Heland, Rebecca (Health)

From:	Barrett, Scott (Health)
Sent:	Monday, 12 November 2018 10:33 AM
To:	███████ ████ █ (Health); Arsavilli, Dev
Cc:	██ ██ ██ ██ ██ ██ ██ ██ ██
Subject:	RE: Database Failover Test - ACT [SEC=UNCLASSIFIED]

Thanks ████

After discussions with ███ and Dev this morning, we've agreed to keep the thread level at 10 across peak and off peak times.

We can review again in the next few weeks and see how things are going.

Thanks

Scott

Scott Barrett | Diagnostic Imaging Systems Manager
Direct Phone: 02 5124 8039 | Direct Email: scott.barrett@act.gov.au
Support, Diagnostic and Integration Hub | Digital Solutions Division | ACT Health Directorate | ACT Government
24/7 User Support: 02 5124 5000 | Digital.Support@act.gov.au **|** healthhub.act.gov.au/technology
Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | health.act.gov.au

From: ████ ████ <████████████████>
Sent: Monday, 12 November 2018 10:29 AM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>; ██████ ███ (Health) <████████████████
Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
Cc: ██ ████ <████████████ ███ ███ <████████████████ ██ ████
<████████████ ███ ███ <████████████████
Subject: RE: Database Failover Test - ACT [SEC=UNCLASSIFIED]

Hi Scott,

We have reviewed the number of processing threads for the dicom migration and the suggestion of our specialist is to configure the following:

During peak hours : **8** threads, from 5 AM to 10 PM (Currently the processing threads are **12**)
Off-peak hours: **10** threads, from 10 PM to 5 AM (Currently the processing threads are **15**).

The suggestion is to restart the migration with these new numbers and monitor the PACS

Kind Regards,

████████ █ █ ████████
M ██ ████████

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

From: Barrett, Scott (Health) [mailto:Scott.Barrett@act.gov.au]
Sent: Friday, 9 November 2018 12:41 PM
To: ████ ████ <████████████ ████ ██ ██ (Health) <████████████████ Arsavilli, Dev
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Thanks,
Kind Regards,

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From: ▓▓▓▓▓▓▓▓
Sent: Friday, 9 November 2018 10:03 AM
To: ▓▓▓▓▓▓ ▓▓▓ (Health)' <▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓ Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
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< ███████████████ >

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Hi █████

I have stopped the migration and will start with the tests.

Kind Regards,

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< ██████████████ >
Subject: RE: Database Failover Test - ACT [SEC=UNCLASSIFIED]

OK.

████████ | ██████████████████████
Direct Phone: 02 5124 8768 |Mobile: ████████ | Email: ███████████████
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Hi, █████

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Thanks,
Kind Regards,

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Sent: Wednesday, 7 November 2018 4:43 PM
To: ▓▓▓▓ (▓▓▓▓▓▓▓▓▓▓▓▓▓ ; Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
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should not copy or use it for any purpose, nor disclose its contents to any other person.

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Digital Solutions Division

Integrated Diagnostic Imaging Solution (IDIS) Project

ACT Government | ACT Health

Executive Management Meeting Minutes

16:00 – 17:00, Tuesday 30 October 2018

Venue: Teleconference

Item	Agenda Item	Purpose	Name	Papers
1.	Welcome		Chair	
2.	Attendance & Apologies	Note	Chair	
3.	Minutes & Actions from previous meeting a) Integration work progress b) Data migration progress c) Engage Suite	Discuss	Chair	
4.	Any other business	Discuss	Chair	
5.	Meeting close			

Next meeting: 13 November 2018

Attendance/Apologies

Name		Role	✓,Ap, or ✗
Peter O'Halloran	POH	Chief Information Officer - Chair	✓
Mark Duggan	MD	Medical Imaging, Director, Executive Sponsor	Ap
Sandra Cook	SC	Director, Future Capability & Governance	✓
Dev Arsavilli	DA	IDIS Project Manager	✓
▮▮▮▮▮	▮	Agfa Health Care National Sales Manager	✓
▮▮▮▮▮	▮	Agfa Health Care Service Manager Oceania	✓
▮▮▮▮	▮	Agfa Health Care Managing Director Oceania	✓
▮▮▮▮	▮	Agfa Health Care Project Manager	✓
▮▮▮	▮	Agfa IT Marketing Manager	✓

Digital Solutions Division

ACT Government | **ACT Health**

Integrated Diagnostic Imaging Solution (IDIS) Project

Secretariat			
Darcy Row	DR	IDIS Project – Project Officer	✓

2. Attendance and apologies

- Apologies: MD

3. Minutes and actions

- Minutes from previous meeting confirmed.
- Action 1 from 16/10/18 meeting – ■ to send Engage Suite release notes and organise a demonstration of Engage Suite upgrades
  - POH Where are we up to with the Engage Suite release notes? ■ We had some engagement with the Global team last week and have answers ready for most of Jess' questions. We should be able to provide those by end of this week, if not next week. ■ is preparing the documentation for the environment work and is working with Nick Crossley on this. POH When can we expect this to be finished? ■ I will ask ■ about this.
- Action two from 16/10/18 meeting – DL to assist DA organise a meeting with MD and Jess about Engage Suite, and assess impact to schedule from Engage Suite change request.
  - POH What about the meeting with MD about the Engage Suite requirements? ■ We can't do this until the environment is set up and the hardware work is complete.
  - ■ I sent through the release notes, but I didn't realise that we were going to have a demonstration as well. ■ We will need to have a chat with MD about this to understand what he wants to see in a demonstration. POH I think it is so MD understands what the functionality of the software is so he can sell it to internal stakeholders here in ACT Health. DA I did not receive the release notes, but did see the documentation about change requests and Jess' questions. DL I had sent the release notes but will resend them today. Yes, you have a request to have a meeting about Engage Suite with MD and Jess and I am yet to complete that.

20181030-01	■ to discuss with MD what he would like to see in an Engage Suite demonstration to allow Agfa to tailor one accordingly.

  - ■ We have an agreed statement of work for the change request and we have answered the majority of Jess' questions. There are two that need further discussion between the customer and the Engage Suite team, and that's an action on me.

20181030-02	■ to organise meeting with project team and Engage Suite team to work through the two outstanding questions from Jess

  - ■ I have provided ACT with a change request about the architecture and I have received no further information on that, so I assume that is going fine. SC■, do you have

Digital Solutions Division

Integrated Diagnostic Imaging Solution (IDIS) Project

everything you need to understand how the architecture is changing? DA This is with the SSICT architects and we are happy with the information received thus far.

- o ▇ When I met with MD last week he told me that the functionality requirements were confirmed by Agfa (probably ▇ for the previous version of Engage Suite, and he wanted to ensure that the requirements are still met by the latest version of Engage Suite. Do we have any evidence of this confirmation? SC Does Jess know anything about this DA? DA Potentially, if Jess and the Agfa Engage Suite team could meet then this could be cleared up.

20181030-03	DA to check with Jess if she has any record of the Engage Suite requirements being confirmed by ▇

- o SC Sounds like this would be solved if we could get a bunch of people in a room to discuss this? ▇ If we can know what your requirements are then we can provide a demonstration accordingly. The Engage Suite solution is a broad solution and can be configured for a number of workflows. So we want to tailor it to the use cases and the requirements of the business. ACTION ▇ to organise an Engage Suite meeting for next week or soon after.

20181030-04	▇ to organise a meeting with MD, Jess and the Engage Suite team for next week or the week after, to demonstrate the Engage Suite product and how it meets ACT Health's requirements.

a) Integration work progress

- POH The integration work is progressing well I believe. The team are resolving defects from the first round of testing before starting SIT.
- POH I believe ▇ ▇ is on leave starting next week, so we hope that the other integration analyst is able to provide suitable support in ▇ absence? ▇ That's correct, we don't anticipate any issues in relation to this.

Data migration progress

- POH I understand that we are flying through image migration, unless any concerns need to be raised? ▇ That's correct. We have only encountered a few small quality issues, but overall it's progressing really well. The migration rate will likely slow slightly in the coming weeks as we are migrating from the long-term storage instead of the cached files.

4. Any other business

- ▇ Can I just confirm that we are going to share the requirements for Engage Suite so we can tailor our presentation. POH Yes, I will get DA to do that this afternoon.

20181030-05	DA to share ACT Health requirements for Engage Suite with this group

5. Meeting closed 16:19

Heland, Rebecca (Health)

From:	████ ████ (Health)
Sent:	Friday, 26 October 2018 7:43 AM
To:	████ ████
Cc:	████ ████ (Health); Griffiths, Jessica (Health); Arsavilli, Dev
Subject:	RE: [AUS - ACT] DICOM migration - validation exception list [SEC=UNCLASSIFIED]
Attachments:	DICOM Migration Validation(Category1).xlsx

Hi ████ and Jess,

Sorry, it's taken me a while to get back.

