

Frank - van Swieten - Lectures 2020

Design of a health information system for the treatment of COVID-19 patients in Leipzig, Germany

Leipzig, June 2020 Course AISGW at University Leipzig



Outline

Introduction

COVID-19 in Germany, Saxony and Leipzig

Process model

Assumptions & Simplifications

$3LGM^2$ model

Domain layer

Assumptions & Simplifications

Logical tool layer

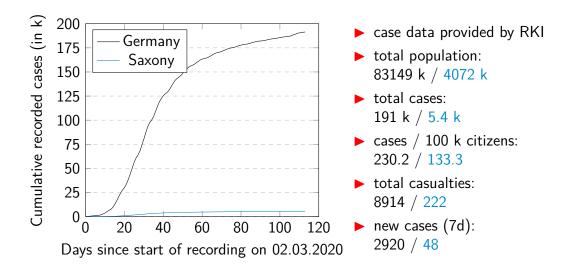
Physical tool layer

Discussion

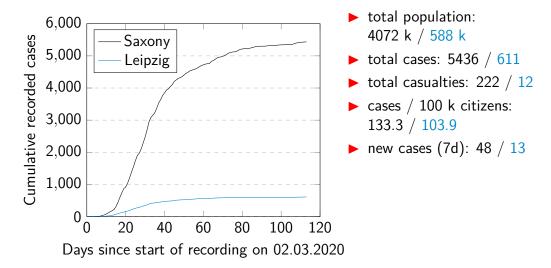
Who are we?

- ▶ five students of computer science at the University of Leipzig
- ▶ course "AISGW" by Prof. Dr. Winter, Ms. Jahn, Dr. Schneider, Mr. Stäubert
- varying experience in computer science and health information systems

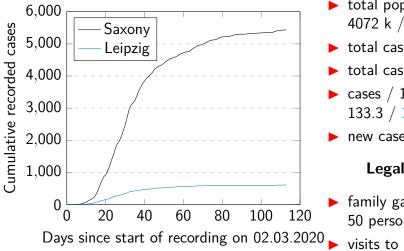
Current COVID-19 situation in Germany and Saxony



Current COVID-19 situation in Saxony and Leipzig



Current COVID-19 situation in Saxony and Leipzig

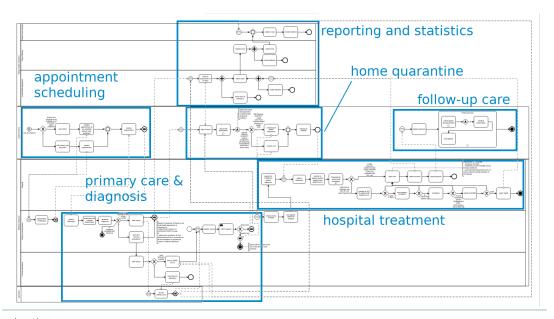


- total population: 4072 k / 588 k
- total cases: 5436 / 611
- ▶ total casualties: 222 / 12
- cases / 100 k citizens: 133.3 / 103.9
- new cases (7d): 48 / 13

Legal situation

- family gatherings with max. 50 persons
- visits to hospitals and retirement homes

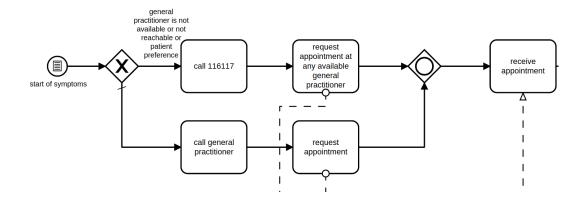
Overview of the process model



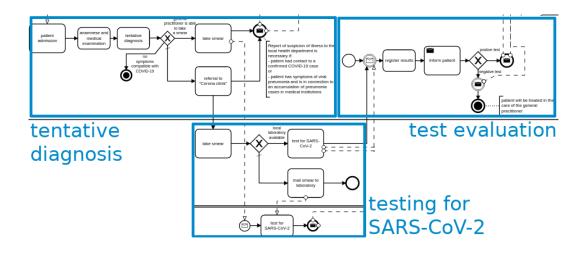
Assumptions & Simplifications

- ▶ Because of the rapidly changing landscape of measures and applications in this ongoing crisis, this model is limited to factual situation from 2 weeks ago.
- ▶ We assume that all patients first contact their general praticioner to receive primary care and to get tested for COVID-19.
- ► For statistical purposes, all diagnosed COVID-19 cases are assumed to be Leipzig residents.

