

# HATRIX

## Decision Support - A Data Integration Approach

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## About HATRIX

- Medication Management Software
- Hospital Customers
- Decision Support Focus (beyond CPOE)
- Philosophy – use standards, but don't wait for them

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## Products

- MedChart
  - Electronic medication chart
  - Prescribing, review, administration
  - DS: Interactions, rules, guidelines
- Reference Viewer
  - Reference documents from many sources
  - Intelligent integration with MedChart

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## Data Integration

- Currently Includes:
  - AMH (docs)
  - APP (docs)
  - Hypertox (docs)
  - MIMS (drugs, docs, DS) (au and nz)
  - PBS (drugs)
  - Pharmac (docs, via MIMS nz)
  - Therapeutic Guidelines (docs)
  - Customers' own (drugs, docs, DS)

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## Demo

- Reference Viewer
- MedChart

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## Data Unification - Approach

- Unification of structure
  - Identify entities in source data - Product, Active Composition, Packs, PBS Info, etc.
- Unification of codes
  - Define codes for each entity
  - Maintain mappings to source data codes
- Grouping of generic entities
  - Creating generic medications from products

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## Data Unification – Needs

- Structure must support prescribing by:
  - Product (e.g. Panadeine 2 tablets)
  - Active Composition (Paracetamol 500mg + Codeine 30mg)
  - Substance (Warfarin 7mg)
  - Packs (e.g. Panadeine pack of 12)

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## Data Unification - Needs

- Standard codes for:
  - Substances
  - Products
  - Generics
  - Forms
  - Units

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## Data Unification - Needs

- Standardisation of forms
  - Currently no definitive list
- Forms coded for administration
  - Most data providers give form for presentation: *Powder for injection*
  - Prescribers need form for administration: *Injection*

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## Guidelines - Approach

- Use existing XML/HTML
- Use existing index/search structures
- Build cross-references to substances and brands

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## Guidelines - Needs

- Links from guidelines to prescribe drugs or protocols
- Guidelines coded for health issues and other applicability criteria
- Ability to apply rules from guidelines (e.g. interactions)
- Ability to exchange guidelines/rules between customers

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## Guidelines - Needs

- Transition to structured guideline
  - Structured and unstructured guidelines must co-exist
  - May be difficult to integrate guidelines engine with existing software

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## Conclusions

- Drug Data Unification
  - We've done it
  - Would be better done by data providers, within standards
  - Must be use case driven
- Guidelines
  - Must move towards structured documents with coded selection criteria, prescribing info and DS rules
  - Must be use case driven

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## Questions

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