I've had a look at the validation issues from the email below, please see my comments in green.

Thanks,

████

█rom: ████ ████ [mailto ████████████████]
███t: Thursday, 18 October 2018 9:38 PM
To: ████ ████ (Health)
Cc: ████ ████
Subject: [AUS - ACT] Dicom migration - validation exception list

Hi ████

I have looked into the data that I can't migrate in the current state and I have the following groups.
Just by looking at the data, I'm sure we can fix almost all of these, but I like to be sure.
Below you can find the validation results executed on the DICOM data. In most cases a crosscheck
was executed against the HL7 data to get to the result or issue. I added what is wrong and what I
believe could be done.

- (771 studies)   These studies don't have an order and have not been mentioned on the 'no_ris'
  list that was provided.
  → No other issues detected, so in theory I could safely send them into EI if you want
  ████ - all these records can be excluded from the migration for now, waiting for Jess to confirm
  Jess, I have attached a sheet for you to have a look, below are the details of what's in the sheet
      Study not in RIS, but accession number exists, Jess could you please check a few of these.
      Study exists in RIS, but no procedure details available in RIS - Jess my RIS exclusions list in the Audit
  folder in Q drive has a small list of such Studies, but there seem to be a lot more records with a similar issue.
      Study exists in RIS, but cannot be linked to patient details in RIS - Such activities have been excluded
  from the HL7 extract, the study/image migration to be excluded as well for now.
      Study exists in RIS, but has a preliminary status - Jess, could you check some of these as well, I don't
  think we need to migrate these, but could you confirm.

- (90710 studies) These studies don't have a matching order in EI, because the PID is not matching.
  Looking at the data, I believe the leading zeros are just lost between RIS and PACS or somewhere in
  the extraction process of the DICOM data OR (smaller amount) the PID has a letter that is upper case
  in HL7 and lower case in the DICOM side.
  → To fix this, we would only need to know if the PACS has the leading zero's in these PID.
  If yes, we only need to update the migration data with a copy of the PID from the HL7 tables.
  If no, we may need to update the DICOM header for all these studies, a bit more work.
  PIDs in the hl7 extract have been cleansed and are the right PIDs to be used for migration. The data provided
  for the previous rounds of testing was also in a similar fashion where PIDs in the DICOM extract was not
  transformed to add/remove the leading zeroes and this was not raised as an issue before, so I assumed they
  weren't going to be an issue and did not list them in the list needing a DICOM header update for the same.

For the above records, could you update the DICOM PIDs with the PIDs from HL7 and update the DICOM header during migration, in cases where PACS has a PID different to the extract? I am not sure about how many of these records will actually need a header update, I will have to get the business to check some of the images manually to see if the headers had PIDs with or without the leading zeroes. Please let me know if you would like us to check.

- (1819 studies)   These studies don't have a matching order in EI, because the AccNr is not matching. For these studies, no AccNr update was provided in the extra list. When looking at the data, I can clearly see that the .01/.02 was added to the HL7 side.
  → To fix this, I can use the HL7 AccNr and execute the DICOM header updates as with the other data.
  Yes, these records will definitely need a DICOM header update while migrating, these were not included in the list as these were the obvious ones needing a DICOM header update, that we have tested in the past. Please migrate them and update the DICOM header accordingly

- (112 studies)   These studies don't have a matching order in EI, because the AccNr and PID is not matching. Basically, this is a combination of the 2 issues mentioned above.
  These records to be migrated with DICOM header updates to both accession numbers and PIDs(PIDs might not need an update if PACS has the right one with/without the leading zeroes)

I have exported the PID/ACCNR/STUDYUID for these studies to the following file:

- \\nas327s2\IDISMigration\Files from AGFA\DICOM Validation\[AUS - ACT] DICOM Migration - Validation failed list - v2.xlsx

Kind Regards,

████████ ██
T ████████████

████████ NV, ████████████████████
http://www.agfahealthcare.com
http://blog.agfahealthcare.com

From: ████ ██████
Sent: Thursday 18 October 2018 7:14
To: ████████ ███████ (Health)' <████████████act.gov.au>
Subject: [AUS - ACT] Dicom migration - validation exception list

Hi ████████

This is high on my to-do list, but I'm not sure if I can get it ready today.
I'll at least block some time tomorrow morning, so it isn't getting pushed anymore.

Just to be clear:

- The 'moved and not validated' studies in the Excel are really just studies that haven't been validated normally, this is because the validation is running at intervals.

- The ignored studies are indeed some sort of validation errors, but I know that I also have some studies flagged that aren't set to ignore yet. So that will be included in the 'Validation Exception list'.

Kind Regards,

████████ ██ ██████████
T ███████████████

███████████ NV, ████████████████████████
http://www.agfahealthcare.com
http://blog.agfahealthcare.com

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

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

From: ████████ ██████ (Health) [mailto:████████ █ ████████act.gov.au]
Sent: Thursday 18 October 2018 5:51
To: ████ █████ <████████████████████████>
Subject: FW: [AUS - ACT] Dicom Migration [SEC=UNCLASSIFIED]

Hi ████
The attached progress report indicates studies that have been ignored and studies that have been migrated but not validated.
Could you pass on a list of all such studies and I will have a look at them.
Thanks,
██████

From: ████████ ████ (Health)
Sent: Thursday 18 October 2018 08:24
To: ████████ ██████ (Health); ███████ ████████
Subject: FW: [AUS - ACT] Dicom Migration [SEC=UNCLASSIFIED]

FYI

████████ ██ ██
Direct Phone: 02 5124 8768 | Mobile: ████████████ | Email: ████████████████████████
IDIS Project | Future Capability & Governance | Digital Solutions Division | ACT Health Directorate | ACT Government
24/7 User Support: 02 5124 5000 | Email: Digital.Support@act.gov.au | healthhub.act.gov.au/technology
Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | health.act.gov.au

From: █████ ████ [mailto:████████████████████]
Sent: Wednesday, 17 October 2018 6:03 PM
To: ████████ ████ (Health) <████████████████████████ Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
Cc: ████ ████ <████████████████ ████ ████ <████████████████ ████ ████
<████████████████████ ████ ████ <████████████████████ ████ ████ <████████████████
Subject: FW: [AUS - ACT] Dicom Migration

Hi ████
DICOM Migration status report attached.
Reminder that the DICOM migration has been a bit stop / start to date, but will be running now in a reasonable uninterrupted state.

Kind Regards,

████ ████ ██ | ████████████████
Pro█████████ ██ ██ | ████████████
M ████████████agfa.com

Out of office alert:
5th to 7th November inclusive

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

Heland, Rebecca (Health)

From:	██████ <████████████████>
Sent:	Wednesday, 24 October 2018 6:47 PM
To:	████ ████ ████ ████ (Health); Arsavilli, Dev; ████ ████
Cc:	████ ████ ████ ██████
Subject:	ACT AMT to Scheduling Migration status update

All,

As you know we are pushing the already migrated data from AMT to Scheduling.

Thus far we have completed years 2016, 2017, and 2018 with total of 665994 success and 164 Errors.   This totals match the numbers already sent to EI for those years.

The errors I am still to investigate and will come back on these towards the end of the process.

eel free to check the production Scheduling system to confirm if migrated data is correct.

Kind Regards,

████████ | ███████████
███████████████████████████
T +32 3444 8413 | F +32 3 444 84 01 | M ████████████

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

Acting Manager Medical Imaging
Mobile: ▮▮▮▮▮▮▮

Sent from my iPhone

On 19 Oct 2017, at 4:39 pm, Norton, Sarah (Health) <Sarah.Norton@act.gov.au> wrote:

Dear ▮▮▮▮

1. Yes, 1 November is the next Project Control meeting where the Schedule must be baselined.
2. Yes. Product description, package description, whatever is going to be build and tested and delivered in each sprint please.
3. Thank you. I will also follow up with the team about status.
4. Thank you. Recruiting the right candidate is important for the success of the role.
5. Yes, this feedback is related to the IPS related to Integration. I will review the updated version tonight and provide feedback. Thank you.

