.gov.au>; Subject: Today's call
Hello and and
Apologies for being late to the call as meeting got moved by the time I tried to join in.
I am available now if you want to have a call instead of Friday.
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



Please consider the environment before printing this email

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. (NZ) by return email and delete the document.

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

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.

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document. CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this ressage in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

∠ca (Health)	
(Health) Monday, 25 June 2018 3:32 PM Arsavilli, Dev; (Health); (Health); RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]	
Hi The testing of the attachments has been prioritised. We should be able to give you a go ahead for the attachments by the end of this week.	S
Thanks,	
IDIS Data Migration Analyst - UCPH Digital Solutions Program Email:	
From: [mailto: Sent: Monday, 25 June 2018 3:22 PM To: [Health] < act.gov.au>	
Cc: Arsavilli, Dev < Dev.Arsavilli@act.gov.au>; (Health) < Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]	
Hello	
also wanted to bring the following to your attention. If you could confirm that would be great	
Kind Regards,	
iemens Healthcare Pty Ltd 60 Herring Road Macquarie Park NSW 2113	
Fel: +61 (0) 2 9491 5009 Mobile: Email:	
nternet: www.healthcare.siemens.com.au	



Please consider the environment before printing this email

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

Sent: Wed, 20 June 2018 11:57 PM To: Health)' Cc: 'Arsavilli, Dev'; Health)'; Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]
Hello
I am mindful that the full 100% for both RIS and PACS is expected on the 23 rd July as per SOW. Just wantedto remind you that Zseg bulk will take about a month to generate. If you could confirm that you are satisfied with them then perhaps we can get a head start on that.
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
SIEMENS Healthineers :
Please consider the environment before printing this email CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.
Sent: Wed, 20 June 2018 11:49 PM To: (Health)' Cc: Arsavilli, Dev; (Health); Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]
Hello Sunitha,
Can you please confirm that you are require the same 2 month period for the 29 th June RIS extract delivery?
If same period, do you require the full set of data as seen below?

From:

```
attachment scans.dat
doctors.rpt
result_attachment.dat
scens
```

Just want to also confirm if you require same period PACS extract?

Kind Regards,

iemens Healthcare Pty Ltd 160 Herring Road Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile:

Email:

Internet: www.healthcare.siemens.com.au



Please consider the environment before printing this email

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is chibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

From:	(Health) [mailto	act.gov.au
Combo Ward 20 7.	2010 2 00 PM	

Sent: Wed, 20 June 2018 3:09 PM

Cc: Arsavilli, Dev; (Health)

Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]

To:

These are corrections needed in the extract provided for cycle 5. The statement of Work does not include dates for any rework needed for corrections.

Let me know if you are OK with this not being in the SOW, if not this can be discussed with Dev. Thanks,

	IDIS Data Migrat	tion Analyst - UCPH Digital Solutions Progra	am
Mobile:	Email:	act.gov.au	

Sent: Wednesday, 20 June 2018 2:59 PM

To: act.gov.au>; com> Cc: Arsavilli, Dev < Dev.Arsavilli@act.gov.au>; (Health) < Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]
Hiller
Thanks for the info.
The dates you indicated below, are they are the same as what we have in the updated RIS/PACS Statement of Works or do we need to update?
Best regards
From: (Health) [mailto act.gov.au] Sent: Wednesday, 20 June 2018 12:43 PM To: Cc: Arsavilli, Dev; (Health); Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]
The decision at this stage is to go ahead with test cycle 5 with the below issues noted as known issues. To stay on schedule, testing has to commence tomorrow and we do not have the time to get it fixed by then. But all extraction issues raised as part of testing will be communicated to you. We will be in a position to hand over the complete list of issues by COB 26/06(next Tuesday). We will be doing one additional test cycle to test the fixes from cycle5 (extraction issues as outlined below + any issues raised during testing) which is due to commence on the 4th of July. Leaving a couple of days for me to work on the transformations and for AGFA to load the data, we would like the corrected extracts from you on the 29th of June.
Key dates: Complete list of issues by 26/06 Extracts from Siemens by 29/06 Test cycle 6 to commence on 04/07.
Let me know if you need any further details.
Other than what is being discussed via emails, I have nothing else to be discussed at the meeting today. I am OK to skip today's meeting, let me know if you have something and would like to go ahead.
Thanks,
IDIS Data Migration Analyst - UCPH Digital Solutions Program Email: act.gov.au
From: [mailto] Sent: Wednesday, 20 June 2018 11:54 AM To: (Health) < act.gov.au > (Cc: Arsavilli, Dev < Dev.Arsavilli@act.gov.au >; (Health) <
Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]
Hallo

Thank you for the feedback. I will forward these to the team

Do you need a new set of extracts and documents for the same period?

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



Please consider the environment before printing this email

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

(Health) [mailto Sent: Wed, 20 June 2018 11:40_AM Cc: Arsavilli, Dev; (Health); Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]

Hi

Thanks for the extracts and sorry for the late feedback.

