

- Will need to generate the bulk attachments ahead of time ready for bulk migration commencement date. Siemens to initiate as soon as all is in place.

[ME] [REDACTED] has indicated that the attachment extract records do not match the provided attachment files. [REDACTED] to follow up

e. RIS Part C – Z Segments

- Require a date for this, close to 25/1 as possible
- Delivered ahead of schedule
- Canberra has not fully reviewed as yet but looks OK.

[ME] still in review process by [REDACTED] and [REDACTED]

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



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: [REDACTED]

Sent: Tue, 6 February 2018 3:27 PM

To: [REDACTED] Crossley, Nick; [REDACTED] [REDACTED] (Health); [REDACTED] [REDACTED] (Health); Arsavilli, Dev

Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 31/01/18

Hi All

Notes from our meeting last week. Apologies for late delivery. Please let me know if any amendments.

Please note I will be an apology for tomorrow's meeting as attending 2 day offsite training course. I will leave you in the capable hands of [REDACTED]

Deliverables:

3. RIS/PACS 20% Test Extract

a. PACS

- Issue raised – Delimiters incorrect. Siemens to fix.
- Issue raised – Misc feedback for rest to be sent today. [REDACTED] to send

b. RIS

- RAW data delivered and triaged by Canberra
 - ACTION (Canberra)** Report file mapping queries outstanding – [REDACTED] to send through this afternoon

- ii. **ACTION (Siemens)** Query – Need to understand where the scheduled procedures reside and require a process to bring them across.
 - iii. **ACTION (Siemens to investigate)** – Performing Drs not having provider numbers, but have an internal number only. (DFT Billing message is sent). Not ideal for Canberra to use these internal Dr numbers that are currently being included in the extracts.
 - iv. **ACTION (Siemens)** – Audit Count info to be included with extracts. Need primarily for final extracts.
 - 1. i.e. 1.5M extracted, 1.4M extracted, 100k not extracted because they had no study associated with it. Merged patients. Should be in logic.
- c. Alignment of RIS/PACS Extracts – Some accession numbers missing on PACS extract that exist in RIS but not in PACS and vice versa
- 1. **ACTION (Siemens, when required)** - Canberra requested Siemens provide delta extract for any missing accession numbers for both RIS and PACS

b. RIS GAP Analysis / Data Mapping

- i. Feedback provided by [REDACTED] 24/1, Siemens to action – Complete.
- ii. Once queries answered re mappings, milestone can be considered met
- iii. Canberra may have further queries about some fields if they cannot find in GUI with help from Sys Admin team
- iv. Any additional data may need to come via attachments (if any) (outside scope of current project)
- v. **ACTION (Canberra)** - RIS Report File Comments are missing. Canberra to send file back removing comments now resolved.

c. PACS Gap Analysis / Data Mapping

- i. Feedback provided by [REDACTED] 24/1 - Complete.
- ii. **ACTION (Siemens)** Missing Info for Data Mapping for the optional fields in Agfa files and Gaps Analysis missing. Siemens to re-issue.
- iii. **ACTION (ACT Health)** ACT health to resend their document with other possible fields that we should include in our file.

d. RIS Part B – Attachments

- i. 20% load has completed
- ii. Attachments have now fully been generated. Hopefully complete by tomorrow.
 - For consideration with bulk extract
 - Could take 1 month to generate the entire bulk extract of attachments, 100,000 per day currently generated).
 - Will need to generate the bulk attachments ahead of time ready for bulk migration commencement date. Siemens to initiate as soon as all is in place.

e. RIS Part C – Z Segments

- i. Require a date for this, close to 25/1 as possible
- ii. Delivered ahead of schedule
- iii. Canberra has not fully reviewed as yet but looks OK.

Best regards

[REDACTED]
[REDACTED]
Sent: Wednesday, 24 January 2018 2:43 PM

[REDACTED] 'Crossley, Nick'; [REDACTED] (Health)';
[REDACTED] (Health)'; [REDACTED] (Health)'; 'Arsavilli, Dev'

Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 24/01/18

Hi All

Notes from our meeting today. Please let me know if any amendments.

Deliverables:

20% Test Extract

- d. PACS
 - a. Data delivered by Siemens
 - b. Yet to be reviewed, will be done once RIS data available
- e. RIS
 - a. RAW data delivered,
 - b. Attachments still being generated. Hopefully complete by tomorrow.
 - c. Could take 1 month to generate the entire bulk extract of attachments, 100,000 per day currently generated.
 - d. Will need to generate the bulk attachments ahead of time ready for bulk migration commencement date. Siemens to initiate as soon as all is in place.
 - e. There are no Z segments no earlier than 2012 available, confirmed by all.
- f. Storage
 - a. 2TB space has been provisioned.

RIS GAP Analysis / Data Mapping

- Feedback provided by [REDACTED] 24/1, Siemens to action.
- Once queries answered re mappings, milestone can be considered met
- May have further queries about some fields if they cannot find in GUI with help from Sys Admin team
- Any additional data may need to come via attachments (if any) (outside scope of current project)

PACS Gap Analysis / Data Mapping

- Feedback provided by [REDACTED] 24/1, Siemens to action.
- Missing Info for Data Mapping for the optional fields in Agfa files. Siemens to chase.
- PACS tables documentation missing. Siemens to check what is available. [REDACTED] confirmed documentation not readily available being a legacy product.

RIS Part B – Attachments

- 20% load is progressing

RIS Part C – Z Segments

- Require a date for this, close to 25/1 as possible
- Delivered ahead of schedule

General

- All on track at this point.

Best regards

[REDACTED]

[REDACTED]

Sent: Wednesday, 24 January 2018 2:10 PM

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

[REDACTED] (Health); [REDACTED] (Health)

Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 17/01/18

Hi All

Notes form our meeting on 17/1/17.

Deliverables:

20% Test Extract

- g. Need share ready for extracts. 2TB space will be provisioned. Drive attached to the network (plug into USB port).

h. Looks for share for non attachments

RIS GAP Analysis

- Want with 20%

PACS Gap Analysis

- Want with 20%

PACS Data Mapping

- Do the RIS one same as the PACS
- Only includes the Agfa fields that are mandatory, needs to include the optional

RIS Data Mapping

- Want to know the fields not mapped for the RIS

RIS Part B – Attachments

- 20% on track

RIS Part C – Z Segments

- Require a date for this, close to 25/1 as possible
- Initially want small sample (like we did initially)
- Want 20% at a later date

TEST Extracts

Accession numbers in result file are fine

Not tested loading the attachments

Best regards

Sent: Wednesday, 10 January 2018 3:04 PM

(Health); Crossley, Nick;

Cc: Duggan, Mark (Health);

Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18

Hi All

Please see my Meeting Notes following our meeting today (in blue).

MEETING NOTES:

1. RIS/PACS Test Extract

a. ME 10/01 - New RIS extracts, RIS PDF attachments, RIS scans delivered by Siemens on 09/01/18

b. ACTION – Siemens to get clarification on all topics and confirm date revised extracts will be delivered.