Sarah

Sarah Norton | Program Manager - UCPH Digital Solutions Program
Phone: 02 6205 0412 | Email: sarah.norton@act.gov.au
Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
Level 2, 2-6 Bowes Street, Phillip ACT 2606 | GPO Box 825, Canberra ACT 2601 | act.gov.au

From: ▮▮▮▮ ▮▮▮▮ [mailto:▮▮▮▮▮▮▮▮▮▮▮▮▮]
Sent: Thursday, 19 October 2017 2:02 PM
To: Norton, Sarah (Health) <Sarah.Norton@act.gov.au>
Cc: ▮▮▮▮ <▮▮▮▮▮▮▮▮▮▮▮ <▮▮▮▮▮▮▮▮▮▮▮▮ (Health)
<▮▮▮▮▮▮ act.gov.au>
Subject: Re: List of concerns [SEC=UNCLASSIFIED]

Hi Sarah

I have reviewed your concerns with ▮▮▮▮ this afternoon. I am just going to jump on plane back to Brisbane so below is a brief response. Happy to discuss in more detail tomorrow if you wish.
1. We will provide a draft resource schedule no later than next Friday (possibly sooner) . As I believe the intent of the contract was a to have a blended project approach, of course we will need details from ACT Health as well in regards to those Customer supplied resources and sync these into the resource schedule and the project schedule. I believe ▮▮▮▮ was asked for options in regards to shortening the build phase, and a variation to approach and Agfa resourcing (ie utilising and Agfa resource to assist in this work) was only an option put forward.We can commit to providing the base line schedule no later than Nov 1 which I believe is at the end of your next sprint cycle. Please advise if you are agreeable to this.
2.
2. ▮▮▮▮ will provide sample items for functional testing to ▮▮▮▮ this week or early next. Is there a particular format you would like the final plan in? eg a project product description
3.
3. We did receive an migration options document form HQ but it would appear to be an oversight it was not socialised with your teams. ▮▮▮▮ will follow up. However, ▮▮▮▮ did indicate options have been discussed with ACT technical teams. It is important to note the Agfa is still awaiting the information regarding PAP (image) migration from Siemens to complete the migration plan and we an progress asap when this is provided.
4.
4. I will continue to provide updates directly. I don't believe this is a project specific risk however.
5.
5. I am not sure if your feedback is in relation to the IPS prior to it being recently updated (as late as last week). ▮▮▮▮ sent an updated version only yesterday and I suggest maybe some of your concerns are addressed in this. Can you please confirm for me please Sarah.
6.
6.
6.
Happy to give you a ring tomorrow with more detail. Let me know.
1.
1.

Kind Regards,

████████ █ ██████████
F +61 7 3356 6683 | M ████████

<image001.jpg>

From: "Norton, Sarah (Health)" <Sarah.Norton@act.gov.au>
To: ████████AWWQG/AGFA@AGFA, ████████AXQFZ/AGFA@AGFA, ████████AMPCY/AGFA@AGFA
Cc: ████████ (Health)" <████████A██████act.gov.au>
Date: 18/10/2017 06:35 PM
Subject: List of concerns [SEC=UNCLASSIFIED]

Hi gentlemen,

Thanks again for the conversation this morning.

Some of our dot points of concern relate to the depth of forward planning required to ensure project success according to the delivery milestones agreed:

. ████ asked me yesterday if he could bring in an extra team member at my cost, however, we asked on the 21 of September for a resource plan or make up to show ACT Health what resources are working on the project when, and the makeup of the 'build' team. We need to understand the team/skills required for the build team. We did receive a reply of an offer to discuss but no document/information. From my point of view, changes to the current contract and purchase order are not something we are willing to seek regarding additional AGFA resources.

2. Agfa agreed to an 'iterative approach' in the Statement of Work, however, our confidence in the approach is wavering. The Agfa team are currently unable to produce a plan for ████ to forward plan testing and release activities related to their 2 week sprint cycles as part of the iterative build approach. This is impacting end user resourcing and test planning activities that are required for the build, test, release cycles. This is what ████ calls the "Packets" in the 2 week sprints. I understand that there are some constraints related to Agfa resources that need to do this work are currently training the System Admin team. However, it is severely impacting our ability to resource the build team including the MI staff required to be participants in the cycles.

3. Data Migration Plan is yet to be provide to ACT Health for approval. There is a mention in the IPS of 'options', however, the options are not present. Yesterday they estimated the initial 10 days for RIS data migration will take 25. ACT Heath has significantly prepared for data migration and have a THOROUGH understanding of the data. We are very concerned in this component as the system cant go live without RIS data. And 25 days of data migration into TEST and then PROD brings an extra 2.5 months to the project timelines. This is currently outside executive expectations.

4. There is yet to be a resource employed to be onsite full time. We received an update on this today.

5. Integration: By now we should have at least drafted high level integration specs based on our current state integration specs we have provided . ACT Health have a thorough understanding of integration. Integration needs to be up and running in draft before the build, test, release cycle as we cannot test E2E without integration. We requested AGFA redo this section of the IPS as it was extremely light on.

- ACT Health provided them with all the work previous conducted, this is mentioned on page 19, However is doesn't say what they are going to do/or have done with this document and information?
- Section 6.1.8 states there are no risks for integration?
- There is no process or approach mentioned in IPS?

We are in constant discussions with ▮▮▮ on a daily basis, and he is attending the daily stand-ups and sprint planning as part of the team. The team are working together extremely well, they are a high functioning team. ACT Health has provided considerable effort in this space. The feedback related to training is positive at this point.

Many thanks,
Sarah

Sarah Norton | Program Manager - UCPH Digital Solutions Program
Phone: 02 6205 0412 | Email: sarah.norton@act.gov.au
Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government
Level 2, 2-6 Bowes Street, Phillip ACT 2606 | GPO Box 825, Canberra ACT 2601 | act.gov.au

----

-- [attachment "image001.jpg" deleted by ▮▮▮▮ ▮▮▮AXQFZ/AGFA]

Heland, Rebecca (Health)

From:	▉▉▉▉ ▉▉▉ (Health)
Sent:	Friday, 19 October 2018 10:04 AM
To:	▉▉▉▉ ▉▉ (Health)
Cc:	Arsavilli, Dev
Subject:	FW: [AUS - ACT] Dicom migration - validation exception list

Hi▉

▉▉ has listed all the studies that have been ignored due to validation errors and he has also mentioned the reasons why they have failed.
I will have a look very soon.
Regards,

▉▉▉

From: ▉▉ ▉▉ ▉▉▉▉▉▉
Sent: Thursday 18 October 2018 21:38
To: ▉▉▉ ▉▉ (Health)
c: ▉▉ ▉▉
Subject: [AUS - ACT] Dicom migration - validation exception list

Hi ▉▉▉

I have looked into the data that I can't migrate in the current state and I have the following groups.
Just by looking at the data, I'm sure we can fix almost all of these, but I like to be sure.
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was executed against the HL7 data to get to the result or issue. I added what is wrong and what I
believe could be done.

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  → To fix this, we would only need to know if the PACS has the leading zero's in these PID. If yes, we only need to update the migration data with a copy of the PID from the HL7 tables. If no, we may need to update the DICOM header for all these studies, a bit more work.

- (1819 studies)   These studies don't have a matching order in EI, because the AccNr is not matching. For these studies, no AccNr update was provided in the extra list. When looking at the data, I can clearly see that the .01/.02 was added to the HL7 side.

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I have exported the PID/ACCNR/STUDYUID for these studies to the following file:

- \\nas327s2\IDISMigration\Files from AGFA\DICOM Validation\[AUS - ACT] DICOM Migration - Validation failed list - v2.xlsx

Kind Regards,

████ █████ █ ████████
████████████████████
T

████████ NV, ████████████████████
http://www.agfahealthcare.com
http://blog.agfahealthcare.com

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

From: ████ █████
Sent: Thursday 18 October 2018 7:14
To: ██████ ██████ (Health)' <████████████████act.gov.au>
Subject: [AUS - ACT] Dicom migration - validation exception list

Hi ██████

This is high on my to-do list, but I'm not sure if I can get it ready today.
I'll at least block some time tomorrow morning, so it isn't getting pushed anymore.

Just to be clear:

- The 'moved and not validated' studies in the Excel are really just studies that haven't been validated normally, this is because the validation is running at intervals.

- The ignored studies are indeed some sort of validation errors, but I know that I also have some studies flagged that aren't set to ignore yet. So that will be included in the 'Validation Exception list'.