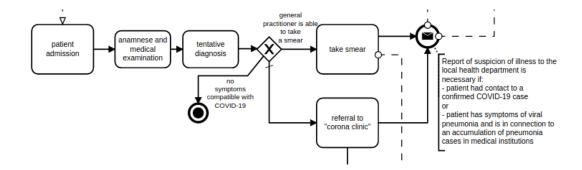
Appointment scheduling (@ patient's home)



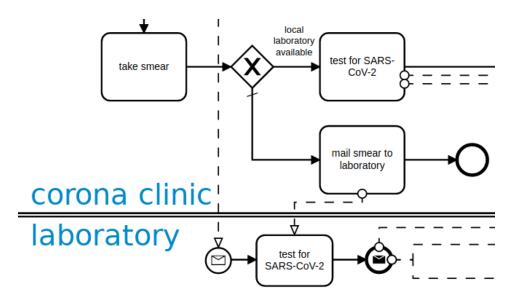
Overview of primary care & diagnosis



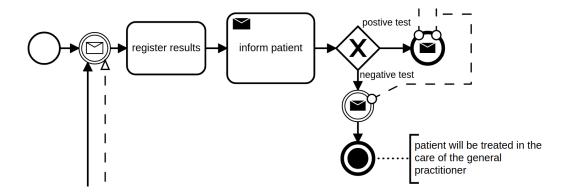
Tentative diagnosis (@ general practitioner)



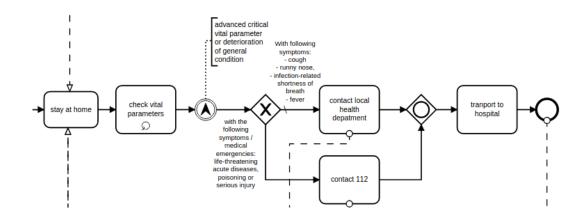
Testing for SARS-CoV-2



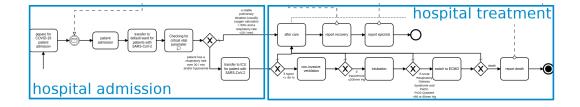
Test evaluation (@ general practitioner)



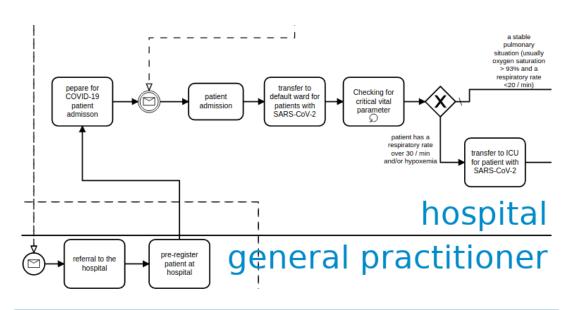
Home quarantine (@ patient's home)



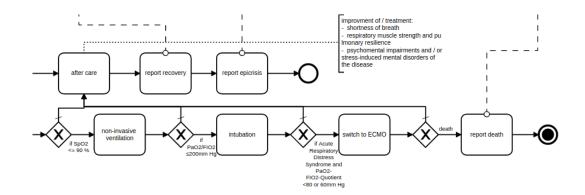
Overview: Hospital admission & treatment



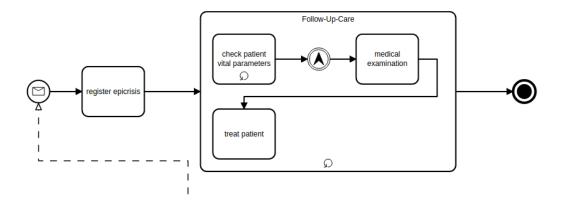
Hospital admission



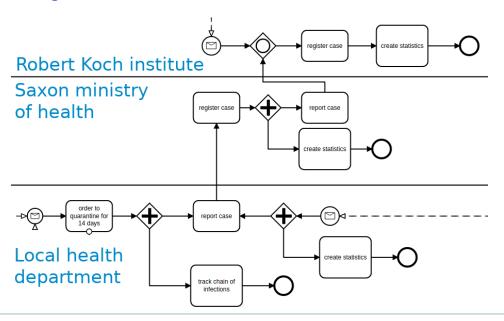
Hospital treatment (@ hospital)



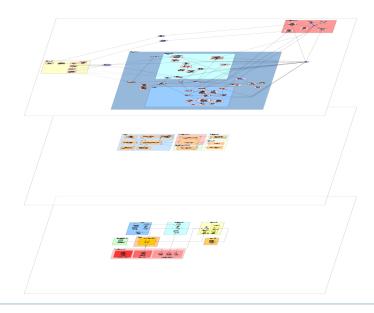
Follow-up care (@ patient's home)