Target – 15th December

- GM 15/12 – Clarifications are in progress between [REDACTED] We will deliver updated extracts no later than Wednesday 20th December.
- PR 15/12 – thank you. Due to Christmas holiday, we will need to have extracts the earliest the possible by Monday 18th. As we officially shut down on Thursday, and [REDACTED] will

- need time to analyse, transform, digest the information and forward to AGFA and loaded on Dev by the 22nd Dec 2017.
- iii. GM 20/12 – New extracts have been provided for both RIS and PACS on Monday 18th December
 - iv. 20/12 – Canberra team confirmed most data loaded well into the Agfa system. Canberra would like to better understand why something may not be in RIS but in PACS. █████ confirmed very difficult for Siemens to explain this and Canberra should leverage knowledge of their System Administrator whom are responsible for data in and out of RIS/PACS since go-live. ACT Health to discuss variations with RIS/PACS Administrators.
- c. **ACTION** – Siemens to confirm delivery date of mapping documentation as per SoW. **Target** – 15th December
- i. GM 15/12 – Mapping document to be delivered by Wednesday 20th December.
 - ii. PR 15/12 – Excellent!
 - iii. GM 18/12 – Delivered Monday 18th December
 - iv. PR 15/12 – Excellent
 - v. PR 19/12 – Thanks for the extracts and mappings for RIS (apologies). Thank you and we look forward in seeing the csv files. Yes, everything is looking 'ok' so far, but with regards to the gap analysis it reads very light in content. Can Siemens provide us with more information on the database, quite a bit that's missing?
 - vi. GM 19/12 – Can you provide some examples of what you think is missing? I am not familiar with the front end so wondering if you could provide examples of other fields that are not being migrated to the Agfa system that may be of use? As this is a subjective exercise of what is clinically important, if you have some examples from your side that will help.
 - vii. GM 20/12 – █████ sent through feedback for Mapping File and Gap Analysis. I will feedback and request updated copies of both documents. Timing of these documents dependant on prioritisation against other deliverables.
 - viii. 20/12 – Canberra team confirm this is priority #2, and asked us to target for delivery on 8th Jan. █████ confirmed a good source of information for the gap analysis is the original document he put together at the outset of the project. █████ highlighted that leveraging the System Administrators knowledge of the front-end would be a valuable source of information for any clinically relevant data.
 - ix. ME 10/01 – Gap Analysis, DB Fields and Data Retention tool documents delivered on 10/01/2018
 - x. TP 10/01 – █████ advised that GAP Analysis DB Fields file can be used as both mapping and Gap analysis document. Require and extra Mapping column highlighting fields mapped to Agfa. PB and SS to provide further feedback.
 - xi. TP/SS 10/01 – █████ and █████ are happy with latest extracts and are confident with upcoming 20% test data upload. Do not envisage any changes to latest extracts. Advised not to include period of 01-01-2013 to 20-01-2013 in 20% delivery to avoid duplication
 - xii. ME 10/01 – Advised that we will need confirmation ASAP about extracts to get ball rolling for the 20% delivery. Advised that delivery will happen on 20/01 if no changes are required.
 - xiii. TP 10/01 – █████ advised to send deliverables as part of the 20% that are ready prior to 20/01/18
 - xiv. ME 10/01 – Advised that I will bring this up with the team but cannot promise any deliveries before 20/01/18

2. Duplicate Accession Number Issue

- a. Siemens delivered new RIS extracts containing changes to the Accession Number on the Result file on 9th January 2018
- b. █████ provided feedback on the 10/01/18 advising that change to Accession number works

c. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by **15th December**.

- i. GM 15/12 – Our data migration team are uncomfortable with changing the accession number. Reason being is that this is the unique number that links to the report. This number is created by the RIS and is then sent on to downstream systems (i.e. PACS, HIS) and is referred to on Radiology Report that may be with a patient. I want to find a solution for you here. Could we have a technical discussion with Agfa to try and find a path forward?
- ii. PR 15/12 – We understand why Siemens would be uncomfortable, unfortunately, this is the only approach we have in having Siemens modify accession numbers we have and we have discussed this with AGFA. The modified accession number and approach to deal with related image migration, has been discussed previously with AGFA. They are aware of the work involved. Thank You.
- iii. PB 19/12 - Also, as for the Accession numbers, with the 'script' and time/material for Siemens to make those changes, can we explore how much effort will your technical resource be able to commit as an option to make those changes? [REDACTED] and [REDACTED] will get back to you. As for the attachments, how much of a push back are we seeing, in days, weeks?
- iv. GM 19/12 – As mentioned below, I may not know until the 2nd January. I would however expect days, not weeks. I just need to understand how to prioritise the tasks, whether this tasks precedent over the Part 2 Test migration scheduled for 12th Jan.
- v. GM – 20/12 – Overnight our Data Migration resource confirmed approximately 3 additional days effort to do this change and also indicated up to 2 weeks delay in delivery of remaining items in SoW. Canberra to prioritise which tasks our Data Migration resource should focus on from 2nd January.
- vi. 20/12 – Canberra confirmed that this change is priority #3 and asked us to deliver this with the 20% test data extract requested by 19th January. Siemens confirmed this timing is fine.
- vii. ME – Closed

3. PACS Test System

- a. [REDACTED] confirmed that to create a Test PACS system, we require a VM with an oracle license. Then the back-up could be important into the VM.
- b. **ACTION** – Siemens to provide a quote to create a Test PACS VM including Professional Services and an Oracle license. **Target – Wednesday 20th December**
 - i. GM 20/12 – Siemens has supplied the CSV DB export of key tables from DB as interim measure. Siemens unable to provide a quotation for an oracle license for a test server. As Imaging PACS is a legacy system, Siemens no longer have an arrangement in place with Oracle we can leverage for short term use license.
 - ii. 20/12 - All agreed to park this for now and use the CSV method for PACS DB. [REDACTED] confirmed we can supply refreshed CSV's for the 5 PACS tables upon request in place of the PACS back-ups mentioned in the SoW.

c. **ACTION** – [REDACTED] to confirm a storage location to store the attachments. **Target – Wednesday 20th December**

i. **PR 15/12** – Target is for 2nd of January 2018 as the samples will be delivered by the 3rd of January 2018.

ii. **ME 09/01** – Requested details of the share. Advised that this will be required for the 20% and final deliveries. Advised we need this ASAP

iii. **NC 10/01** – [REDACTED] working on this

d. [REDACTED] requested in interim, whether an export of the tables used in the PACS migrations was possible to a CSV.

e. **ACTION** – [REDACTED] to confirm whether CSV exports of tables used in PACS extract is possible by 15th December.

i. **GM 15/12** – This is possible but quite a bit of work involved from our side to make happen. There would also be a limitation with Excel when opening the CSV due to size of the tables so you won't be able to work with it in Excel. The best and fastest option is to go with the oracle option. From my understanding of oracle licensing, you can install oracle and start work whilst the purchase happens in the background to move forward. Has ACT health got any arrangement in place with Oracle directly?

ii. **PR 15/12** – ACT Health does not have an Oracle agreements in place, the csv is going to be loaded into sql server, excel will not be used to analyse, so therefore size is not an issue.

iii. **GM 20/12** – CSV extracts provided 19/11/17.

iv. **20/12** – [REDACTED] to finish loading CSV files. All looks OK so far and good solution.

f. **ACTION** – [REDACTED] to confirm whether CSV exports of tables used in PACS extract is possible by 15th December.

g. **ME 10/01** - Closed

4. RIS Extract Part 2 - Attachments

a. [REDACTED] requested an example of each type of attachment file (Interactive documents, protocol documents, clinical alerts & scanned images) a head of the target delivery date of 12th January as per SoW.

b. **ACTION** – [REDACTED] to request and confirm an indicative date by 15th December.

i. **GM 15/12** – I can confirm we can deliver this on 3rd January.

ii. **PR 15/12** – [REDACTED] and [REDACTED] will be away until the 8th of January. This is fine.

iii. Following the meeting [REDACTED] requested whether this could be delivered by 20th December.

iv. **GM** – The SoW has this task due 12th Jan. I have resource allocated to do this from 2nd January and can confirm this sample set will be delivered by 3rd January. Due to planned leave next week and being the week before Xmas it will be difficult for me to find an alternate resource to meet 20th December. Can you work with this timing? (We have

provided a good sample set of attachments previously which maybe a good start. You may also be able to get the info you required from your System Administrator?).

v. PR 15/12 - Fine

vi. GM 20/12 – Needs to be prioritised against the accession number change on 2) above.

vii. 20/12 – Canberra agreed this task is #1 priority, this will be commenced on 2nd January by Siemens resource when back from leave. This will be ready for Canberra team when back on 8th January.

viii. ME 09/01 – Siemens delivered attachment files on the 09/01/18.

ix. PB/SS 10/01 - [REDACTED] and [REDACTED] are happy with the delivered attachments. Non-Standard PDFs are not in scope for 20% delivery but want to know when will the work start and when can they expect delivery.