Kind Regards,

████ █████ █ ████████
████████████████████
T

████████ NV, ████████████████████
http://www.agfahealthcare.com
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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 18 October 2018 5:51
To: ████ █████ <████████████████
Subject: FW: [AUS - ACT] Dicom Migration [SEC=UNCLASSIFIED]

Hi ████
The attached progress report indicates studies that have been ignored and studies that have been migrated but not validated.
Could you pass on a list of all such studies and I will have a look at them.
Thanks,

██████

From: ████ ███ (Health)
Sent: Thursday 18 October 2018 08:24
To: ██████ ███ (Health); ████ ██████
Subject: FW: [AUS - ACT] Dicom Migration [SEC=UNCLASSIFIED]

FYI

████████ | **IDIS Delivery Manager - UCH Digital Solutions Program**
Direct Phone: 02 5124 8768 |Mobile: █████████ | Email: ███Pederick@act.gov.au
IDIS Project | **Future Capability & Governance** | **Digital Solutions Division** | **ACT Health Directorate** | **ACT Government**
24/7 User Support: 02 5124 5000 | Email: Digital.Support@act.gov.au | healthhub.act.gov.au/technology
Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | health.act.gov.au

From: ████ ███ [mailto:████████████████]
Sent: Wednesday, 17 October 2018 6:03 PM
To: ██████ ███ (Health) <████████████████████ Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
Cc: ███ ███ <████████████████ ███ ███ <███████████████████ ████████
<███████████████████ ███ ██████ <███████████████ ████ ███ <███████████████
Subject: FW: [AUS - ACT] Dicom Migration

Hi ████
DICOM Migration status report attached.
Reminder that the DICOM migration has been a bit stop / start to date, but will be running now in a reasonable uninterrupted state.

Kind Regards,

████ ███ | ████████████
████████████ | ████████
M ████████████

Out of office alert:
5th to 7th November inclusive

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

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:	Wednesday, 17 October 2018 6:03 PM
To:	██████ (Health); Arsavilli, Dev
Cc:	███ ██ ██ ██ ██ ██ ███
Subject:	FW: [AUS - ACT] Dicom Migration
Attachments:	[AUS - ACT] DICOM Migration Status.xlsx

Hi ███

DICOM Migration status report attached.

Reminder that the DICOM migration has been a bit stop / start to date, but will be running now in a reasonable uninterrupted state.

Kind Regards,

███ ███ | ████████████
████████ |████████████
|

Out of office alert:
5th to 7th November inclusive

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

Heland, Rebecca (Health)

From:	███████ ██████ (Health)
Sent:	Wednesday, 10 October 2018 10:17 AM
To:	███████████████████
Cc:	██████ ████ (Health); █████████ █████████ █████████████████ ██ ████ ████ ████ Barrett, Scott (Health); ████████ Griffiths, Jessica (Health)
Subject:	RE: [AUS - ACT] HL7 and DICOM migration status [SEC=UNCLASSIFIED]

Hi ████
I have looked at the study ██ mentioned in your email below.
The RIS extract and the active patient list that I was provided with, were from a date prior to the patient MRN
████████ being merged to MRN ████████, but the PACS extract was from a date after the merge.
The PACS extract therefore had references to MRN ███████ which was not identified as an active MRN in the patient
list(outdated data)
My code therefore ██████████████ as the active MRN and ███████ as the MRN that needed to be updated.(which
is incorrect as the active patient list was outdated)

All is good if your migration code can identify such records where the active MRN identified in the update header file
is no longer active and has been merged to a different MRN.
In this case the above study should be migrated and assigned to Patient MRN ████████

Thanks,

████

From: Griffiths, Jessica (Health)
Sent: Monday 8 October 2018 10:40
To: ██████████████ █████ █████ (Health)
Cc: ██████ █ ███ (Health); ██████ █ ████████ ███████████████████ ████ ████ ████ ████ ██████ Barrett,
Scott (Health); ████████████
Subject: RE: [AUS - ACT] HL7 and DICOM migration status [SEC=UNCLASSIFIED]

Hi ████████████

I have checked the below accession numbers and there seems to be images missing for AccNo ████████ MRN
████████
'n Siemens this is a split study with the same accession number one study has 51 images and the other study has 5
images. El only has 51 images.

@██████ I have checked ██████ query below and the active MRN ██████████ ACTPAS and Siemens.

Thanks,
Jess

Jess Griffiths |RIS Admin- Subject Matter Expert
Direct Phone: 02 5124 8730 | Direct Email: Jessica.griffiths@act.gov.au
IDIS Project | Future Capability & Governance | Digital Solutions Division | ACT Health Directorate | ACT Government
24/7 User Support: 02 5124 5000 | Email: Digital.Support@act.gov.au | healthhub.act.gov.au/technology
Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | health.act.gov.au

From: ████████ ████ (Health)
Sent: Monday, 8 October 2018 9:23 AM
To: Griffiths, Jessica (Health) <Jessica.Griffiths@act.gov.au>
Subject: FW: [AUS - ACT] HL7 and DICOM migration status [SEC=UNCLASSIFIED]

Jess,

Can we check out these studies?? Pretty please? If they look good then I think we are good to go with image migration.

T

▮▮▮ ▮▮▮▮▮ ▮ ▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮
Direct Phone: 02 5124 8768 | Mobile: ▮▮▮▮▮▮▮ | Email: ▮▮▮▮▮▮▮▮▮
IDIS Project | **Future Capability & Governance** | **Digital Solutions Division** | **ACT Health Directorate** | **ACT Government**
24/7 User Support: 02 5124 5000 | Email: Digital.Support@act.gov.au | healthhub.act.gov.au/technology
Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | health.act.gov.au

From: ▮▮▮ ▮▮▮▮ [mailto ▮▮▮▮▮▮▮▮▮▮▮▮▮
Sent: Friday, 5 October 2018 6:46 PM
To: ▮▮▮▮ ▮▮▮ (Health) < ▮▮▮▮▮▮▮▮▮▮▮▮▮▮ ▮ ▮▮▮ < ▮▮▮▮▮▮▮▮▮▮ ▮ ▮▮▮
(Health) < ▮▮▮▮▮▮▮▮ act.gov.au>; Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
Cc: ▮▮▮▮ ▮▮ < ▮▮▮▮▮▮▮▮▮▮▮ ▮ ▮▮▮ < ▮▮▮▮▮▮▮▮▮▮▮▮ ▮▮ ▮▮
< ▮▮▮▮▮▮▮▮▮▮▮▮▮ ▮ ▮▮ < ▮▮▮▮▮▮▮▮ Barrett, Scott (Health)
<Scott.Barrett@act.gov.au>; ▮▮▮ ▮▮▮ < ▮▮▮▮▮▮▮▮▮▮▮
Subject: [AUS - ACT] HL7 and DICOM migration status [SEC=UNCLASSIFIED]

Hi All,

HL7 migration

> Scheduling load running

DICOM migration

> Today I have tried to send in a study for each 'type' of migration that will be needed during the DICOM migration. All have gone in as expected. Please have a look in EI at the studies below.
> Order provided, no updates   7186007 -
> 1.2.840.113696.838383.500.428520.20180108010913
> No order provided, no updates   7624095 -
> 1.3.12.2.1107.5.8.2.100244.201804241237158075581.1
> Order provided, update needed on PID to match   7231694 -
> 1.2.840.113696.838383.500.474808.2018031113578
> Order provided, update needed on AccNr to match   7251511 -
> 1.2.840.113696.838383.500.494975.20180407104138
> Order provided, update needed on AccNr to match   7244109 -
> 1.2.840.113696.838383.500.487524.20180327211046

> So on Monday 08/10 I can start the batch 'Order provided, no updates' of + 1.500.000 studies.

@▮▮▮▮ ▮▮▮▮ (Health) I do have something that I want to verify to be 100% sure.

> For study 1.2.840.113696.838383.500.474808.2018031113578, I believe we really want PID 19049069:
>   • The HL7 order extract has PID 19049069
>   • The DICOM extract has PID 19049069
>   • The DICOM Header update file has 19049069 as 'Active PID' to use

> But in EI, this PID was merged to the 'Merged PID' from the DICOM Header update '380581' on 15/09 in EI, so after the HL7 ADT migration and before the HL7 ORM migration from a message created on 11/09.

> Result, after the full process, the patient is still linked to PID 380581.
> This is **not** a problem and all systems work correct, but it just seems like something I need to run by you.

Kind Regards,

██████████████████████████
T █████████████

███████ NV, █████████████████
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http://blog.agfahealthcare.com

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From: ████████ (Health) [mailto█████████████████]
Sent: Friday 5 October 2018 5:46
To: ██████ <████████████████████ ███████ <████████████████████████ (Health)
<████████████act.gov.au>; Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
Cc: ████████ <█████████████████ ██████ <████████████████████████
<███████████████████████ Barrett, Scott (Health)
<Scott.Barrett@act.gov.au>
Subject: RE: [AUS - ACT] HL7 and DICOM migration status [SEC=UNCLASSIFIED]

████

I have had confirmation that the additional nodes have been created. Once you have completed your DICOM testing please wait until we give the go-ahead for the migration to start. We would like to start when we have support personnel available, which would be Monday 8 October at the earliest.