The extracts look good but they do have a few issues as described below:

Service and Exam files had a duplicate header row in the extract file (last row was a header row), I have corrected this myself and have loaded the file successfully.

The following accession numbers are missing extracted result records (exists in the DB but not extracted)

- Question about this accession number was raised previously as well
- all these below cancelled exams seem to have signed off reports, why was this not extracted?

The following accession numbers do not have an associated Study_UID (exists in the DB but not extracted)

These are cancelled exams with associated studies, why was this not extracted?

Scanned docs, interactive docs and zSeg docs for cancelled exams have not been included.

Following accession numbers do not have the outside film and scheduling notes text attachment data: StudyStatus mapping for cancelled exams should be 'CA', the extract has it mapped as 'CN' ScheduledStudyDateTime(Procedure extract) for cancelled exams to be mapped to visit_activity.ord_for_dtime, this is a mandatory field in AGFA, so cannot be left blank, business decision is to map it to ord for dtime (not specified in the specifications as mapping has not been included as part of the document) Could you please look into these and get them fixed Thanks, | IDIS Data Migration Analyst - UCPH Digital Solutions Program Mobile: | Email: act.gov.au From: (Health) Sent: Wednesday, 13 June 2018 4:01 PM Cc: Arsavilli, Dev <Dev.Arsavilli@act.gov.au>; (Health) < Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED] Hi Just found one additional issue with the Procedure extract: Study details for acc_itn = has not been correctly extracted. The DB has 2 confirmed studies for the accession number, the extract has one row with accession number = and Study_UID = ". Could you get this checked? I have completed all my verification checks on RIS, this email trail has a complete list of all RIS issues found so far. I will send you a separate email for the additional PACS records needed. Thanks. | IDIS Data Migration Analyst - UCPH Digital Solutions Program act.gov.au

(Health) Sent: Wednesday, 13 June 2018 11:41 AM To: (Health) < Arsavilli, Dev <Dev.Arsavilli@act.gov.au> Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]

Hi

Below are my findings for the text attachments data.

Please pass this on to your team and let me know if you need any further clarifications.

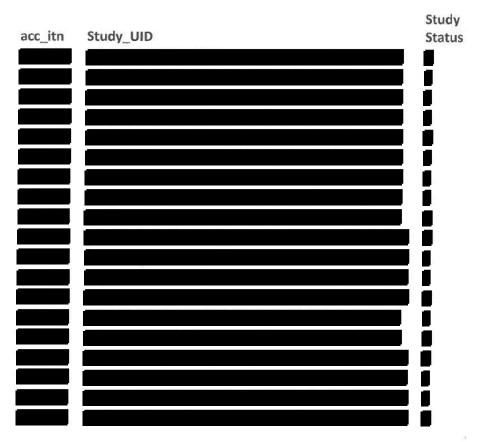
Still to match the RIS and PACS extract for the given period, I will get back to you with any feedback on that.

1. Scheduling notes 1, 2, 3 and 4 not extracted

MBSCodes mapping not as expected:For Exams, where the procedure is mapped to multiple cpt_codes, the codes haven't been extracted as expected:
Example: Acc_itn dtl_svc_code cpt_code1 cpt_code2 cpt_code3 Attachment.content
Only 2 of the codes extracted out of 4
For Exams, where the procedure is mapped to a customised cpt_code(mapping in cpt_data, cpt_codes), the code has not been extracted Example:
Acc_itn dtl_svc_code cpt_codes.cpt_code Attachment.content MustCode MBSCodes:Mustcode The customised code mapping has not been extracted
3. Cancellation reason not extracted Example Acc_itn cancellation dtime init Reason Attachment.content 1 2017-06-26 16:25:00 CJP CHANGE OF EXAM FOR CORRECT CHARGING CANCELLATION_REASON:
Outside film not extracted: 25 Acc_itns found in the extract that should have been mapped as 'Y', the remaining data should have been mapped as 'N'
Below are a few examples
5. Addendum by details not extracted:
Example Acc_itn addendum dtime addendum by Attachment.content 2017-07-30 14:46:00 ADDENDUM_BY_DETAILS:
Thanks,
Mobile : IDIS Data Migration Analyst - UCPH Digital Solutions Program Email: act.gov.au
From: (Health) Sent: Tuesday, 12 June 2018 5:36 PM To: <
Cc: Arsavilli, Dev < Dev.Arsavilli@act.gov.au > Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED]
Hi Thanks for the extracts:
My feedback is as follows
Data for cancelled exams (data from dbo.visit_activity) has not been extracted.

2. Linked studies should have been excluded, but have been included in the below extract:

All rows marked with a study status 'L' should have been excluded



3. Result not extracted for acc_itn = is this a one with the incorrect header template)?

4. There are some scanned images that associate to more than one accession numbers. The attachments extract fails to capture this.