5. New Test Extract request

- a. [REDACTED] requested a new test extract for RIS (including attachments) and PACS to be delivered by 19th January which contains 20% of total data
- b. [REDACTED] confirmed it would be great if we can secure 2 months data from each year to make up the 20% extract
- c. **ACTION – [REDACTED]** to confirm whether this date is achievable. **Target – Wednesday 20th December**
 - I. GM 20/12 – Needs to be prioritised against the accession number change on 2) above.
 - II. GM 20/12 – Priority # 3, will be delivered by 19th January. Part A is priority only for 19th January. This deliverable has been prioritised over the Part B – Attachments Test Extract due for 12th January in the SoW.
- d. **ACTION - Siemens to confirm new timing for delivery of the Part B – Attachments Test Extract by 8th January 2018.**
- e. ME 10/01 - Closed

6. SDC trial

- a. Siemens confirmed that we need to know by Xmas if a SDC trial is required during January due to set-up tasks/prep.

- b. [REDACTED] confirmed PO is still in progress and with Mark.
- c. Canberra team confirmed to put on hold until further notice

7. leave

- a. [REDACTED] back on 15th Jan

8. Next meeting

- a. Wed 17th Jan

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

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.

[REDACTED]
Sent: Wed, 20 December 2017 3:05 PM

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

Cc: Duggan, Mark (Health); [REDACTED]

Subject: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 20/12/17

Hi All

Please see my Meeting Notes following our meeting today (in purple).

Further to the notes/actions, we prioritised the deliverables for our RIS data migration resource upon return on 2nd Jan as follows:

1. Attachments Samples (3rd Jan)
2. Mapping Document & Gap Analysis (8th Jan)
3. Accession Number Change (on 19th Jan with 20% migration for RIS/PACS) – Part A

4. Test Data Extract - Part B – Attachments

As always, please let me know if any corrections.

MEETING NOTES:1. **RIS/PACS Test Extract**

- a. New extract sent by Siemens 8th December
- b. ██████ sent feedback 13th December
- c. ██████ stepped through the questions relating to the RIS extract in her feedback
- d. ██████ stepped through the questions relating to the PACS extract in her feedback
- e. **ACTION** – ██████ to send sample data for the topics discussed in c) and d) above by **COB 13th December**.
Complete
- f. **ACTION** – Siemens to get clarification on all topics and confirm date revised extracts will be delivered. **Target – 15th December**
 - i. **GM 15/12** – Clarifications are in progress between ██████ We will deliver updated extracts no later than **Wednesday 20th December**.
 - ii. **PR 15/12** – thank you. Due to Christmas holiday, we will need to have extracts the earliest the possible **by Monday 18th**. As we officially shut down on Thursday, and Sunitha will need time to analyse, transform, digest the information and forward to AGFA and loaded on Dev by the **22nd Dec 2017**.
 - iii. **GM 20/12** – New extracts have been provided for both RIS and PACS on **Monday 18th December**
 - iv. **20/12** – Canberra team confirmed most data loaded well into the Agfa system. Canberra would like to better understand why something may not be in RIS but in PACS. ██████ confirmed very difficult for Siemens to explain this and Canberra should leverage knowledge of their System Administrator whom are responsible for data in and out of RIS/PACS since go-live. ACT Health to discuss variations with RIS/PACS Administrators.
- g. **ACTION** – Siemens to confirm delivery date of mapping documentation as per SoW. **Target – 15th December**
 - i. **GM 15/12** – Mapping document to be delivered by **Wednesday 20th December**.
 - ii. **PR 15/12** – Excellent!
 - iii. **GM 18/12** – Delivered **Monday 18th December**
 - iv. **PR 15/12** – Excellent
 - v. **PR 19/12** – Thanks for the extracts and mappings for RIS (apologies). Thank you and we look forward in seeing the csv files. Yes, everything is looking 'ok' so far, but with regards to the gap analysis it reads very light in content. Can Siemens provide us with more information on the database, quite a bit that's missing?
 - vi. **GM 19/12** – Can you provide some examples of what you think is missing? I am not familiar with the front end so wondering if you could provide examples of other fields that are not being migrated to the Agfa system that may be of use? As this is a subjective exercise of what is clinically important, if you have some examples from your side that will help.
 - vii. **GM 20/12** - ██████ sent through feedback for Mapping File and Gap Analysis. I will feedback and request updated copies of both documents. Timing of these documents dependant on prioritisation against other deliverables.
 - viii. **20/12** – Canberra team confirm this is priority #2, and asked us to target for delivery on **8th Jan**. ██████ confirmed a good source of information for the gap analysis is the original document he put together at the outset of the project. ██████ highlighted that leveraging the System Administrators knowledge of the front-end would be a valuable source of information for any clinically relevant data.

2. **Duplicate Accession Number Issue**

- a. ██████ updated team on ██████ questions from last meeting regarding transformation of accession numbers ID to make unique
- b. ██████ highlighted data transformations are out of scope as per the SoW

- c. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by **15th December**.
- i. GM 15/12 – Our data migration team are uncomfortable with changing the accession number. Reason being is that this is the unique number that links to the report. This number is created by the RIS and is then sent on to downstream systems (i.e. PACS, HIS) and is referred to on Radiology Report that may be with a patient. I want to find a solution for you here. Could we have a technical discussion with Agfa to try and find a path forward?
 - ii. PR 15/12 – We understand why Siemens would be uncomfortable, unfortunately, this is the only approach we have in having Siemens modify accession numbers we have and we have discussed this with AGFA. The modified accession number and approach to deal with related image migration, has been discussed previously with AGFA. They are aware of the work involved. Thank You.
 - iii. PB 19/12 - Also, as for the Accession numbers, with the 'script' and time/material for Siemens to make those changes, can we explore how much effort will your technical resource be able to commit as an option to make those changes? [REDACTED] and [REDACTED] will get back to you. As for the attachments, how much of a push back are we seeing, in days, weeks?
 - iv. GM 19/12 – As mentioned below, I may not know until the 2nd January. I would however expect days, not weeks. I just need to understand how to prioritise the tasks, whether this tasks precedent over the Part 2 Test migration scheduled for 12th Jan.
 - v. GM – 20/12 – Overnight our Data Migration resource confirmed approximately 3 additional days effort to do this change and also indicated up to 2 weeks delay in delivery of remaining items in SoW. Canberra to prioritise which tasks our Data Migration resource should focus on from 2nd January.
 - vi. 20/12 – Canberra confirmed that this change is priority #3 and asked us to deliver this with the 20% test data extract requested by 19th January. Siemens confirmed this timing is fine.

3. PACS Test System

- a. [REDACTED] confirmed that to create a Test PACS system, we require a VM with an oracle license. Then the back-up could be important into the VM.
- b. **ACTION** – Siemens to provide a quote to create a Test PACS VM including Professional Services and an Oracle license. **Target – Wednesday 20th December**
 - i. GM 20/12 – Siemens has supplied the CSV DB export of key tables from DB as interim measure. Siemens unable to provide a quotation for an oracle license for a test server. As Imaging PACS is a legacy system, Siemens no longer have an arrangement in place with Oracle we can leverage for short term use license.
 - ii. 20/12 - All agreed to park this for now and use the CSV method for PACS DB. [REDACTED] confirmed we can supply refreshed CSV's for the 5 PACS tables upon request in place of the PACS back-ups mentioned in the SoW.
- c. **ACTION** – [REDACTED] to confirm a storage location to store the attachments. **Target – Wednesday 20th December**
 - i. PR 15/12 – Target is for 2nd of January 2018 as the samples will be delivered by the 3rd of January 2018.
- d. [REDACTED] requested in interim, whether an export of the tables used in the PACS migrations was possible to a CSV.
- e. **ACTION** – [REDACTED] to confirm whether CSV exports of tables used in PACS extract is possible by **15th December**.
 - i. GM 15/12 – This is possible but quite a bit of work involved from our side to make happen. There would also be a limitation with Excel when opening the CSV due to size of the tables so you won't be able to work with it in Excel. The best and fastest option is to go with the oracle option. From my understanding of oracle licensing, you can install oracle and start work whilst the purchase happens in the background to move forward. Has ACT health got any arrangement in place with Oracle directly?
 - ii. PR 15/12 – ACT Health does not have an Oracle agreements in place, the csv is going to be loaded into sql server, excel will not be used to analyse, so therefore size is not an issue.