Regards

████

██████ | **IDIS Delivery Manager - UCH Digital Solutions Program**
Direct Phone: 02 5124 8768 |Mobile: ████████ | Email: ████Pederick@act.gov.au
IDIS Project | Future Capability & Governance | Digital Solutions Division | ACT Health Directorate | ACT Government
24/7 User Support: 02 5124 5000 | Email: Digital.Support@act.gov.au | healthhub.act.gov.au/technology
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From: ██████ [mailto█████████████████]
Sent: Friday, 5 October 2018 9:00 AM
To: ██████ <████████████████████ ███████ (Health) <███████████████████
██████ (Health) <████████████act.gov.au>; Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
Cc: ████████ <█████████████████ ██████ <██████████████████
<███████████████████ <████████████████
Subject: RE: [AUS - ACT] HL7 and DICOM migration status

Hi ████

Please start your DICOM testing when ready. ████ and I will work with you to manage the migration during our work hours so we can complete our fail-over testing while putting minimal impact on the migration.

Kind Regards,

██████████████████████████
T +61 3 9756 4330 | F +61 3 9756 4413 | M ████████

█████████ Australia Pty Ltd, 15 Dalmore Drv, Scoresby VIC 3179 Australia
http://www.agfahealthcare.com
http://blog.agfahealthcare.com

Out of office alert:
18th February 2019 to 1st March 2019 inclusive

From: ████ █████

Sent: Thursday, 4 October 2018 18:20

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

Cc: ██ █████ <██████████████████████ ██ <███████████████████ ██ ████
<██████████████████████ ███ <███████████████ ███ <████████████████

Subject: [AUS - ACT] HL7 and DICOM migration status

Hi All,

HL7 migration status

The bulk HL7 migration towards EI for the extracts provided by ACT have completed yesterday.
All data from the extracts has been validated and migrated successfully. No failures or validation
errors have been detected for all migrated patients/orders/attachments and reports.

████████ will continue to work on the migration towards Scheduling based on the same data.

DICOM migration status

I believe the requested AE nodes have been created on the Siemens PACS now. I'll wait for a
signal from the customer and the local AGFA team to start the actual DICOM migration.

To be clear, I will first send +/- 100 studies from Siemens towards EI and provide a list so we
can all agree that the data (and DICOM header updates) are correct before starting the migration
at the normal thread load.

(To test the AE node configuration, the StudyUID ██
was migrated and validated)

Kind Regards,

████████ ███ █ █ ████████████
T █████████████

█████████ NV, ████████████████████████
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IBAN Customer Account BE20375104592856 | ING Belgium NV, B-1000 Brussels

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From: ████ █████
Sent: Wednesday 3 October 2018 9:14
To: ████████ ███ (Health) <██████████████████ Pearce, Christopher (Health)
<Christopher.Pearce@act.gov.au>
Cc: Crossley, Nick <Nick.Crossley@act.gov.au>; Barrett, Scott (Health) <Scott.Barrett@act.gov.au>; ██ █████
<███████████████████ ███ <████████████████
Subject: [AUS - ACT] HL7 and DICOM migration status / questions [SEC=UNCLASSIFIED]

Hi ████

That looks correct.

Kind Regards,

████████ | ██████████
T ████████████ █

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http://blog.agfahealthcare.com

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From: ████████ (Health) [mailto████████████████
Sent: Wednesday 3 October 2018 9:12
To: Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>; ████ ██████ <████████████████
Cc: Crossley, Nick <Nick.Crossley@act.gov.au>; Barrett, Scott (Health) <Scott.Barrett@act.gov.au>; ██ ████
<████████████
Subject: RE: [AUS - ACT] HL7 and DICOM migration status / questions [SEC=UNCLASSIFIED]

Kevin,

So our specification for every connection that needs to be set up should look like the below? The first row is our current configuration for Production that was previously specified to us.

HOST	IP	PORT	AE Title
actentdicom.act.gov.au	10.24.1.10	104	ACTIDIS
actentdicom.act.gov.au	10.24.1.10	104	ACTIDIS_MIG
actentdicom.act.gov.au	10.24.1.10	104	ACTIDIS_PRIORS

Thanks

████

████████ | **IDIS Delivery Manager - UCH 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: Pearce, Christopher (Health)
Sent: Wednesday, 3 October 2018 4:59 PM
To: ████ ██████ <████████████████████ ████████ (Health) <████████████████████
Cc: Crossley, Nick <Nick.Crossley@act.gov.au>; Barrett, Scott (Health) <Scott.Barrett@act.gov.au>; ██ ████
<████████████
Subject: RE: [AUS - ACT] HL7 and DICOM migration status / questions [SEC=UNCLASSIFIED]

Hi ████

Can we please have the following for these new AET's:

- Hostname/logical name for each.
- IP Addresses

Port I assume is 104

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: ███ ██████ [mailto████████████████████]
Sent: Wednesday, 3 October 2018 4:21 PM
To: ████████ (Health) <████████████████████>
Cc: Crossley, Nick <Nick.Crossley@act.gov.au>; Barrett, Scott (Health) <Scott.Barrett@act.gov.au>; Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>; ██ ████ <███████████████████████████>
<████████████████████>
Subject: [AUS - ACT] HL7 and DICOM migration status / questions [SEC=UNCLASSIFIED]

Hi ████

For the DICOM migration we indeed need the ACTIDIS_MIG and ACTIDIS_PRIORS to be created in the Siemens PACS also. This will make sure that the migration traffic is split from other data.

The IP, port, ... are all the same.

Kind Regards,

████ █████ | ███████████
████████████████████████
T ███████████████

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From: ████████ (Health) [mailto████████████████]
Sent: Wednesday 3 October 2018 2:23
To: ███ ██████ <████████████████████>
Cc: Crossley, Nick <Nick.Crossley@act.gov.au>; Barrett, Scott (Health) <Scott.Barrett@act.gov.au>; Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>
Subject: RE: [AUS - ACT] HL7 and DICOM migration status / questions [SEC=UNCLASSIFIED]

████

From the below we were due to create two Production AE Titles. From your email, do you need us to also create ACTIDIS_MIG and ACTIDIS_PRIORS, and will they both have the same IP and port?

Thanks
████

████████ | ████████████████████████
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: Pearce, Christopher (Health)
Sent: Wednesday, 3 October 2018 9:59 AM
To: ████████ ████ (Health) <████████████████████ Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: Crossley, Nick <Nick.Crossley@act.gov.au>
Subject: RE: [AUS - ACT] HL7 and DICOM migration status / questions [SEC=UNCLASSIFIED]

Hi ████

We only have the following setup configured as this is all that has been requested to date:

The Agfa DICOM Modality setup document specifies the following environments locally:

Please advise which environment is to be used for Pre-prod and I can make the required entries in the Siemens PACS.

Regards,

Chris

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

From: ████████ ████ (Health)
Sent: Wednesday, 3 October 2018 9:19 AM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Cc: Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>
Subject: RE: [AUS - ACT] HL7 and DICOM migration status / questions [SEC=UNCLASSIFIED]

It could be that we only know about the Prod PACS address? What ████ has below for ACTIDIS_MIG is different to the production PACS address:

Parameter	Value
HOST	actentdicom.act.gov.au
AE Title	EIPROD

7

IP	10.24.2.101
PORT	104

Do we need to somewhere specify 10.24.1.10?

███

███████ | **IDIS Delivery Manager - UCH Digital Solutions Program**
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From: Barrett, Scott (Health)
Sent: Wednesday, 3 October 2018 9:01 AM
To: ████████ (Health) <████████████████
Cc: Pearce, Christopher (Health) <Christopher.Pearce@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>
Subject: RE: [AUS - ACT] HL7 and DICOM migration status / questions [SEC=UNCLASSIFIED]

Hi ███

Nothings changed on our side so all the details should still be valid. I'm not sure that my team were too heavily involved in establishing the Test connection, outside of providing AE titles, ports, IP addresses

Chris/███ was there any setup that occurred when establishing the connection to Test that needs to be replicated for pre prod?

Thanks

Scott

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

From: ████████ (Health)
Sent: Wednesday, 3 October 2018 8:10 AM
To: Barrett, Scott (Health) <Scott.Barrett@act.gov.au>
Subject: FW: [AUS - ACT] HL7 and DICOM migration status / questions [SEC=UNCLASSIFIED]

Scott,

Is there anything your team needs to do so Agfa can access the Siemens PACS from pre-Prod? It all worked for the Test environment but I don't know what might have been done to set that up.

