turning knowledge into practice

ZEPRS: Zambian Electronic Perinatal Medical Records System

Presenter: Niamh Darcy

Date: September 2007 Time: 14:00 – 14:30

RTI International is a trade name of Research Triangle Institute



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Context: 2002

- Maternal mortality rate 940/1000
- Lifetime risk of death in pregnancy 1/25
- Disability Adjusted Life Years (DALY) at birth 30.7
- Virtually all modern health care for 2 million women in Lusaka provided by 23 clinics and the University Teaching Hospital (UTH)
- 13 of 23 clinics provide antenatal care, 9 with labor wards
- 47,000 estimated total obstetric cases (2002)
- All medical records on paper
- Patients may move among clinics, but limited sharing of patient records
- No central database for monitoring patient population or quality of care



Children outside Chainda Clinic, Lusaka

Scope, Funding, Client

Scope

- Lusaka, Zambia
- 23 public health clinics ZEPRS
- University teaching hospital
- Central Board of Health
- Center for Infectious Disease Research in Zambia (CIDRZ)
- Lusaka Urban District Health Management Team (LUDHMT)

Donor

Bill & Melinda Gates Foundation –

Client Funding

University of Alabama Birmingham –
 US \$2.7 million (2002-Sept 2006); US \$70K (Oct 2006 – present)



Key Problems & Proposed Solution

Key Problems

- Almost impossible to systematically assess care delivery
- Surveillance data limited to simple crosssectional statistics, such as how many stillbirths or pregnancy-attributable maternal deaths occur in a given month
- Even available statistics were suspect
- Occasional failure to test and frequent failure to follow up patients diagnosed with STDs
- Limited sharing of patient records between facilities
- No central database for monitoring patient population or quality of care

Proposed solution

- Electronic-first perinatal record system
- Patient records shared among facilities
- Centralized patient records database



Patient file storage at University Teaching Hospital, Lusaka

In 2005 only one-quarter of office-based physicians in the U.S. used a fully or partially electronic medical record system. (Burt, Catharine W., Hing, Esther, and Woodwell, David. U.S. National Center for Health Statistics, 2005.)

Challenges

Telecommunications

- Weak landline infrastructure
- Congested 2.4GHz wireless segment

Clinics

- Dusty, congested
- 7 of 23 clinics had telephone lines
- All clinics with VHF radio for voice

Personnel

- Low computer literacy
- Very stressed due to patient load
- High medical staff turn-over

Electrical

- Inadequate electrical systems at all points, no backup power, No lightening protection
- Poorly regulated grid (Frequent power outages)



Clinician at the door of the Prisons Kamwala Clinic in 2002.

Wireless Network



 27km diameter hub-and-spoke line-of-sight wireless network

■ 3 – 9 PCs in each clinic

 Voice (VoIP) and data communication for all facilities

> Satellite image of Lusaka showing ZEPRS wireless network links



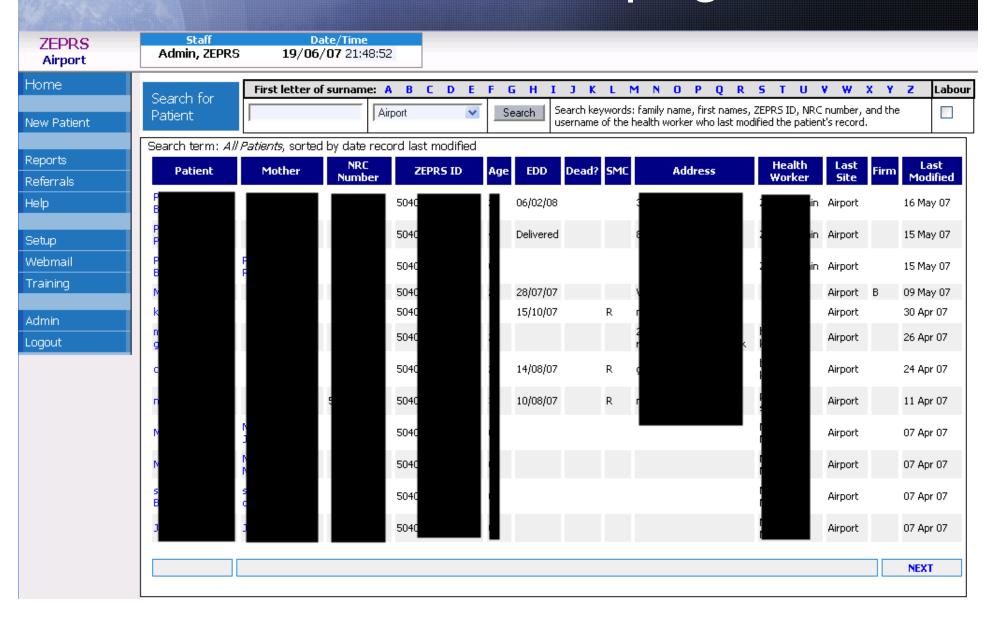
ZEPRS Key Concepts

- Guides medical personnel through Zambian standard of perinatal care
- Concept of "flows" within the system and related data (user driven)
- Shared terminal usage
- Usage of ZEPRS data for quality assurance and supervision (export to SPSS, SAS..)
- Patient confidentiality
- Adaptability/Extensibility of ZEPRS system open source (HIV/ART, Safe Motherhood)
- Using mini applications to build computing skills