- iii. GM 20/12 – CSV extracts provided 19/11/17.
 - iv. 20/12 – ██████ to finish loading CSV files. All looks OK so far and good solution.
4. **RIS Extract Part 2 - Attachments**
- a. ██████ requested an example of each type of attachment file (Interactive documents, protocol documents, clinical alerts & scanned images) a head of the target delivery date of 12th January as per SoW.
 - b. **ACTION** – ██████ to request and confirm an indicative date by 15th December.
 - i. GM 15/12 – I can confirm we can deliver this on 3rd January.
 - ii. PR 15/12 – ██████ and ██████ will be away until the 8th of January. This is fine.
 - iii. Following the meeting ██████ requested whether this could be delivered by 20th December.
 - iv. GM – The SoW has this task due 12th Jan. I have resource allocated to do this from 2nd January and can confirm this sample set will be delivered by 3rd January. Due to planned leave next week and being the week before Xmas it will be difficult for me to find an alternate resource to meet 20th December. Can you work with this timing? (We have provided a good sample set of attachments previously which maybe a good start. You may also be able to get the info you required from your System Administrator?).
 - v. PR 15/12 - Fine
 - vi. GM 20/12 – Needs to be prioritised against the accession number change on 2) above.
 - vii. 20/12 – Canberra agreed this task is #1 priority, this will be commenced on 2nd January by Siemens resource when back from leave. This will be ready for Canberra team when back on 8th January.
5. **New Test Extract request**
- a. ██████ requested a new test extract for RIS (including attachments) and PACS to be delivered by 19th January which contains 20% of total data
 - b. ██████ confirmed it would be great if we can secure 2 months data from each year to make up the 20% extract
 - c. **ACTION** – ██████ to confirm whether 2 months of each year is viable option or suggest an alternative.
Target – Wednesday 20th December
 - i. GM 20/12 – This is viable.
 - ii. GM 20/12 – Closed.
 - d. **ACTION** – ██████ to confirm whether this date is achievable. **Target – Wednesday 20th December**
 - i. GM 20/12 – Needs to be prioritised against the accession number change on 2) above.
 - ii. GM 20/12 – Priority # 3, will be delivered by 19th January. Part A is priority only for 19th January. This deliverable has been prioritised over the Part B – Attachments Test Extract due for 12th January in the SoW.
 - e. **ACTION** - Siemens to confirm new timing for delivery of the Part B – Attachments Test Extract by 8th January 2018.
6. **SDC trial**
- a. Siemens confirmed that we need to know by Xmas if a SDC trial is required during January due to set-up tasks/prep.
 - b. ██████ confirmed PO is still in progress and with Mark.
 - c. Canberra team confirmed to put on hold until further notice
7. **Xmas period leave**
- a. ██████ – back on 2nd Jan
 - b. Canberra team – back on 8th Jan.
 - c. ██████ – back on 15th Jan
8. **Next meeting**
- a. Wed 10th Jan

Best regards

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

Sent: Friday, 15 December 2017 12:20 PM

To: ██████ Crossley, Nick; ██████

(Health); [REDACTED] (Health)

Cc: [REDACTED] (Health); Duggan, Mark (Health); [REDACTED]

Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Importance: High

Hi [REDACTED]

Thank you for your quick response!

I have highlighted my question in red.

Warm Regards,

[REDACTED]

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

Sent: Friday, 15 December 2017 11:05 AM

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

<[REDACTED]> [REDACTED]

[REDACTED] (Health) <[REDACTED]>

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

[REDACTED] <[REDACTED]>

Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi All

Please find below amended minutes as per feedback from [REDACTED]

I have also included updates for the items flagged for today in **brown**.

1. RIS/PACS Test Extract

- a. New extract sent by Siemens 8th December
- b. [REDACTED] sent feedback 13th December
- c. [REDACTED] stepped through the questions relating to the RIS extract in her feedback
- d. [REDACTED] stepped through the questions relating to the PACS extract in her feedback
- e. **ACTION** – [REDACTED] to send sample data for the topics discussed in c) and d) above by **COB 13th December**.
Complete
- f. **ACTION** – Siemens to get clarification on all topics and confirm date revised extracts will be delivered.
Target – 15th December
 - i. GM – Clarifications are in progress between [REDACTED] We will deliver updated extracts no later than Wednesday 20th December.
PR – thank you. Due to Christmas holiday, we will need to have extracts the earliest the possible by Monday 18th. As we officially shut down on Thursday, and Sunitha will need time to analyse, transform, digest the information and forward to AGFA and loaded on Dev by the 22nd Dec 2017.
ACTION – Siemens to confirm delivery date of mapping documentation as per SoW. **Target – 15th December**
 - ii. GM – Mapping document to be delivered by Wednesday 20th December.
PR – Excellent!

Duplicate Accession Number Issue

- g. [REDACTED] updated team on [REDACTED] questions from last meeting regarding transformation of accession numbers ID to make unique
- h. [REDACTED] highlighted data transformations are out of scope as per the SoW
- i. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by **15th December**.

i. GM – Our data migration team are uncomfortable with changing the accession number. Reason being is that this is the unique number that links to the report. This number is created by the RIS and is then sent on to downstream systems (i.e. PACS, HIS) and is referred to on Radiology Report that may be with a patient. I want to find a solution for you here. Could we have a technical discussion with Agfa to try and find a path forward?

PR – We understand why Siemens would be uncomfortable, unfortunately, this is the only approach we have in having Siemens modify accession numbers we have and we have discussed this with AGFA. The modified accession number and approach to deal with related image migration, has been discussed previously with AGFA. They are aware of the work involved. Thank You.

[REDACTED] to escalate to [REDACTED] if Siemens unable to make this modification as per SoW)

2. PACS Test System

- a. [REDACTED] confirmed that to create a Test PACS system, we require a VM with an oracle license. Then the back-up could be important into the VM.
 - b. **ACTION** – Siemens to provide a quote to create a Test PACS VM including Professional Services and an Oracle license. **Target – Wednesday 20th December**
 - c. **ACTION** – [REDACTED] to confirm a storage location to store the attachments. **Target – Wednesday 20th December**
- PR – Target is for 2nd of January 2018 as the samples will be delivered by the 3rd of January 2018.
- d. [REDACTED] requested in interim, whether an export of the tables used in the PACS migrations was possible to a CSV.
 - e. **ACTION** – [REDACTED] to confirm whether CSV exports of tables used in PACS extract is possible by **15th December**.

i. GM – This is possible but quite a bit of work involved from our side to make happen. There would also be a limitation with Excel when opening the CSV due to size of the tables so you won't be able to work with it in Excel. The best and fastest option is to go with the oracle option. From my understanding of oracle licensing, you can install oracle and start work whilst the purchase happens in the background to move forward. Has ACT health got any arrangement in place with Oracle directly?

ii. PR – ACT Health does not have an Oracle agreements in place, the csv is going to be loaded into sql server, excel will not be used to analyse, so therefore size is not an issue.

3. RIS Extract Part 2 - Attachments

- a. █████ requested an example of each type of attachment file (Interactive documents, protocol documents, clinical alerts & scanned images) a head of the target delivery date of 12th January as per SoW.
- b. **ACTION** – █████ to request and confirm an indicative date by 15th December.
- i. GM – I can confirm we can deliver this on 3rd January.
- ii. PR – █████ and █████ will be away until the 8th of January. This is fine.
- c. Following the meeting █████ requested whether this could be delivered by 20th December.
- i. GM – The SoW has this task due 12th Jan. I have resource allocated to do this from 2nd January and can confirm this sample set will be delivered by 3rd January. Due to planned leave next week and being the week before Xmas it will be difficult for me to find an alternate resource to meet 20th December. Can you work with this timing? (We have provided a good sample set of attachments previously which maybe a good start. You may also be able to get the info you required from your System Administrator?).
- ii. PR - fine.