One such example:

Scan_image_itn acc_itn type

REFERRAL REFERRAL

But the attachment extract has the following:

FN acc_itn type Code Content

PAS RP SCAN DOCUMENT REFERRAL SCAN tif

The link between Acc_itn and the scanned image is lost

- 5. Duplicate rows of text attachments where code = 'Migrated reptdata'
- 6. Accession numbers in text attachments have been sequenced (.02,.03) no sequencing needed, one attachment to be produced for every accession number.
- 7. Text attachment content format not as expected:

Example:

Financial Class code to be extracted not description, extract has 'MEDICARE SHARED', but it should have 'B9' Pregnancy mapping, extract has ('Y','N','U'), expected values ('yes','no','unknown') Exam sub division mapping, extract has ('L','R','B'), expected values ('left','right','bilateral') Please refer to mapping and example in the extraction specifications for all of the above

I haven't had a chance to look at the data and format of MIGRATED_PROCDATA and MIGRATED_REPTDATA yet, I will check them soon and give you my feedback.

I will also be working on any mismatches between RIS and PACS data, data extracts for any identified mismatches will have to be provided.

Let me know if you would like to discuss some of this over the phone for further clarification. We could arrange to talk sometime tomorrow.

Thanks,

| IDIS Data Migration Analyst - UCPH Digital Solutions Program Email: From: Arsavilli, Dev Sent: Tuesday, 12 June 2018 12:53 PM (Health) act.gov.au> Crossley, Nick < Nick. Crossley@act.gov.au >; (Health) < Cc: Subject: RE: RIS Extracts and Attachments (2 months) [SEC=UNCLASSIFIED] hank you for helping us with this. is looking in to this and hope that there will not be any issues. Kind Regards, Dev Dev Arsavilli | Project Manager | Email: Dev.Arsavilli@act.gov.au Phone: 02 6174 8729 | Mobile 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: Tuesday, 12 June 2018 12:37 AM act.gov.au> To: (Health) < (Health) < Crossley, Nick < Nick.Crossley@act.gov.au >; Arsavilli, Dev 'Dev.Arsavilli@act.gov.au>; Jubject: RIS Extracts and Attachments (2 months) Hello Just to let you know that RIS attachments and extracts are now available.

All documents can be picked up from: SIESDM2: /data/mnt/syspart01/syngo

```
Jun 8 05:02 2826

Jun 11 23:02 attachment idocs.dat

Jun 11 23:03 attachment scans.dat

Jun 11 23:03 attachment zseg.dat

Jun 11 23:01 doctors.rpt

Jun 11 23:04 exam_attachment.dat

Jun 11 23:04 exams.dat

Jun 7 11:46 idoc

Jun 11 23:05 patients.dat

Jun 11 23:05 result attachment.dat

Jun 11 23:06 results.dat

Jun 7 10:33 scan-

Jun 11 23:06 service.dat
```

Please let me know if you have 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



Please consider the environment before printing this email

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

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

Sent: Wed, 6 June 2018 2:45 PM

To: Cc: Crossley, Nick; Arsavilli, Dev;

Subject: RE: Today's call [SEC=UNCLASSIFIED]

Hi

We should be OK to meet on Friday.

If you do have any further updates on the RIS extracts/attachments, please do let us know.

Thanks,

From: [mailto			
Sent: Wednesday, 6 June 2018 2:36 PM			- 10
To: (Health) <	act.gov.au>;	(Health)	
<			
Cc: Crossley, Nick < Nick.Crossley@act.gov.au	u>; Arsavilli, Dev < <u>Dev.Arsa</u>	villi@act.gov.au>;	
<			
Subject: Today's call			
Hello and and			

Apologies for being late to the call as meeting got moved by the time I tried to join in.

I am available now if you want to have a call instead of Friday.

Kind Regards,

iemens Healthcare Pty Ltd 160 Herring Road Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: Email:

Internet: www.healthcare.siemens.com.au



Please consider the environment before printing this email

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is ohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

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.

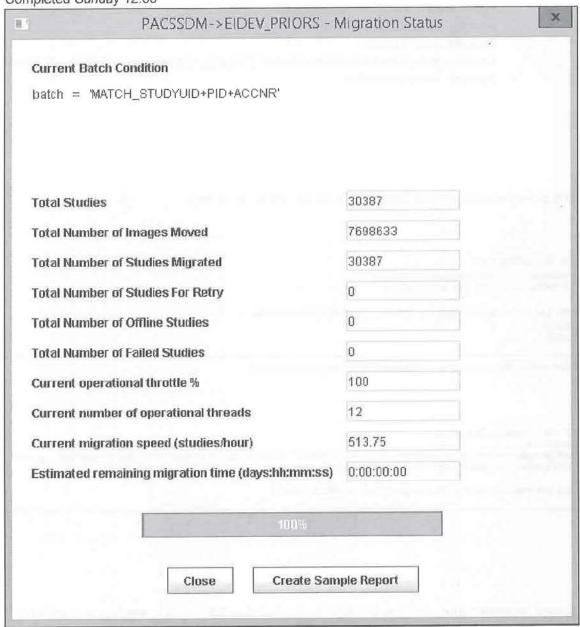
CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document. CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that

any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document. CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document. CAUTION - This message may contain privileged and confidential information intended only for the use of the addressee named above. If you are not the intended recipient of this message you are hereby notified that any use, dissemination, distribution or reproduction of this message is prohibited. If you have received this message in error please notify Siemens Ltd. or Siemens Ltd. (NZ) by return email and delete the document.