███

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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, 2 October 2018 11:42 PM
To: ▮▮▮▮▮ ▮▮▮▮ (Health) <▮▮▮▮▮▮▮▮▮▮act.gov.au>; ▮▮▮▮ ▮▮ <▮▮▮▮▮▮▮▮▮▮▮▮▮
Cc: ▮▮ ▮▮▮▮▮ <▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮ ▮▮▮▮▮ ▮▮▮ (Health) <▮▮▮▮▮▮▮▮▮▮▮▮▮▮ Arsavilli, Dev
<Dev.Arsavilli@act.gov.au>; ▮▮▮ ▮▮▮ <▮▮▮▮▮▮▮▮▮▮▮▮▮ ▮▮▮ ▮▮▮ <▮▮▮▮▮▮▮▮▮▮▮▮
Subject: [AUS - ACT] HL7 and DICOM migration status / questions

Hi All,

HL7 migration

The remaining reports should be completed in +/- 1,5 hours.

DICOM migration

Validation / DICOM updates

Today I managed to execute the full validation and prepare all the needed DICOM
header updates. The **data is now ready** to start the DICOM migration towards EI.

I do have a small amount of studies that didn't pass our validation and no updates
are provided in the 'update excel files'. For these +/- 450 studies I will provide the
details as soon as possible.

Migration startup / Connection testing

I tried to send some studies to the production system, but get a DICOM ERROR C001
on all the tests (some randomly selected StudyUIDs below). **Can someone have a
look in the Siemens PACS if the AE Title(s) of EI have been created** and the
permissions are OK for the C-MOVE operations ?
(I would advise to create ACTIDIS_MIG and ACTIDIIS_PRIORS)
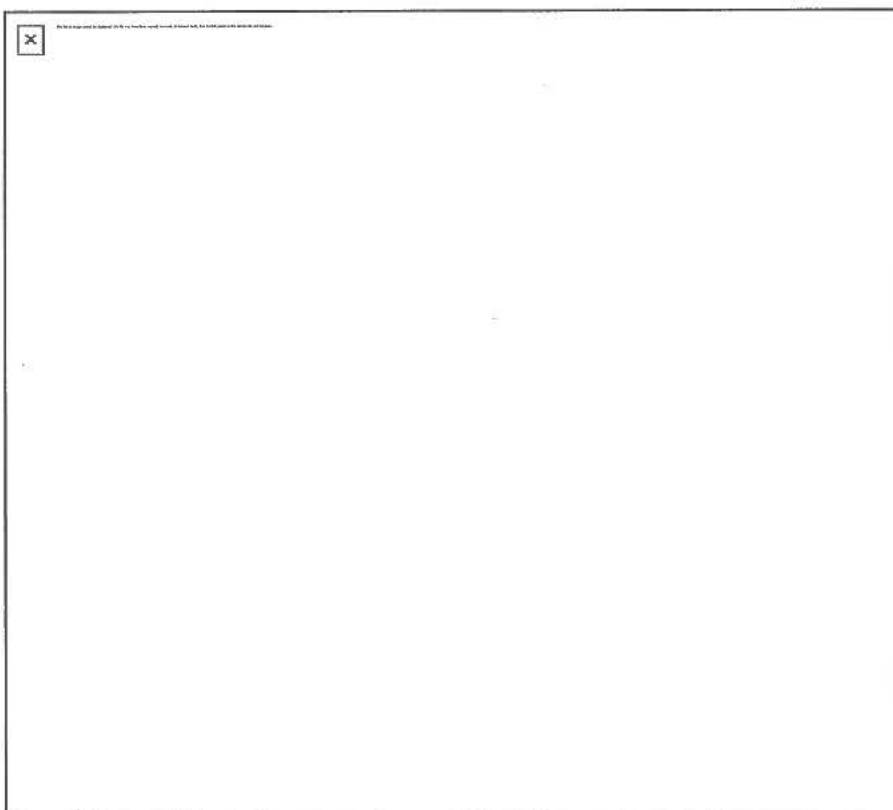
1.3.12.2.1107.5.8.7.1308.1312515232755.779978810		c001	Test to _MIG
1.2.840.113696.838383.500.1251133.20141023090614		c001	Test to _MIG
1.3.12.2.1107.5.8.7.1308.1339028517985.939521561		c001	Test to _MIG
1.2.840.113696.838383.500.1563199.20160122091036		c001	Test to _PRIORS

Kind Regards,

██████ ██ ██████

T ██████████

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http://blog.agfahealthcare.com

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IBAN Customer Account BE20375104592856 | ING Belgium NV, B-1000 Brussels

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From: ████ ██████
Sent: Monday 1 October 2018 8:30
To: ████████ ██████ (Health) <████████████act.gov.au>; ████████ <█████████████████████
Cc: ██ ████████ <████████████████████ ████ ███ (Health) <████████████████████ Arsavilli, Dev
<Dev.Arsavilli@act.gov.au>; ████ ████ <████████████████ ███ ████ <████████████████
Subject: [AUS - ACT] HL7 migration status

Hi All,

Attached you can find the current HL7 migration status.
As you can see the HL7 ORU migration is almost at 80%.

Today I'll be working on the DICOM verification (DICOM vs HL7) and hopefully start
the DICOM migration for studies that don't need any DICOM header updates.
(Starting with data from 2018)

Kind Regards,

██████ ██ ██████

T ██████████

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IBAN Customer Account BE20375104592856 | ING Belgium NV, B-1000 Brussels

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From: ████ ██████
Sent: Friday 28 September 2018 14:23
To: ████████ ██████ (Health) <████████████act.gov.au>; ████████ <█████████████████████
Cc: ██ ████████ <████████████████████ ████ ███ (Health) <████████████████████ Arsavilli, Dev
<Dev.Arsavilli@act.gov.au>; ████ ████ <████████████████ ███ ████ <████████████████
Subject: [AUS - ACT] HL7 migration status

FYI,

The HL7 ORM migration was completed a few moment ago.

I can't get the DICOM migration started today (and I don't want to on a Friday evening), so

I did start the HL7 ORU migration with a high amount of threads to get this going over the weekend.

Kind Regards,

T

NV,
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From:
Sent: Friday 28 September 2018 11:24
To: (Health) <act.gov.au>; <
Cc: < (Health) < Arsavilli, Dev <Dev.Arsavilli@act.gov.au>; < <
Subject: [AUS - ACT] HL7 migration status

Hi All,

Attached you can find the current migration status for the HL7 ORM migration.
The migration is estimated to take another 10 hours to complete the HL7 ORM part.
(After this the HL7 ORU and DICOM migration will be started)

@ (Health)
Thx, I now have all the files on the AMT server.

Kind Regards,

T

NV,
ttp://www.agfahealthcare.com
nttp://blog.agfahealthcare.com

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From: (Health) [mailto act.gov.au]
Sent: Thursday 27 September 2018 4:17
To: < <
Cc: < (Health) < Arsavilli, Dev <Dev.Arsavilli@act.gov.au>; <
Subject: RE: [AUS - ACT] ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Hi
Thanks for the migration status.

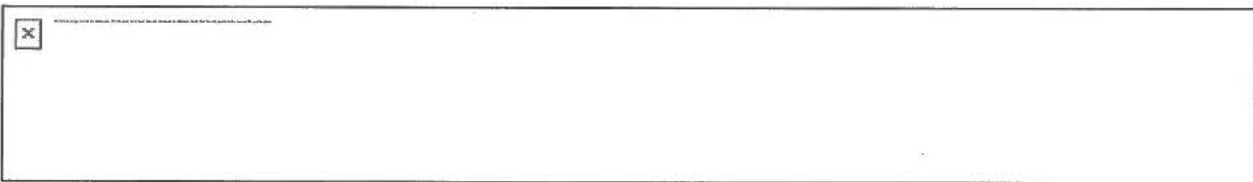The series file has also been compressed as requested.

Regards,

11

███████

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

From: ███ ████ [mailto:█████████████]
Sent: Wednesday, 26 September 2018 7:00 PM
To: ███████ ████ (Health) <█████████ act.gov.au>; ██████ ██ <█████████████
Cc: ██ ███████ <███████████████ ████ ██ (Health) <█████████████ Arsavilli, Dev <Dev.Arsavilli@act.gov.au>; ████ ████ <████████████ ████ █ <██████████████
Subject: [AUS - ACT] ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Hi All,

The migration is running again after the updates to the paths.
The remaining time for the HL7 ORM migration is currently estimated to take another 2,5 days to complete.
Attached you can find the current migration status.

I'm still stuck on the last file that I need, PACS_Series.txt.
Can you zip that one also ? For some reason I can't most of the .txt files …
The zip files copied very fast.