4. New Test Extract request

- a. █████ requested a new test extract for RIS (including attachments) and PACS to be delivered by 19th January which contains 20% of total data
- b. █████ confirmed it would be great if we can secure 2 months data from each year to make up the 20% extract
- c. **ACTION** – █████ to confirm whether 2 months of each year is viable option or suggest an alternative.
Target – Wednesday 20th December
- d. **ACTION** – █████ to confirm whether this date is achievable. **Target – Wednesday 20th December**

Best regards

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

Sent: Wednesday, 13 December 2017 4:11 PM

██████████ ██████████ Crossley, Nick; ██████████

Cc: █████ █████ (Health); Duggan, Mark (Health)

Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Thank You █████ I look forward in speaking with you and █████ on Friday with excellent feedback from our conversation today.

██████████ will be providing examples/samples for █████ today from our conversations this afternoon.

Have a lovely day mate.

Warm Regards,

██████████

From: [REDACTED] [mailto:[REDACTED]]
 Sent: Wednesday, 13 December 2017 4:05 PM
 To: Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] <[REDACTED]>
 [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]>
 [REDACTED] <[REDACTED]> [REDACTED] (Health)
 <[REDACTED]@act.gov.au>
 Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>
 Subject: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17

Hi All

Minutes and actions from today's meeting. Please let me know if any amendments.

1. RIS/PACS Test Extract

- a. New extract sent by Siemens 8th December
- b. [REDACTED] sent feedback 13th December
- c. [REDACTED] stepped through the questions relating to the RIS extract in her feedback
- d. [REDACTED] stepped through the questions relating to the PACS extract in her feedback

ACTION – [REDACTED] to send sample data for the topics discussed in c) and d) above by **COB 13th December**.

ACTION – Siemens to get clarification on all topics. **Target** – **15th December**

2. Duplicate Accession Number Issue

- e. [REDACTED] updated team on [REDACTED] questions from last meeting regarding transformation of accession numbers ID to make unique
- f. [REDACTED] highlighted data transformations are out of scope as per the SoW
- g. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by **15th December**.

([REDACTED] to escalate to [REDACTED] if Siemens unable to make this modification as per SoW)

3. PACS Test System

- h. [REDACTED] confirmed an export of oracle DB to single file is possible. For this to occur the production database would need to be taken down.
- i. [REDACTED] confirmed that to create a Test PACS system, we require a VM with an oracle license. Then the back-up could be important into the VM.
- j. **ACTION** – Siemens to provide a quote to create a Test PACS VM including Professional Services and an Oracle license.
Target – **Wednesday 20th December**

k. **ACTION** – [REDACTED] to confirm a storage location to store the PACS Database Export. **Target** – **Wednesday 20th December**

l. [REDACTED] requested in interim, whether an export of the tables used in the PACS migrations was possible to a CSV.

m. **ACTION** – [REDACTED] to confirm whether CSV exports of tables used in PACS extract is possible by **15th December**.

1. [REDACTED] will cover [REDACTED] whilst on leave so all correspondence to include both [REDACTED] and [REDACTED]

2. RIS/PACS Test Extract

a. [REDACTED] updated team on progress since last week

i. Test extract triaged by [REDACTED] Friday last week

ii. Errors found in both RIS and PACS extracts

iii. Received new PACS extract Monday, further issues found

iv. Received new RIS extract Tuesday, further issues found

v. Expect new extracts Thursday, if all OK can send through Friday (earliest)

b. Team discussed accuracy of extracts being an issue, and [REDACTED] seeing firsthand what [REDACTED] was facing with earlier extracts

c. [REDACTED] confirmed this is the most time consuming task of the process. Once test extract in place and accurate, further extracts will be easy to generate

d. Team acknowledged we need to ensure the extract is correct from the source, as opposed to modifying the extracts themselves to meet timelines.

e. [REDACTED] confirmed timeline of 12th Dec on track

f. [REDACTED] confirmed date of 12th Dec in SoW should have indicated a completion of the test migration as opposed to delivery of test extract

3. Duplicate Accession Number Issue

g. [REDACTED] asked whether Siemens can modify extract make accession numbers unique

h. [REDACTED] agreed to investigate

4. PACS Migration

i. [REDACTED] indicated SDC pilot proposal likely to proceed

j. Siemens will need to receive requests from the Agfa RIS to move studies in that order

k. SDC Pilot likely to be requested for Jan

l. GM to tentatively schedule resources for January

5. PACS Extract

m. [REDACTED] request a new single PACS database extract be produced by Siemens. [REDACTED] will investigate if possible

n. [REDACTED] requested a network drive

6. Timeline clarification

o. [REDACTED] asked for clarification of how migration activity sits on critical path of the project

- p. [REDACTED] confirmed important that there is sufficient time for 2 years studies to be migrated prior to Agfa go-live
- q. [REDACTED] indicated a successfully partial migration needs to be completed by 2nd Feb
- r. Plan is to test full test migration during Feb
- s. Production migration to begin start of March

Best regards

[REDACTED]
[REDACTED]

Siemens Healthcare Pty Ltd (Australia)

885 Mountain Highway

Bayswater, 3153

Mobile: [REDACTED]

Work: +61 (0)3 9721 7507

[REDACTED]
www.healthcare.siemens.com.au

<< OLE Object: Picture (Device Independent Bitmap) >>

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.

Heland, Rebecca (Health)

From: [REDACTED] [REDACTED] (Health)
Sent: Tuesday, 6 February 2018 5:52 PM
To: [REDACTED] [REDACTED]
Cc: [REDACTED] [REDACTED] (Health)
Subject: RE: Sample examples [SEC=UNCLASSIFIED]

Hi [REDACTED]

The accession numbers mentioned below seem to have been fixed with the current 2014 updated load.

Thanks,

[REDACTED]

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

From: [REDACTED] [REDACTED] [mailto:[REDACTED]]
Sent: Tuesday, 6 February 2018 3:14 PM
To: [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au>
Cc: [REDACTED] [REDACTED] (Health) <[REDACTED]>
Subject: RE: Sample examples [SEC=UNCLASSIFIED]

Thank you for the update [REDACTED]

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

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.

From: [REDACTED] [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]
Sent: Tue, 6 February 2018 3:13 PM
To: [REDACTED]
Cc: [REDACTED] [REDACTED] (Health)
Subject: RE: Sample examples [SEC=UNCLASSIFIED]

Hi [REDACTED]

The 2014 Study file was comma separated in the initial extract provided (though I did load it, the commas in the data itself must have messed up the load and hence reported as mismatches).

This file has now been fixed, I will reload the updated data and validate the missing accession numbers.

I will get back to you on this very soon.

Thanks,

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

From: [REDACTED] [mailto:[REDACTED]]
Sent: Tuesday, 6 February 2018 1:30 PM
To: [REDACTED] (Health) <[REDACTED]@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]>
Subject: RE: Sample examples [SEC=UNCLASSIFIED]

Hello [REDACTED]

Our team checked the PACS extracts against the first 2 accession numbers provided below and were found in the PACS_Canberra_export_study_2014JanFeb.txt. Can you please confirm that the list below is correct?

[REDACTED]
 [REDACTED]

Kind Regards,

[REDACTED]
 [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

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.