Monday, 25 June 2018 8:44 AM (Health) Arsavilli, Dev; (Health) RE: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]	_
Hi Table	
I'll check with but it looks the window for 20 threads was 22:00 - 05:00 on all days	
Kind Regards,	
+61 3 9756 4308 F +61 2 9647 2742 M	
Australia Pty Ltd. Unit 18, 52 Holker St, Silverwater NSW 2128 Australia http://www.agfahealthcare.com http://blog.agfahealthcare.com	
Click on link to read important disclaimer: http://www.agfahealthcare.com/maildisclaimer	
Cc: "Arsavilli, Dev" <dev.arsavilli@act.gov.au>, nick Date: 25/06/2018 08:40 Subject: RE: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]</dev.arsavilli@act.gov.au>	nieros naixes
Thanks	
That's looking like a good result for performance – just over 24 hours per month. I note that in each screenshot, the numbe threads was 12. Does this mean that the DICOM migration was done using 'standard' hours – i.e. normal weekday peak and peak? Just want to make sure that we got the overnight hours at least at the 20 thread count so we can do good estimates the full migration.	off-
Thanks	
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: Monday, 25 June 2018 7:19 AM To: (Health) < Cc: Arsavilli, Dev < Dev. Arsavilli@act.gov.au>; Subject: Re: FW: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]	

See the following updates on the current DICOM Migration......

Completed Sunday 12:55



Sunday 09:55

- MATCH CTUDY UD DID GOOD		
= 'MATCH_STUDYUID+PID+ACCNR'		
Total Studies	30387	
Total Number of Images Moved	7341542	
Total Number of Studies Migrated	29092	
Total Number of Studies For Retry	0	
Total Number of Offline Studies	0	
Total Number of Failed Studies	0	
Current operational throttle %	100	
Current number of operational threads	12	
Current migration speed (studies/hour)	518.56	
stimated remaining migration time (days:hh:mm:ss)	0:02:29:56	
95%		

Saturday 17:30

Current Batch Condition	
batch = 'MATCH_STUDYUID+PID+ACCNR'	
Total Studies	30387
Total Number of Images Moved	5117408
Total Number of Studies Migrated	20128
Total Number of Studies For Retry	0
Total Number of Offline Studies	0
Total Number of Failed Studies	0
Current operational throttle %	100
Current number of operational threads	12
Current migration speed (studies/hour)	506.67
Estimated remaining migration time (days:hh:mm:ss)	0:20:15:11
66%	
	× ·

Saturday 08:30

d Batch Condition		
.ch = 'MATCH_STUDYUID+PID+ACCNR'		
Total Studies	30387	
Total Number of Images Moved	3778355	
Total Number of Studies Migrated	14594	
Total Number of Studies For Retry	0	
Total Number of Offline Studies	0	
Total Number of Failed Studies	0	
Current operational throttle %	100	
Current number of operational threads	12	
Current migration speed (studies/hour)	474.89	
Estimated remaining migration time (days:hh:mm:ss)	1:09:15:10	
8%		
Cancel Create Sam	ple Report	



Australia Pty Ltd. Unit 18, 52 Holker St, Silverwater NSW 2128 Australia http://www.agfahealthcare.com http://blog.agfahealthcare.com

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

Cc: "Arsavilli, Dev" < Dev. Arsavilli@act.gov.au>,			
	 	M 06V :	
Date: 22/06/2018 11:17			

Subject: Re: FW: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Current Batch Condition		
batch = 'MATCH_STUDYUID+PID+ACCNR'		
_		
Total Studies	30387	
Total Number of Images Moved	427793	
Total Number of Studies Migrated	1690	
Total Number of Studies For Retry	0	
Total Number of Offline Studies	0	
Total Number of Failed Studies	0	
Current operational throttle %	100	
Current number of operational threads	12	
Current migration speed (studies/hour)	178.80	
Estimated remaining migration time (days:hh:mm:ss)	6:16:29:45	
5%		

Kind Regards,

T +61 3 9756 4308 | F +61 2 9647 2742 | M

Australia Pty Ltd. Unit 18, 52 Holker St, Silverwater NSW 2128 Australia http://www.aqfahealthcare.com http://blog.agfahealthcare.com

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

Cc: "Arsavilli, Dev" < <u>Dev.Arsavilli@act.gov.au</u>>,
Date: 22/06/2018 11:05
Subject: FW: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

orthur,

Are you able to confirm that the RIS load did complete and that the DICOM load is now running? The RISPACS team has checked PACS load and it is elevated but running within limits, but that doesn't tell us whether that is just normal daily use.