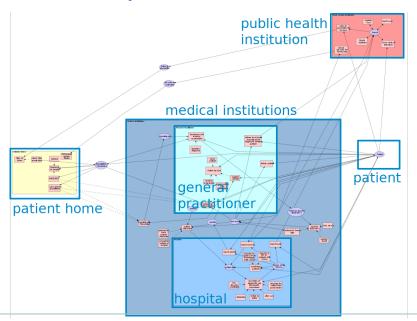
Reporting & statistics



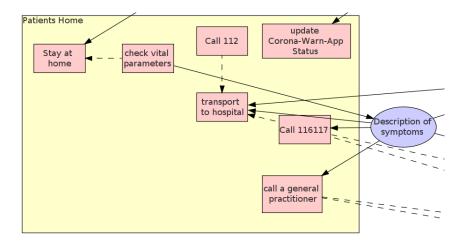
Overview: 3LGM² model



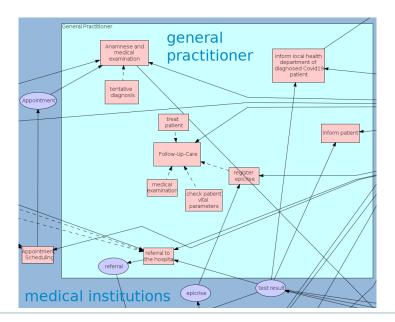
Overview: Domain Layer



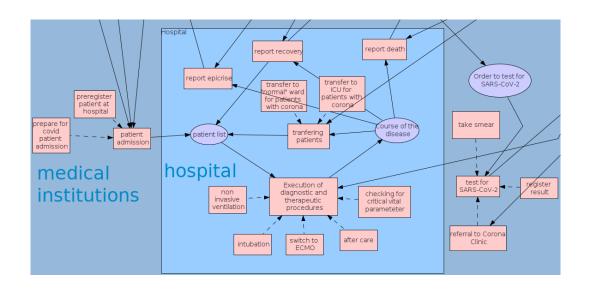
Domain layer: Patient home



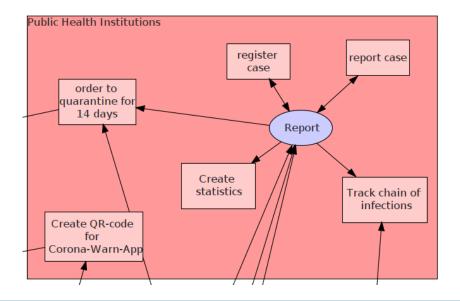
Domain layer: General practitioner



Domain layer: Hospital



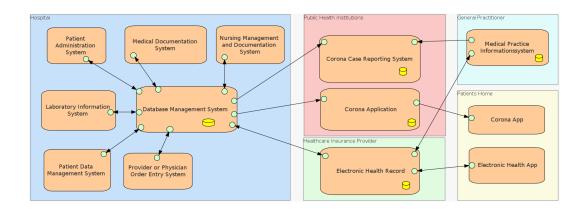
Domain layer: Public Health Institutions



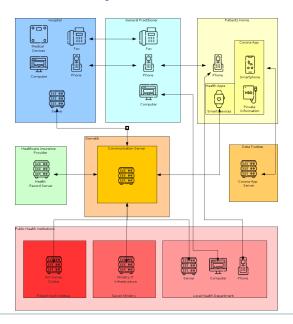
Assumptions & Simplification

- ▶ There is a single, shared data standard (FHIR) in the HIS.
- ▶ There is a single, centralized database in the HIS.
- ► There is a central communication server under the control of a trustable institution (Gematik).
- ▶ There is a eletronic health record available for each patient.
- ► There is a smartphone app (Corona-Warn-App) with a sufficient adoption rate to track and help to disrupt chains of infection.

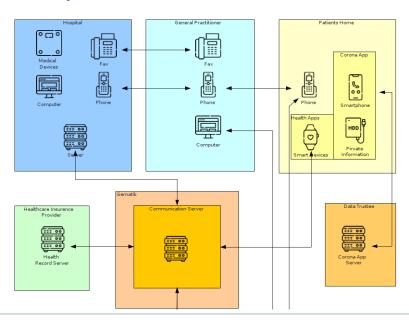
Logical tool layer



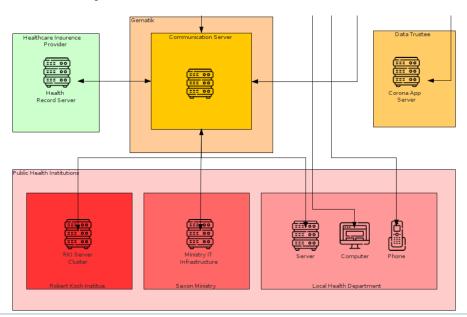
Overview: Physical tool layer



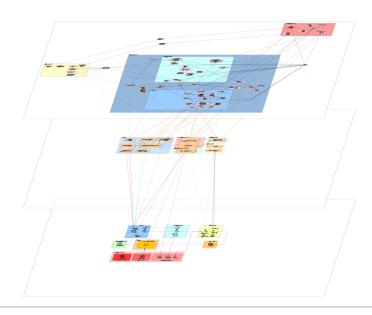
Physical tool layer



Physical tool layer



Overview: Interconnected 3*LGM*²*model*



Discussion

Thank you for your attention. You can find our all our models on Github:

▶ https://github.com/AISGW2020/Corona_HIS

Do you have any questions?



THANKS!

Course AISGW at University Leipzig

Institute for Medical Informatics, Statistics and Epidemiology (IMISE)

www.imise.uni-leipzig.de

Backup Slides: Matrix View