[REDACTED]
 [REDACTED]

Sent: Fri, 2 February 2018 2:52 PM

To: [REDACTED] (Health)

Cc: [REDACTED] (Health)

Subject: RE: Sample examples [SEC=UNCLASSIFIED]

Heland, Rebecca (Health)

From: [REDACTED] (Health)
Sent: Tuesday, 6 February 2018 3:13 PM
To: [REDACTED]
Cc: [REDACTED] (Health)
Subject: RE: Sample examples [SEC=UNCLASSIFIED]

Hi [REDACTED]
 The 2014 Study file was comma separated in the initial extract provided (though I did load it, the commas in the data itself must have messed up the load and hence reported as mismatches).
 This file has now been fixed, I will reload the updated data and validate the missing accession numbers.
 I will get back to you on this very soon.

Thanks,

[REDACTED]

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

From: [REDACTED] [mailto:[REDACTED]]
Sent: Tuesday, 6 February 2018 1:30 PM
To: [REDACTED] (Health) <[REDACTED]@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]>
Subject: RE: Sample examples [SEC=UNCLASSIFIED]

Hello [REDACTED]

Our team checked the PACS extracts against the first 2 accession numbers provided below and were found in the PACS_Canberra_export_study_2014JanFeb.txt. Can you please confirm that the list below is correct?

[REDACTED]
 [REDACTED]

Kind Regards,

[REDACTED]
 [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

SIEMENS
 Healthineers 

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.

[Redacted]
Sent: Fri, 2 February 2018 2:52 PM
To: [Redacted] (Health)
Cc: [Redacted] (Health)
Subject: RE: Sample examples [SEC=UNCLASSIFIED]

Thank you [Redacted]

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



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: [Redacted] (Health) [mailto:[Redacted]@act.gov.au]
Sent: Fri, 2 February 2018 2:47 PM
To: [Redacted]
Cc: [Redacted] (Health)
Subject: RE: Sample examples [SEC=UNCLASSIFIED]

Hi [Redacted]

Here are some accession numbers

[Redacted]

These accession numbers exist in the RIS extract, but not in the PACS extract (even though they exist in the PACS database).

Regards,

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

From: ██████████ [mailto:██████████]
Sent: Friday, 2 February 2018 1:59 PM
To: ██████████ (Health) <██████████@act.gov.au>
Cc: ██████████ (Health) <██████████>
Subject: Sample examples

Hello ██████████

Can you please provide me with some sample examples about the below issue on the PACS side from the extracts.

"Also when comparing the StudyUIDs from RIS and PACS, there are 17,000 odd StudyUIDs which exist in the RIS extract, but do not exist in PACS (these StudyUIDs do exist in the PACS database, but they are recorded with a NULL study_date, which is why I think they get dropped from the PACS extract)."

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.

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.

Heland, Rebecca (Health)

From: Pearce, Christopher (Health)
Sent: Wednesday, 7 February 2018 12:06 PM
To: [REDACTED] (Health)
Cc: Barrett, Scott (Health)
Subject: RE: Migration files [SEC=UNCLASSIFIED]

Hi [REDACTED]

On the SIESDM2 SERVER we still have the following:

IDOC folder
 Scans folder
 ZSEG folder
 Attachments.dat
 Exam.dat
 Patient.dat
 Result.dat
 Service.dat
 Doctors.rpt

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: Wednesday, 7 February 2018 11:28 AM
To: [REDACTED] (Health) <[REDACTED]>
Cc: Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>
Subject: RE: Migration files [SEC=UNCLASSIFIED]

No Problems [REDACTED] I'll ask Chris to take a look.

Chris, when you're free please can you advise [REDACTED]

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: Wednesday, 7 February 2018 10:41 AM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>
Subject: Migration files [SEC=UNCLASSIFIED]

Scott,

Are you able to let us know what files are still on the share that Siemens use? We have had a data corruption and are hoping that the problem files are still there. Otherwise we'll have to ask Siemens to do it again and that might not help our relationships.

I'm not confident but if you can let us know what you still have.

Thanks

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

Phone: 02 6174 8768 | Mobile: ██████████ | Email: ██████████ [Pederick@act.gov.au](mailto:██████████@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

Heland, Rebecca (Health)

From: [REDACTED] (Health)
Sent: Tuesday, 6 February 2018 9:52 AM
To: [REDACTED]
Cc: Crossley, Nick; Nick [REDACTED] (Health); [REDACTED]
Subject: RE: ACTH IDIS Project > Migration Analysis Feedback [SEC=UNCLASSIFIED]

Hi Kevin,

Below are the details for the sample set of studies :

- XA multi frame

[REDACTED] AMT => 2 EI => 1 (1 frame) - 1 image and 1 Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in [REDACTED] PACS.

[REDACTED] AMT => 5 EI => 4 (220 frames) - 4 images and 1 Exam Protocol sent from modality

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

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

[REDACTED] AMT => 6 EI => 5 - Only 5 images exist for this Study UID not 6

1.3.12.2.1107.5.8.7.1308.1357184160157.1057712456 [REDACTED]
 [REDACTED] Study UID not 4

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

- Not visible in EI:

[REDACTED] AMT => 2 EI => null - 2 images exist for this Study UID

[REDACTED] AMT => 2 EI => null - 2 images exist for this Study UID

[REDACTED] AMT => 337 EI => null - 337 images exist for this Study UID

Could you please look into these, the images do exist for these studies?

Let me know if you need any further details.

Regards,

[REDACTED]

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

From: [REDACTED] [mailto:[REDACTED]]
 Sent: Tuesday, 30 January 2018 3:35 PM
 To: [REDACTED] (Health) <[REDACTED]>
 Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED]
 [REDACTED] <[REDACTED]>; [REDACTED] <[REDACTED]>
 [REDACTED] <[REDACTED]>
 Subject: ACTH IDIS Project > Migration Analysis Feedback

Hi [REDACTED]

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

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

- We know that the HL7 <> DICOM crosscheck didn't work as expected and we have some studies in the EI DEV that didn't have a migrated order in EI. This crosscheck will be tested on the 20% extract
- In total we had 7871 studies that had to be moved and 166 that had been marked as 'IGNORE' because of the issue with duplicate StudyUIDs (discussed on last call)
 - We had no failed moves (so all studies from Siemens at least moved something to EI)
 - 7825 studies have been migrated successfully and are validated (same amount of images for each StudyUID)
 - 46 studies have been migrated, but don't validate correctly (no error codes during migration received).
 We have 3 types of problems:
 - 5 XA studies don't validate because they are multiframe. In the extract we have the amount of instances as 'DICOM objects'. We always seem to get 1 object less from Siemens, but they are multiframe in EI, so hard to match up. Need to know correct amount in Siemens to be sure.
 - 13 studies have images in EI, but the amount doesn't match up with the extracts. These are 'partial migrated', but maybe the number of images in the extract is just incorrect.
 - 28 studies don't have any images in EI

Could you ask the customer to check the actual amount of objects and/or images for these random studies from the 46 studies that don't validate:

- XA multiframe
 - [REDACTED] => 2 EI => 1 (1 frame)
 - [REDACTED] 5 EI => 4 (220 frames)
- Partial migrated (AMT + EI image count for reference):
 - [REDACTED] => 6 EI => 5
 - [REDACTED] 4 EI => 2
- Not visible in EI:
 - [REDACTED] => 2 EI => null
 - [REDACTED] 2 EI => null
 - [REDACTED] => 337 EI => null

Kind Regards,

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

[REDACTED] Australia Pty Ltd. Unit 18, [REDACTED]
<http://www.agfahealthcare.com>
<http://blog.agfahealthcare.com>

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

Thank you [REDACTED]

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



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

Sent: Fri, 2 February 2018 2:47 PM

To: [REDACTED]

Cc: [REDACTED] (Health)

Subject: RE: Sample examples [SEC=UNCLASSIFIED]

Hi [REDACTED]

Here are some accession numbers

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

These accession numbers exist in the RIS extract, but not in the PACS extract (even though they exist in the PACS database).

Regards,

[REDACTED]

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

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

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

Sent: Friday, 2 February 2018 1:59 PM

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

Subject: Sample examples

Hello [REDACTED]

Can you please provide me with some sample examples about the below issue on the PACS side from the extracts.