Thanks

| IDIS Delivery Manager - UCPH Digital Solutions Program
| Phone: 02 6174 8768 | Mobile: | Email: | Email: |
| Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government Level 10, Building 1, TCH, Garran ACT | PO 80x 11, Woden ACT 2606 | www.act.gov.au

From:	[mailto			
Sent: Friday,	22 June 2018 1:51 AM			
To:	(Health) <	act.gov.au>;	(Health) <	
<				
	Dev < <u>Dev. Arsavilli@act.gov.au</u>	>;	Mandapati, Sirisha (He	alth)
<sirisha.man< td=""><td>dapati@act.gov.au>;</td><td><</td><td></td><td></td></sirisha.man<>	dapati@act.gov.au>;	<		
abject: [AUS	6 - ACT] Patient data migration	and ACTPAS Integration [9]	SEC=UNCLASSIFIED)	

@All,

The HL7 migration was started towards EI, but the large volume of data in this extract has limited my time. Also the amount of attachment is very high already, and that is slowing down the migration. The amount of attachment has a linear effect on the performance of HL7 messages to EI.

Executed:

- The ORM migration is completed (didn't have time to verify for errors, but nothing obvious)
- Started the ORU migration (should be done +/- 05h00 local time)
- Start the DICOM migration for studies going directly from the source to EI (without updates) (tested with 1 study to be sure)

@

- Procedure codes: This did not 'solve' all the studies with procedure code = 'NM', the remaining have been ignored
- Pipe in content: I did replace those
- NULL content: I removed these from the migration
- 2 missing attachment: Ok, I got the message for this (and only for these)

Extra

Attachment codes: DEXAQFORM & MIGRATED_DOCS in the extract don't exist in El. I have created these in El.

Things I wasn't able to complete in time:

- Process the sheet with PIDs to updated (they should be excluded until | active them)
- Check the 2 AccNo with the DICOM based order (they are not in the running batch either)

Kind Regards,



→ Low availability: June 25 th – June 29 th → Holiday alert: July 25 th – August 15 th
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
From: act.gov.au]
Sent: Thursday 21 June 2018 9:52 To: (Health) <
Cc: Arsavilli, Dev < <u>Dev.Arsavilli@act.gov.au</u> >; Mandapati, Sirisha (Health)
<sirisha.mandapati@act.gov.au> Subject: RE: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]</sirisha.mandapati@act.gov.au>
I have attached a file with the ProcedureCode corrections, as mentioned the extract has codes and names from an older version of basedata, but the provided list should be from the most recent basedata collection. Could you please replace the ' ' in the text attachment with '\F\', will make a note of this and will replace any in the data going forward. Could you also exclude attachment records with no content, will make a note of this too and exclude them on my end for future extracts.
I have also attached a sheet with StudyUIDs and patient mrns for patientID merges to be performed while migrating DICOM images. The 2 PACS exception accession numbers for which the images need to be migrated as DICOM based images are as follows:
SDMMO35SHC SDMFF4WRIC Also, as a quick note that the attachments extract has 2 records for zSegment documents for accession numbers , but the actual documents for these records are missing. Please exclude them from migration at this stage.
Let me know if you need any further details, I will be here for the next half an hour or so,
Thanks,
Sunitha IDIS Data Migration Analyst - UCPH Digital Solutions Program Mobile : Email: Email:
From: [mailto] Sent: Thursday, 21 June 2018 4:22 PM
To:
Arsavilli, Dev < <u>Dev.Arsavilli@act.gov.au</u> >; Mandapati, Sirisha (Health) < <u>Sirisha.Mandapati@act.gov.au</u> >; Barrett, Scott (Health) < <u>Scott.Barrett@act.gov.au</u> >; Crossley, Ni< < <u>Nick.Crossley@act.gov.au</u> >; Subject: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]
Hi,
I'll wait for confirmation before I send data to EI. Now preparing the data.
Kind Regards,
T STATE OF THE STA
→ Low availability: June 25 th – June 29 th → Holiday alert: July 25 th – August 15 th

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

(Health) [mailto act.gov.au] Sent: Thursday 21 June 2018 8:19 (Health) < Arsavilli, Dev <Dev.Arsavilli@act.gov.au>; Cc: Mandapati, Sirisha (Health) < Sirisha.Mandapati@act.gov.au >; Barrett, Scott (Health) < Scott.Barrett@act.gov.au >; Crossley, Nick <Nick.Crossley@act.gov.au> Subject: RE: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Thanks for the feedback.

could you hold on from loading the RIS data into EI and Scheduling for now as our test team is still working on the patient merges?