Kind Regards,

████████ ████ | ████████████
████████████ | ███
T ██████████ █ ███

████████ NV, ████████████████████
http://www.agfahealthcare.com
http://blog.agfahealthcare.com

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

From: ███████ ████ (Health) [mailto █████████ act.gov.au]
Sent: Wednesday 26 September 2018 5:13
To: ███ ████ <███████████████████ ████ █ <█████████████
Cc: ██ ███████ <█████████████████ ████ ██ (Health) <████████████ Arsavilli, Dev <Dev.Arsavilli@act.gov.au>; ████ ████ <██████████████
Subject: RE: [AUS - ACT] ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Hi █████
Thank you for the update.

I have now compressed all the Image files that were 2GB or more in size. Let me know if you still have any issues.
Regarding the attachments with an extra space in the filename, please remove the space and retry.

Thanks,
█████

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

From: ████ ████ [mailto █████████████████]
Sent: Tuesday, 25 September 2018 6:53 PM
To: ████████ ██████ (Health) <████████████act.gov.au>; ████████ ██ <████████████████
Cc: ██ ████████ <████████████████████ ████ ████ (Health) <██████████████████ Arsavilli, Dev
<Dev.Arsavilli@act.gov.au>; ████ ████ <████████████████ ████ ████ <████████████████
Subject: [AUS - ACT] ACTPAS/ EDIS configuration into production to start for the data migration for IDIS
[SEC=UNCLASSIFIED]

Hi All,

HL7 migration

All needed data is now ready on the AMT server and the HL7 ORM migration was started.
Once it has been running for a while, I will be able to provide some better stats, but
currently I can say we are sending +/- 10 HL7 messages per second. That would be 3 to 4
days to complete the HL7 ORM migration.

Some attachments already failed, but I believe it simply is an extra space in the filename (after VPROT).
████████, ████ (Health) Can you confirm that I can just remove the space and retry these ORM's ?
(I have +/- 26.000 of these VPROT in the attachment extract, VTECH seems to have the same issue)

Attachment file \\eimigration01.act.gov.au\attachment_data$\Attachments\Interactive_documents\VPROT
_1477089_7060216.pdf cannot be found.
Attachment file \\eimigration01.act.gov.au\attachment_data$\Attachments\Interactive_documents\VPROT
_1497192_7093555.pdf cannot be found.
Attachment file \\eimigration01.act.gov.au\attachment_data$\Attachments\Interactive_documents\VPROT
_1391902_6920855.pdf cannot be found.

DICOM migration

I can see all needed extracts on the provided share, but I don't seem to be able to copy the + 2GB
'image' files to the AMT server for import. The copy simply stops after a few seconds. Could
someone try and zip these files ? Or can we think of another way to get them on the AMT folder:
C:\Users\Administrator\Desktop\DICOM extracts\PROD

Kind Regards,

████████ ████ | ████████████
T ████████████

████████ NV, ████████████████████████
http://www.agfahealthcare.com
http://blog.agfahealthcare.com

From: ████ ████
Sent: Monday 24 September 2018 13:11
To: ████████████████████████████████ ██ <████████████ ████
████ <████████████████
Cc: ██ ████████ <████████████████████ ████ ████ (Health) <████████████████ Arsavilli, Dev
<Dev.Arsavilli@act.gov.au>; ████ ████ <████████████████

Subject: [AUS - ACT] ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Thx ████

I'll start working on the import/validation of these files.
Focus first on the HL7.

@ ██████ Can I start the ORM/ORU migration towards EI ?
Are is there anything on interface level that we need to way for ?

Kind Regards,

██████████ | █████████

T ████████████████

██████████ NV, ████████████████████
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From: ████████ (Health) [mailto:████████████act.gov.au]
Sent: Monday 24 September 2018 10:51
To: ████ █████ <████████████████████
Cc: ███████████ <████████████████████ ████ <█████████████████████████ (Health)
<████████████████ Arsavilli, Dev <Dev.Arsavilli@act.gov.au>; ████ ████ <████████████████
Subject: RE: ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Hi ████
All files are now available at the share location:
// Files for AGFA – This folder has all the HL7 and DICOM extract files. The Image file has been split into smaller yearly files from 2007 to 2018
// RIS/attachments – This folder has all the attachments (Scan, idocs and zSeg)

Also provided are some excel sheets with Patient merge DICOM header update details and PACS Exception details.

Thanks,

████

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

From: ████ █████ [mailto:████████████████
Sent: Monday, 24 September 2018 4:17 PM
████████████████████████████████████
Cc: ████ ███████ <████████████████████ ████ <█████████████████████████ (Health)
<████████████████ Arsavilli, Dev <Dev.Arsavilli@act.gov.au>; ████ ████ <████████████████
████ █████ <████████████████
Subject: RE: ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Thx for the update,

This afternoon I'm in training, so it is possible that I have to pick this up tomorrow morning.

Kind Regards,

██████████ ██

T ████████████████

███████████ NV, ████████████████████
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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: Monday 24 September 2018 7:01
To: ███ █████ <███████████████████
Cc: ███ ██████ <████████████████████ ████ █████ <███████████████████ ██████ (Health)
<██████████████████ Arsavilli, Dev <Dev.Arsavilli@act.gov.au>; ████ ███ <███████████████
Subject: RE: ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Hi █████

In regards to the HL7 and DICOM extracts to be delivered today, they are still being worked on. I am going through my final steps of verifying the data and exporting it to files.
I should be done in a few more hours.
I will keep you informed.
I will let you know when all the files are available.

Thanks,

█████

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

From: ████ ████ (Health)
Sent: Monday, 17 September 2018 1:57 PM
To: Arsavilli, Dev <Dev.Arsavilli@act.gov.au>; ████ ███ <███████████████████
Cc: ███ ██████ <████████████████████ ████ █████ (Health) <██████████act.gov.au>; ████
Deplae <████████████████████ ███ ██ <████████████████ McKenzie, Theresa (Health)
.Theresa.McKenzie@act.gov.au>; Cowey, Michael <Michael.Cowey@act.gov.au>
Subject: RE: ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

█████

In regards to the below table, we are waiting on confirmation that the Archived ADT messages were all processed successfully, and that the live feeds from ACTPAS and EDIS are now being processed. We have not yet received any details on that task, including final processing statistics. Could you please follow up on that for us.

Additionally, we will not be able to deliver the RIS and PACS migration files today as scheduled, since Siemens have had problems processing the data at their end. We are expecting now that the earliest possible date for delivery from ACT Health to Agfa will be this Friday 21 September, though it is more likely to be CoB on Monday 24 Sept.

I have updated some of the table dates below to reflect actuals and adjusted expected dates.

Regards

████

████ ███████ | IDIS Delivery Manager - UCH 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: Arsavilli, Dev
Sent: Friday, 31 August 2018 11:08 AM
To: ████ ████ <████████████████████>
Cc: ██ ████████ <████████████████████ ████ ████ (Health) <████████████████████ ████
████ (Health) <████████████ act.gov.au>; ███ ████ <████████████████████ ████
<████████████████ McKenzie, Theresa (Health) <Theresa.McKenzie@act.gov.au>; Cowey, Michael
<Michael.Cowey@act.gov.au>
Subject: RE: ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Hi ████

Apologies, I thought I sent this out after the meeting but realised that I did not sent it out.

My update to the events as discussed in the meeting 29/08/2018 4:30 – 5:10pm:

#	Task	Start Date	End Date	Resource
1	Archiving of ACTPAS messages	29/08/2018		Michael
2	PMI Data Extraction	29/08/2018	31/09/2018	████
3	Start ACTPAS interface in IDISP Pre-prod	████ to fill-in		Agfa
4	Agfa Patient Load	04/09/2018	09/09/2018	Agfa
5	Re-play the archived ACTPAS messages	11/09/2018	14/09/2018??	Michael, Agfa
6	Start ACTPAS interface - ACTH	13/09/2018		Michael, Agfa
7	Agfa 20% RIS load	24/09/2018	28/09/2018	Agfa, ████
8	Image Migration of (first two years)	29/09/2018	19/10/2018	Agfa
9	Agfa 80% RIS load	29/09/2018	19/10/2018	Agfa
10	Image Migration of the rest	20/10/2018		Agfa

Please update task 3 and the following dates will depend on that.
I will update the rest in line with the schedule and will distribute another Runsheet.