"Also when comparing the StudyUIDs from RIS and PACS, there are 17,000 odd StudyUIDs which exist in the RIS extract, but do not exist in PACS(these StudyUIDS do exist in the PACS database, but they are recorded with a NULL study_date, which is why I think they get dropped from the PACS extract)."

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



 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.

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.

Heland, Rebecca (Health)

From: Barrett, Scott (Health)
Sent: Tuesday, 6 February 2018 9:00 AM
To: [REDACTED] (Health)
Cc: [REDACTED] (Health); [REDACTED] (Health)
Subject: RE: Image migration analysis [SEC=UNCLASSIFIED]

Sorry about that [REDACTED]

I can confirm that [REDACTED] has 1 series with 5 images in PACS.

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: Monday, 5 February 2018 3:56 PM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]> [REDACTED] (Health) <[REDACTED]@act.gov.au>
Subject: RE: Image migration analysis [SEC=UNCLASSIFIED]

Thanks Scott.

The only accession number that I am waiting on [REDACTED]
 The accession number mentioned by Chris in the email below had already been looked at, in the first instance.
 Could you please check the details for [REDACTED]

Thanks,
 Sunitha

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

From: Barrett, Scott (Health)
Sent: Monday, 5 February 2018 3:22 PM
To: [REDACTED] (Health) <[REDACTED]@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]> [REDACTED] (Health) <[REDACTED]@act.gov.au>
Subject: FW: Image migration analysis [SEC=UNCLASSIFIED]

Hi [REDACTED]

Please see below.

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: Pearce, Christopher (Health)
Sent: Monday, 5 February 2018 2:16 PM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Subject: RE: Image migration analysis [SEC=UNCLASSIFIED]

Hi Scott,

- This is also one that has 'EXAM PROTOCOL' listed as 1 of the 5 series stored to PACS.
- There are only 4 image series that can be displayed.
- 'EXAM PROTOCOL' can't be displayed and I am unable to determine original file type.

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, 5 February 2018 1:49 PM
To: Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>
Subject: FW: Image migration analysis [SEC=UNCLASSIFIED]

Hi Chris,

██████████ has added Accession numbers.

For ad ██████████, I can only see two images in PACS. Is that correct?

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

Sent: Friday, 2 February 2018 3:43 PM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: ██████████ (Health) <Tony.██████████@act.gov.au>; ██████████ (Health) <██████████@act.gov.au>
Subject: RE: Image migration analysis [SEC=UNCLASSIFIED]

Hi Scott,
 Thank you for the response.

Below are the accession numbers for all the studies, apologies for not including them in the initial queries

-- XA multi frame (from the response, I understand that I might have to take this to Siemens to differentiate between exam protocols and DICOM images to verify the numbers.)

Partial migration

Not visible (will be discussed with AGFA, to identify the mismatch that has led to failed migration)

Thanks,

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

From: Barrett, Scott (Health)
Sent: Thursday, 1 February 2018 11:39 AM
To: ██████████ (Health) <██████████@act.gov.au>
Cc: ██████████ (Health) <██████████@act.gov.au>
Subject: FW: Image migration analysis [SEC=UNCLASSIFIED]

Hi ██████████

Please see below from Chris. Some of the queries we have been able to explain, some not.

Is it possible we could get the accession numbers?

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: Pearce, Christopher (Health)
Sent: Thursday, 1 February 2018 11:31 AM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Subject: RE: Image migration analysis [SEC=UNCLASSIFIED]

Hi Scott,

Not the easiest to follow up on these – see inserts below.

If ██████████ could include the Accession Number as well –using Study UID is like looking for needle in haystack in backend of PACS.

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: Thursday, 1 February 2018 9:04 AM
To: Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>
Subject: FW: Image migration analysis [SEC=UNCLASSIFIED]

Hi Chris,

Please can you please take a look at [REDACTED] email when you get a chance?

I'm not sure where to search in PACS using a study UID.

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: Tuesday, 30 January 2018 4:29 PM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]> [REDACTED] (Health) <[REDACTED@act.gov.au]>
Subject: Image migration analysis [SEC=UNCLASSIFIED]

Hi Scott,

The image migration conducted over last week has been analysed by AGFA and they have come back to us with some studies that have not migrated successfully.

Below are examples of some StudyUIDs that have not validated as expected by AGFA.

- XA multiframe

[REDACTED] AMT => 2 EI => 1 (1 frame) - Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in Siemens PACS.

[REDACTED] AMT => 5 EI => 4 (220 frames) - Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in Siemens PACS.

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

[REDACTED] AMT => 6 EI => 5 – Too many exams for this patient to be able to use query to show this study. Need Accession Number to investigate further.

[REDACTED] AMT => 4 EI => 2 - Only 2 images exist for this Study UID not 4

- Not visible in EI:

[REDACTED] AMT => 2 EI => null - 2 images exist for this Study UID

[REDACTED] AMT => 2 EI => null - 2 images exist for this Study UID

[REDACTED] AMT => 337 EI => null - 337 images exist for this Study UID

The number against 'AMT' are the number of images AGFA expected to have migrated under each of the studies, but what actually has been migrated is the number indicated against 'EI'.

I have validated these numbers against the database that I have access to and each of the study does have the right number of image records as indicated by AMT, could you please verify the actual number of images for each of these studies in the Siemens' image store.

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

Heland, Rebecca (Health)

From: [REDACTED] (Health)
Sent: Friday, 2 February 2018 3:43 PM
To: Barrett, Scott (Health)
Cc: [REDACTED] (Health); [REDACTED] (Health)
Subject: RE: Image migration analysis [SEC=UNCLASSIFIED]

Hi Scott,
 Thank you for the response.

Below are the accession numbers for all the studies, apologies for not including them in the initial queries

-- XA multi frame (from the response, I understand that I might have to take this to Siemens to differentiate between exam protocols and DICOM images to verify the numbers.)

[REDACTED]
 [REDACTED]

Partial migration

[REDACTED]
 [REDACTED]

Not visible (will be discussed with AGFA, to identify the mismatch that has led to failed migration)

[REDACTED]
 [REDACTED]
 [REDACTED]

Thanks,

[REDACTED]

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

From: Barrett, Scott (Health)
Sent: Thursday, 1 February 2018 11:39 AM
To: [REDACTED] (Health) <[REDACTED]@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>
Subject: FW: Image migration analysis [SEC=UNCLASSIFIED]

Hi [REDACTED]

Please see below from Chris. Some of the queries we have been able to explain, some not.

Is it possible we could get the accession numbers?

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: Pearce, Christopher (Health)
Sent: Thursday, 1 February 2018 11:31 AM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Subject: RE: Image migration analysis [SEC=UNCLASSIFIED]

Hi Scott,

Not the easiest to follow up on these – see inserts below.

If [REDACTED] could include the Accession Number as well – using Study UID is like looking for needle in haystack in backend of PACS.

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: Thursday, 1 February 2018 9:04 AM
To: Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>
Subject: FW: Image migration analysis [SEC=UNCLASSIFIED]

Hi Chris,

Please can you please take a look at [REDACTED] email when you get a chance?

I'm not sure where to search in PACS using a study UID.

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

[REDACTED]
Sent: Tuesday, 30 January 2018 4:29 PM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]> [REDACTED] (Health) <[REDACTED]@act.gov.au>
Subject: Image migration analysis [SEC=UNCLASSIFIED]

Hi Scott,

The image migration conducted over last week has been analysed by AGFA and they have come back to us with some studies that have not migrated successfully.

Below are examples of some StudyUIDs that have not validated as expected by AGFA.

- XA multiframe

[REDACTED] AMT => 2 EI => 1 (1 frame) - Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in Siemens PACS.

[REDACTED] AMT => 5 EI => 4 (220 frames) - - Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in Siemens PACS.

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

[REDACTED] AMT => 6 EI => 5 – Too many exams for this patient to be able to use query to show this study. Need Accession Number to investigate further.