I will let you know when the merges have been finalised for you to go ahead with the load.

The test work has been delayed as we thought the patients had not been loaded into the system yet, now that we have confirmation, the testers are working on it.

I will look into your comments and get back to you soon.

Thanks,

| IDIS Data Migration Analyst - UCPH Digital Solutions Program | Email: act.gov.au [mailto From: Sent: Thursday, 21 June 2018 4:13 PM To: (Health) < Arsavilli, Dev < Dev. Arsavilli@act.gov.au >; Mandapati, Sirisha (Health) <Sirisha.Mandapati@act.gov.au>; act.gov.au>; Barrett, Scott (Health) <Scott.Barrett@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>;

Subject: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Hi All,

I'm importing the data for the Cycle 5 and noticed the following:

- Attachment file
 - Has 2 entries that contain a pipe (|) sign in the actual text in the extract. These need to be escaped / replaced with \F\.
 - +/- 50.000 entries have an empty 'content', I removed these during import
- Req proc
 - The procedure code and description for code 'NM' is not unique. I'm not sure this was mentioned before as we didn't have any issues with this so far I think. But the procedure code and descriptions need to be unique combinations for El migrations.

Kind Regards,

→ Low availability: June 25 th – June 29 th → Holiday alert: July 25 th – August 15 th
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
From: (Health) [mailto] Sent: Thursday 21 June 2018 7:12
To:
We would like to run Cycle 5 image migration as follows:
 Process to begin at 08:00 (our time) Friday 22 June or as soon as possible afterwards once RIS migration complete. Peak and off-peak hours to remain as before, i.e. peak 5:00 – 22:00, off-peak 22:00 to 05:00, all Saturday and Sunday to be off-peak until 05:00 Monday. Run 12 threads during peak hours and 20 threads off-peak. Scott Barrett to have a support number to call in case the process must be paused due to adverse system impacts.
Mark Duggan will be notifying MI users that the test will be in progress.
Thanks
IDIS Delivery Manager - UCPH Digital Solutions Program Phone: 02 6174 8768 Mobile: Email:
From: [mailto] Sent: Thursday, 21 June 2018 2:18 PM To:
< <u>Sirisha.Mandapati@act.gov.au</u> >; (Health) < <u>act.gov.au</u> >; (Health)
Subject: Re: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]
Hi
I placed the rest of the files to be migrated to the folder 'Cycle 5\Cycle 5 Files 20062018" on the desktop of the migration server.
Hi
Please confirm

 $\label{eq:def-peak} \mbox{DICOM migration, Start time, peak/off-peak hours and number of threads to be confirmed.}$

Kind Regards,

T +61 3 9756 4308 F +61 2 9647 2742 M
Australia Pty Ltd. Unit 18, 52 Holker St, Silverwater NSW 2128 Australia http://www.agfahealthcare.com http://blog.agfahealthcare.com
Click on link to read important disclaimer: http://www.agfahealthcare.com/maildisclaimer
Cc: T, "Dev. Arsavilli@act.gov.au" < Dev. Arsavilli@act.gov.au> Cc: T, "Mandapati, Sirisha (Health)" < Sirisha Mandapati@act.gov.au>, Date: 20/06/2018 22:57 Subject: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]
Hi All,
The EI database was cleaned earlier today and the patient migration is currently running.
It should be finished in +/- 1 hour.
Kind Regards,
→ Low availability: June 25 th – June 29 th
→ Holiday alert: July 25 th – August 15 th
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
From: [mailto:
Sent: Wednesday 20 June 2018 4:33 To: Dev.Arsavilli@act.gov.au
Ce: Sirisha (Health) < Sirisha. Mandapati@act.gov.au>; (Health) < act.gov.au>; (Health) <
Subject: RE: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Hi Dev,

I checked with and the clearing out of the Test data in Dev will impact the BI work that is being done by and a global resource. However I thing it is best to put this work on hold and proceed as planned with the clearing of the DBs and migration tasks. The BI work can recommence after this.

Kind Regards,



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

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

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

From: "Arsavilli, Dev" < Dev. Arsavilli@act.gov.au>

, "Mandapati, Sirisha (Health)" <<u>Sirisha.Mandapati@act.gov.au</u>>

Subject: RE: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Hi

Please see the activities outlined below by for Cycle 5 Data Migration.

Day 1(Wed - 20/06/2018)

AGFA

- Wipe off all data from the existing environment. (Testing team have given their approval, activities might need the existing data).
- · Load Patient data.

Day 2(Thursday - 21/06/2018)

Health

- Test team to work on a few patient merges to test the process that has been outlined in the email below (Migrated RIS data to reference current active Patient IDs).
- to provide RIS and PACS extract files.
- to provide a list of accession numbers to the test team for on demand image pull testing.
- DICOM migration, Start time, peak/off-peak hours and number of threads to be confirmed.