Kind Regards,

Dev

--

Dev Arsavilli | Project Manager
Phone: 02 6174 8729 | Mobile ████████ | Email: Dev.Arsavilli@act.gov.au
Future Capability and Governance Branch | Digital Solutions Division | Health Directorate | ACT Government
2-6 Bowes Street, Phillip ACT | GPO Box 825, Canberra ACT 2601 | act.gov.au

From: ████ ████ [mailto:████████████████████]
Sent: Wednesday, 29 August 2018 10:54 AM
To: Cowey, Michael <Michael.Cowey@act.gov.au>; Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
Cc: ██ ████████ <████████████████████ ████ ████ (Health) <████████████████████ ████
████ (Health) <████████████ act.gov.au>; ███ ████ <████████████████████ ████
<████████████████ ████ ████ <████████████████████
Subject: RE: ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Hi Dev,
I have added ████ and ████████ to this communication.

16

Kind Regards,

███████ ███ | ████████████
████████████ | ████████████████
M ████████████

Out of office alert:
Friday 10th August
Wednesday 15th August
24th September to 5th October inclusive
5th to 7th November inclusive

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http://blog.agfahealthcare.com

From: Cowey, Michael [mailto:Michael.Cowey@act.gov.au]
Sent: Wednesday, 29 August 2018 10:39 AM
To: Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
Cc: ███ ████████ <████████████████ ████ ████ (Health) <████████████████ ███ ████
████ (Health) <████████████ act.gov.au>; ████ ███ <████████████████ ████
Subject: RE: ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Hi Dev,
The archiving is a standard process that has been in place for years so no issue there. I think you need to swap 4 and
5 over, we need to replay the archived messages first, then connect up the live ACTPAS interface.
Cheers,
Michael

From: Arsavilli, Dev
Sent: Wednesday, 29 August 2018 10:34 AM
To: Cowey, Michael <Michael.Cowey@act.gov.au>
Cc: ███████████████ ████ ████ (Health) <████████████████ ███ ████ ████ (Health)
<████████████ act.gov.au>; ████ ███ <████████████████ ████
Subject: RE: ACTPAS/ EDIS configuration into production to start for the data migration for IDIS [SEC=UNCLASSIFIED]

Hi Michael,

We are ready to start the PMI data extract today.
Is the achieving is in place are does it require be manually started?

The events as per the current schedule:

#	Task	Start Date	End Date
1	Achieving of ACTPAS messages	29/08/2018	
2	PMI Data Extraction	29/08/2018	31/09/2018
3	Agfa Patient Load	03/09/2018	07/09/2018
4	Start ACTPAS interface in Pre-prod	10/09/2018	
5	**Re-play the archived ACTPAS messages**	**10/09/2018**	
6	Agfa 20% RIS load	17/09/2018	21/09/2018
7	Image Migration of (first two years)	22/09/2018	12/10/2018
8	Agfa 80% RIS load	22/09/2018	12/10/2018
9	Image Migration of the rest	13/10/2018	

All these activities will be one after the other except for 7 and 8.

████ **could you please confirm that item 5 happening after item 4 would not be an issue?**

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: Cook, Sandra (Health)
Sent: Tuesday, 28 August 2018 2:11 PM
To: Cowey, Michael <Michael.Cowey@act.gov.au>
Cc: Arsavilli, Dev <Dev.Arsavilli@act.gov.au>
Subject: ACTPAS/ EDIS configuration into production to start for the data migration for IDIS

Hi Michael,

Would you please activate the ACTPAS integration for IDIS into pre-production required for the data migration work? I have reviewed the processes we are proposing and am happy for this to move into pre-production so we can commence data migration.

Really appreciate it!

Kind Regards,

Sandra Cook | Director Future Capability & Governance
Phone: 02 6205 1451 | Mob. ███████
Email: sandra.cook@act.gov.au
Future Capability & Governance | Digital Solutions Division| Health Directorate | ACT Government
Canberra Hospital, Garran ACT | PO Box 11, Woden ACT 2606 | act.gov.au

----

Heland, Rebecca (Health)

From:	██████ ████ (Health)
Sent:	Monday, 8 October 2018 3:55 PM
To:	Griffiths, Jessica (Health); ████████████████
Cc:	██████ ███ (Health); ████████ ███████ ████████████████ ██████ ███ ███ Barrett, Scott (Health); ██████████
Subject:	RE: [AUS - ACT] HL7 and DICOM migration status [SEC=UNCLASSIFIED]

Hi ████ Jess,
I am having troubles accessing the data today, so haven't had a chance to look at the accession numbers and Patient IDs mentioned below.
I will have a look as soon as my access is sorted.

I think we should be good to start migrating studies that do not need an update.
I will have a look at the ones that need an update and get back to you soon

Thanks,
██████

From: Griffiths, Jessica (Health)
Sent: Monday 8 October 2018 10:40
To: ████████████████ ██████ ███ (Health)
Cc: ██████ ███ (Health); ████████ ███████ ████████████████ ████ ████ ████ ████ ████ Barrett, Scott (Health); ██████████
Subject: RE: [AUS - ACT] HL7 and DICOM migration status [SEC=UNCLASSIFIED]

Hi ████████

I have checked the below accession numbers and there seems to be images missing for AccNo ██████ MRN ██████.

In Siemens this is a split study with the same accession number one study has 51 images and the other study has 5 images. EI only has 51 images.

██████ I have checked ██████ query below and the active MRN is ██████ in ACTPAS and Siemens.

Thanks,
Jess

Jess Griffiths | RIS Admin- Subject Matter Expert
Direct Phone: 02 5124 8730 | Direct Email: Jessica.griffiths@act.gov.au
IDIS Project | Future Capability & Governance | Digital Solutions Division | ACT Health Directorate | ACT Government
24/7 User Support: 02 5124 5000 | Email: Digital.Support@act.gov.au | healthhub.act.gov.au/technology
Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | health.act.gov.au

From: ██████ ████ (Health)
Sent: Monday, 8 October 2018 9:23 AM
To: Griffiths, Jessica (Health) <Jessica.Griffiths@act.gov.au>
Subject: FW: [AUS - ACT] HL7 and DICOM migration status [SEC=UNCLASSIFIED]

Jess,

Can we check out these studies?? Pretty please? If they look good then I think we are good to go with image migration.

T

████ ████ | **IDIS Delivery Manager - UCH Digital Solutions Program**
Direct Phone: 02 5124 8768 | Mobile: ██████████ | Email: ██████████████████
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24/7 User Support: 02 5124 5000 | Email: <u>Digital.Support@act.gov.au</u> | healthhub.act.gov.au/technology
Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | health.act.gov.au

From: ████ █████ [mailto ██████████████
Sent: Friday, 5 October 2018 6:46 PM
To: ████████ ███ (Health) <██████████████████ ██ ████ <████████████████ ████ ████
(Health) <████████████ act.gov.au>; Arsavilli, Dev <<u>Dev.Arsavilli@act.gov.au</u>>
Cc: ██████ ██ <████████████████████ ██ █████ <█████████████ ████ ██
<██████████████ ████ ████ <█████████████ Barrett, Scott (Health)
<<u>Scott.Barrett@act.gov.au</u>>; ████ █████ <████████████████
Subject: [AUS - ACT] HL7 and DICOM migration status [SEC=UNCLASSIFIED]

Hi All,

HL7 migration

> Scheduling load running

DICOM migration

> Today I have tried to send in a study for each 'type' of migration that will be needed during
> the DICOM migration. All have gone in as expected. Please have a look in EI at the studies below.
> Order provided, no updates   7186007 -
> 1.2.840.113696.838383.500.428520.20180108010913
> No order provided, no updates   7624095 -
> 1.3.12.2.1107.5.8.2.100244.201804241237158075581.1
> Order provided, update needed on PID to match   7231694 -
> 1.2.840.113696.838383.500.474808.2018031113578
> Order provided, update needed on AccNr to match   7251511 -
> 1.2.840.113696.838383.500.494975.20180407104138
> Order provided, update needed on AccNr to match   7244109 -
> 1.2.840.113696.838383.500.487524.20180327211046

So on Monday 08/10 I can start the batch 'Order provided, no updates' of + 1.500.000 studies.

@██████ ██████ (Health) I do have something that I want to verify to be 100% sure.

> For study 1.2.840.113696.838383.500.474808.2018031113578, I believe we really want PID 1████████
> - The HL7 order extract has PID 19049069
> - The DICOM extract has PID 19049069
> - The DICOM Header update file has 19049069 as 'Active PID' to use

But in EI, this PID was merged to the 'Merged PID' from the DICOM Header update ████████ on 15/09
in EI, so after the HL7 ADT migration and before the HL7 ORM migration from a message created on 11/09.

Result, after the full process, the patient is still linked to PID ████████
This is <u>not</u> a problem and all systems work correct, but it just seems like something I need to run by you.

Kind Regards,

████ █████ | ████████████████