[REDACTED] AMT => 4 EI => 2 - Only 2 images exist for this Study UID not 4

- Not visible in EI:

[REDACTED] AMT => 2 EI => null - 2 images exist for this Study UID

[REDACTED] AMT => 2 EI => null - 2 images exist for this Study UID

[REDACTED] AMT => 337 EI => null - 337 images exist for this Study UID

The number against 'AMT' are the number of images AGFA expected to have migrated under each of the studies, but what actually has been migrated is the number indicated against 'EI'.

I have validated these numbers against the database that I have access to and each of the study does have the right number of image records as indicated by AMT, could you please verify the actual number of images for each of these studies in the Siemens' image store.

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

Heland, Rebecca (Health)

From: Crossley, Nick
Sent: Friday, 2 February 2018 12:33 PM
To: [REDACTED] (Health)
Cc: [REDACTED] (Health)
Subject: RE: ACT Health IDIS Project > Weekly Migration Meeting - 01/02/2018 [SEC=UNCLASSIFIED]

OK, thanks, I will send on to [REDACTED]
 Cheers

Nick Crossley

Project Manager MAIPM, CPPM | Shared Services ICT Health
 Phone: +61 2 6207 8919 | Mob [REDACTED]
 Shared Services | Chief Minister, Treasury and Economic Development Directorate | ACT Government
 Building 1, Lv 10 Canberra Hospital, Garran ACT | PO Box 11, WODEN ACT 2606

From: [REDACTED] (Health)
Sent: Friday, 2 February 2018 11:03 AM
To: Crossley, Nick <Nick.Crossley@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]>
Subject: RE: ACT Health IDIS Project > Weekly Migration Meeting - 01/02/2018 [SEC=UNCLASSIFIED]

Hi Nick,
 Thanks for the notes from yesterday's meeting.
 It all looks good to me.

Thanks,
 [REDACTED]

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

From: Crossley, Nick
Sent: Friday, 2 February 2018 10:42 AM
To: [REDACTED] (Health) <[REDACTED]@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]>
Subject: FW: ACT Health IDIS Project > Weekly Migration Meeting - 01/02/2018 [SEC=UNCLASSIFIED]

Hi [REDACTED]

Can you have a look over this, [REDACTED] asked me to send it on – this is what I documented yesterday, I know you weren't at the meeting, but just see if it makes sense for what I have captured.
 Regards

Nick Crossley

Project Manager MAIPM, CPPM | Shared Services ICT Health
 Phone: +61 2 6207 8919 | Mob [REDACTED]
 Shared Services | Chief Minister, Treasury and Economic Development Directorate | ACT Government
 Building 1, Lv 10 Canberra Hospital, Garran ACT | PO Box 11, WODEN ACT 2606

From: Crossley, Nick
Sent: Thursday, 1 February 2018 5:34 PM

To: [REDACTED] (Health) <[REDACTED]>
 Subject: ACT Health IDIS Project > Weekly Migration Meeting - 01/02/2018 [SEC=UNCLASSIFIED]

Hi [REDACTED] can you read over and make any changes\additions
 Cheers
 [REDACTED]

Link to meeting notes: [ACT Health IDIS Project > Weekly Migration Meeting - 01/02/2018](#)

ACT Health IDIS Project > Weekly Migration Meeting - 01/02/2018

Meeting Date: 01/02/2018 5:00 PM

Link to Outlook Item: [click here](#)

Invitation Message

Participants

[REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]
 Crossley, Nick (NC)
 [REDACTED] (Health) apology (SS)
 [REDACTED] (Health) (TP)
 [REDACTED] (AC)

Notes

TP 20% ready for Agfa on Monday, including attachments.

TP Attachments, Jess is matching what Siemens have given us

TP RIS Gap from data files for migration and looking to take to business for approval, only 2 doubtful fields, patient financial class and 1 other (patent type) that don't map to anything. May be able to setup a query on the Siemens database.

NE – Financial class sent to Agfa as Text attachment, can provide to Agfa, but won't be in the 20%

NE build finishes this week, data element for attachments will be known, anything left over can be rolled up and stored in Agfa in some way

TP XA multi frame is not a DICOM image

TP partially migrated (AMT) needs to be tracked down (study ID) more work is needed with these

TP Ones not visible in EI, [REDACTED] has found a null study date field, following up with Siemens. Image count appears correct.

KD If study date\time field, could be mapped, TP [REDACTED] has ID'd the null dates & we can advise

TP image count is incorrect in the partially migrated ones

TP Patient load, checking with PMI team.

TP Migration testing with test team being worked on

TP 20% was added into DEV, DEV DB may be wiped before 20% - KP DB can be wiped, or we leave data there and just note the date ranges. Will leave DB as is.

TP where just DICOM and no RIS orders, will we create a dummy order? KP DICOM based order will automatically be created. NE DICOM base studies that are RIS based, ACT may need to create orders - would need to ID these records. TP\NE & SS to discuss

TP attachment type codes, NE after completion of build Agfa will provide

TP attachment, one of each type migration, were just scheduling - KP need to upgrade to 6.3.x & R&D still need to work on solution, awaiting R&D

20% load - will need to plan for what is required for PROD migration, deltas etc. Also discuss with RIS-PACS team on load \threads - Agfa to provide details of hours \no of threads, so can be setup in AMT. KP performance testing, TP yes, see how many threads we can run without impacting performance\production. Overnight threads can increase. Will start with a given no & add threads to see how many is OK without performance impact.

Meeting ended 5.31pm

Created with Microsoft OneNote 2016.

Heland, Rebecca (Health)

From: Barrett, Scott (Health)
Sent: Thursday, 1 February 2018 11:39 AM
To: [REDACTED] (Health)
Cc: [REDACTED] (Health); [REDACTED] (Health)
Subject: FW: Image migration analysis [SEC=UNCLASSIFIED]

Hi [REDACTED]

Please see below from Chris. Some of the queries we have been able to explain, some not.

Is it possible we could get the accession numbers?

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: Pearce, Christopher (Health)
Sent: Thursday, 1 February 2018 11:31 AM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Subject: RE: Image migration analysis [SEC=UNCLASSIFIED]

Hi Scott,

Not the easiest to follow up on these – see inserts below.

If [REDACTED] could include the Accession Number as well – using Study UID is like looking for needle in haystack in backend of PACS.

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: Thursday, 1 February 2018 9:04 AM
To: Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>
Subject: FW: Image migration analysis [SEC=UNCLASSIFIED]

Hi Chris,

Please can you please take a look at [REDACTED] email when you get a chance?

I'm not sure where to search in PACS using a study UID.

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: Tuesday, 30 January 2018 4:29 PM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: [REDACTED] (Health) <[REDACTED]> [REDACTED] (Health) <[REDACTED@act.gov.au]>
Subject: Image migration analysis [SEC=UNCLASSIFIED]

Hi Scott,

The image migration conducted over last week has been analysed by AGFA and they have come back to us with some studies that have not migrated successfully.

Below are examples of some StudyUIDs that have not validated as expected by AGFA.

- XA multiframe

[REDACTED] AMT => 2 EI => 1 (1 frame) - Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in Siemens PACS.

[REDACTED] AMT => 5 EI => 4 (220 frames) - Exam Protocol sent from modality – not DICOM image. Stored but can't be viewed in Siemens PACS.

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

[REDACTED] AMT => 6 EI => 5 – Too many exams for this patient to be able to use query to show this study. Need Accession Number to investigate further.

[REDACTED] AMT => 4 EI => 2 - Only 2 images exist for this Study UID not 4

- Not visible in EI:

[REDACTED] AMT => 2 EI => null - 2 images exist for this Study UID

[REDACTED] AMT => 2 EI => null - 2 images exist for this Study UID

[REDACTED] AMT => 337 EI => null - 337 images exist for this Study UID

The number against 'AMT' are the number of images AGFA expected to have migrated under each of the studies, but what actually has been migrated is the number indicated against 'EI'.

I have validated these numbers against the database that I have access to and each of the study does have the right number of image records as indicated by AMT, could you please verify the actual number of images for each of these studies in the Siemens' image store.

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