AGFA

- Load RIS data into EI and Scheduling.
- Schedule DICOM image migration for Friday morning our time.
- to provide details/steps to perform on demand image pull.

Day 3(Fri - 22/06/2018) onwards (for a week)

Health

 Test team to test on demand image pull. Continue with the test cases related to RIS data migration and DICOM image migration.

Any issues please could you let me know?

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: (Health) Sent: Wednesday, 20 June 2018 7:56 AM To: Cc: Arsavilli, Dev < Dev. Arsavilli@act.gov.au>; Cc: Arsavilli, Dev < Dev. Arsavilli@act.gov.au>; Subject: RE: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]
OK, thanks
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: Tuesday, 19 June 2018 7:00 PM Lo: [Health] < Cc: Arsavilli, Dev < Dev. Arsavilli@act.gov.au>;
Hi
I have never reached the theoretical limit, but indeed, at some point the performance will decline. We normally execute migration on well performing systems with anything between 10 and 32 threads. If you can provide me an overview of the amount of threads and the time window to be configured I can easily set that up during the next tests.
Kind Regards,
T → Low availability: June 25 th – June 29th
→ Holiday alert: July 25 th – August 15 th
Agfa HealthCare 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
From: (Health) [mailto] Sent: Tuesday 19 June 2018 2:51 To: Cc: Arsavilli, Dev < Dev. Arsavilli@act.gov.au>; (Health) (Health)
Subject: RE: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

As part of Test cycle 5 we would also like to further test the potential limits on the number of threads we run for image migration during peak and off-peak times. This will also hopefully include increased off-peak hours. To assist us to decide on thread counts, is there a theoretical maximum number of threads that we could run? I would expect that at some point adding threads would be counter-productive because of the load.

At this point we are thinking of running 10-12 threads during peak and monitoring impact closely, and 20-25 threads during off-peak, depending on whether those numbers are feasible.

Your advice would be appreciated.

Thanks

| 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: (Health)
Sent: Tuesday, 19 June 2018 10:24 AM

To: Solution of the control of the c

Subject: RE: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Hi.

As part of our next round of testing (test cycle 5), we would like to test the below scenario by loading patient data first and getting our test team to merge a few Patient IDs before loading the related RIS/PACS data.

I would like to hand over the patient data file for this cycle which is about 2 MB in size. An ftp location was to be provided by AGFA for this cycle of test data, could you please pass on the details to me and I will upload the file very soon.

Could you please look into wiping off all existing data in EI and Scheduling and load the first batch of Patient data for test cycle 5.

Thanks,

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

From: [mailto:

Sent: Wednesday, 13 June 2018 9:09 PM

To: (Health) < act.gov.au> (Health) < act.gov.au>; Arsavilli, Dev

<Dev.Arsavilli@act.gov.au>;
Subject: RE: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Hi

The migration strategy (document attached) described a scenario for HL7 that is a little bit different. The difference is that we would like to receive the patient/doctor/order/report data at the same time, with data until the cut-off point that was chosen.

You questions is still valid in this scenario, but it shouldn't cause for a problem:

- When a patient id is merge in EI, the old patient id will be created if it isn't known. So that is can actually merge that old to the new patient ID.
- This way, the old PID will be known in EI and in the HL7 migration database.
- When the message is send in with the OLD PID (from HL7 migration), EI will still
 know the OLD PID and link the order to that patient entry (so linked to the NEW PID
 that has a 'MERGED' entry in the database)

What I also want to add is the scenario where a patient is updated by the live feed and old data is still present to be migrated in the HL7 migration database:

 In this case, the patient will be known with more recent (correct) data in EI and known with old (incorrect) data in the HL7 migration database. The migrator tool will also handle this, by always checking if a patient is already
present in EI and actually reading the data from EI, to generate the HL7 migration
messages. So this avoid overwriting correct data with old data.

Kind Regards,
T T T T T T T T T T T T T T T T T T 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
From: (Health) [mailto: act.gov.au] Sent: Wednesday 13 June 2018 8:50
To: Select: Wednesday 15 June 2018 8.50 To: Select: Wednesday 15 June 2018 8.50 Cc: Select: Health) < Arsavilli, Dev < Note: Subject: Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]
Hi Could you please look into the below data migration question relating to ACTPAS integration.
From what I understand so far, the migration activities involved are as following: All patient data up to a specific cut-off date will be extracted, cleansed and transformed. While the patient data is being worked on, all ADT messages will be queued from the cut-off date onwards. Patient data will then be provided to AGFA and will be loaded. ACTPAS interface will then be turned on and the queued messages will be applied to keep the data up-to-date. RIS data up till the same cut-off date will be extracted/transformed and provided to AGFA for loading (note the time lag between the patient data load and the RIS data load). Any patient merges applied on the patient data from the cut-off date up till the RIS data load will now have to be implemented on the RIS data. Question: If PatientID is merged to PatientID in the time lag between patient data load and RIS data load, the provided RIS data will have services/procedures against the old PatientID will this RIS data be identified and merged to the new PatientID as part of data migration?
Thanks,
IDIS Data Migration Analyst - UCPH Digital Solutions Program Mobile :
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.

Jand, Rebecca (Health)

From:	
Sent:	Monday, 25 June 2018 7:19 AM
To:	(Health)
Cc:	Arsavilli, Dev; (Health);
Subject:	Re: FW: [AUS - ACT] Patient data migration and ACTPAS Integration [SEC=UNCLASSIFIED]

Hi

See the following updates on the current DICOM Migration......

Completed Sunday 12:55



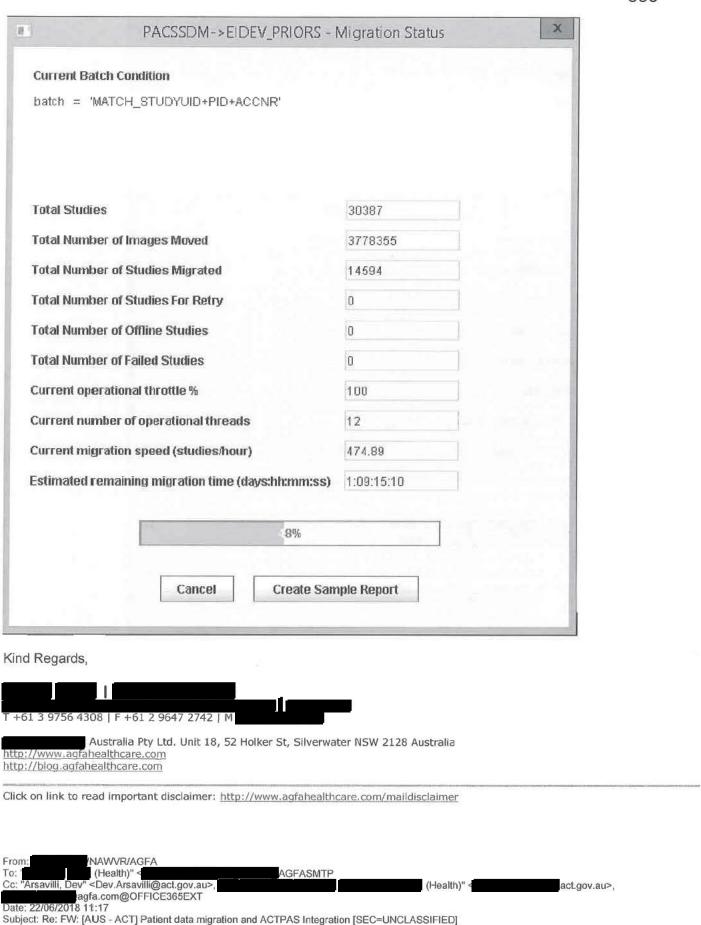
Sunday 09:55

Current Batch Condition		
batch = 'MATCH_STUDYUID+PID+ACCNR'		
Total Studies	30387	
Total Number of Images Moved	7341542	
Total Number of Studies Migrated	29092	
Total Number of Studies For Retry	0	
Total Number of Offline Studies	0	
Total Number of Failed Studies	0	
Current operational throttle %	100	
Current number of operational threads	12	
Current migration speed (studies/hour)	518.56	
Estimated remaining migration time (days:hh:mm:ss)	0:02:29:56	
95%		
3000		
Cancel Create Sam	pple Report	

Saturday 17:30

Current Batch Condition		
batch = 'MATCH_STUDYUID+PID+ACCNR'		
Total Studies	30387	
Total Number of Images Moved	5117408	
Total Number of Studies Migrated	20128	
Total Number of Studies For Retry	0	
Total Number of Offline Studies	0	
Total Number of Failed Studies	0	
Current operational throttle %	100	
Current number of operational threads	12	
Current migration speed (studies/hour)	506.67	
Estimated remaining migration time (days:hh:mm:ss)	0:20:15:11	
06%		
Cancel Create San	nple Report	

Saturday 08:30



Yes DICOM load is running and at 12 Threads as requested.

PACSSDM->EIDEV_PRIORS -	Migration Status	x
Current Batch Condition batch = 'MATCH_STUDYUID+PID+ACCNR'		
Total Studies	30387	
Total Number of Images Moved	427793	
Total Number of Studies Migrated	1690	
Total Number of Studies For Retry	0	
Total Number of Offline Studies	0	
Total Number of Failed Studies	0	
Current operational throttle %	100	
Current number of operational threads	12	
Current migration speed (studies/hour)	178.80	
Estimated remaining migration time (days:hh:mm:ss)	6:16:29:45	
5% Cancel Create San	nple Report	
Australia Pty Ltd. Unit 18, 52 Holker St, Silverwald/www.agfahealthcare.com		
NAWVR/AGFA@AGFA		
		OFF