ZEPRS Key medical features

- Safe Motherhood
- Pregnancies linked together
 - Convert typical visit to problem visit
 - Graphical Partograph (matches WHO partograph)
 - Patient Referral System
 - Use of EDD/EGA calculation and update in display (with options for manual over-ride) – very useful automation for nurses
 - Antenatal and Postnatal card generation (supports patient mobility)
 - Infants linked to mother for each separate pregnancy
- Reports
- Problem Management including problems across multiple pregnancies

ZEPRS Home page



Patient Status

 ZEPRS Airport
 Staff Admin, ZEPRS
 Patient 2028, PosSingle 1
 NRC Number District ID Date/Time
 Date/Time

 5040-332-00232-7
 19/06/07 21:55:17

Home

Demographics

History/Dating

Antepartum

Safe Motherhood

Labs

Medications

Problem or Labor Visit

Partograph

Postnatal/ Delivery Summary

UTH Registry

Problem List

Ultrasound

Children

Patien,Baby1

Referrals

Reports

Help

Webmail

Training

Admin

Logout

Delivery Summary/Postnatal

	Form	Status	Staff Member	Site	Visit Details			
>	Delivery Summary	Done	Admin, ZEPRS	Airport	19 Jun 2007 21:53			
>	Baby1 Patient2028 Newborn Evaluation Sex: Female	Started	Admin, ZEPRS	Airport	19 Jun 2007 21:53			
	Puerperium	Recent Entry:	Admin, ZEPRS	Airport	19 Jun 2007 21:53			
>	Maternal Discharge Summary	Done	Admin, ZEPRS	Airport	19 Jun 2007 21:53			
>	Postnatal Maternal Visit	Done	Admin, ZEPRS	Airport	19 Jun 2007 21:53			
	Postnatal Maternal Visit	Available						
	Postnatal Maternal Problem Visit	Not Done						
	Pregnancy Conclusion	Not Done						

Problem List

Problem	Date	^				
SYSTEM-GENERATED OUTCOMES						
Hb Lab Results: Hb below 10	19 Jun 07					
Hb Lab Results: Hb below 10	19 Jun 07					
Systolic blood pressure is >= 150: Consider referral to UTH	19 Jun 07					
Lab Results: Urinalysis Albumin >= 1+	19 Jun 07					
Lab Results: Urinalysis Glucose > 1+.	19 Jun 07					
Urinalysis Acetone >= 2+ - Need to request diabetes test.	19 Jun 07	■				
Urinalysis Protein >= 2+ - Need to request diabetes test.	19 Jun 07					
Urinalysis Protein >= 2+ - Need to request diabetes test.	19 Jun 07					
Small stature (<= 150 cm) : Consider referral to UTH.	19 Jun 07					
Temperature is above 37.5.	19 Jun 07					
Consider referral to UTH if Thyroid is not "Normal"	19 Jun 07					
Lab Result: Reactive	19 Jun 07					
Hypertension: Medical/Surgical History - Consider referral to UTH.	19 Jun 07					
Patient had a C/S delivery: Consider referral to UTH.	19 Jun 07	~				

Chart: Routine Antenatal visits

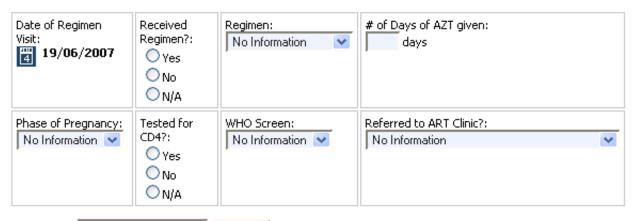
Routine Antenatal Visits

D-1-	20/06/2007	20/06/2007	en les lecen
Date	X	Ż	<u>20/06/2007</u>
Site	Airport	Airport	
EGA	5, 1/7	6, 0/7	6, 0/7
Fundal Ht. (cm)	13	14	🔻
Lie	Longitudinal	Longitudinal	🔻
Pres.	Cephalic	Cephalic	🔻
Descent		3/5	💟
Oedema	2+	1+	🔻
FHR (bpm)	120 - 160	120 - 160	🔻
FH Rhythm	Reg.	Reg.	🔻
BP: Sys. (mm/hg)	180	150	No Information 💌
BP: Dia. (mm/hg)	80	80	No Information 💌
Weight (KG (xxx.xx))	55.0	57.0	
Ace.	1+	Tr.	💟
Alb.	3+	0 (-)	🔻
Glu.	2+	0 (-)	💟
Deworming	Yes	Yes	○Yes ○No ○N/A
Folate	Yes	Yes	○Yes ○No ○N/A
Iron	Yes	Yes	○Yes ○No ○N/A
Malaria SP	SP1	SP2	>
Next Appt.			<u>Date:</u>
Problem?			
			Password: Done

Safe Motherhood: Regimen Results

Safe Motherhood | Labs | RPR | Counsel | ARV | Hematology | Chemistry | Liver Function | Urinalysis

Regimen Given Today



Password: Submit

Regimen Given Today Records

Phase of Pregnancy column is only used for the mother. Please disregard for infant records.

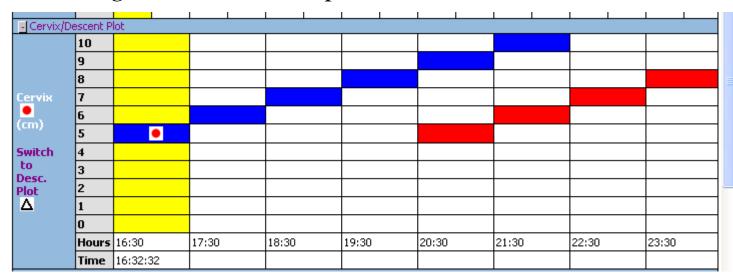
Date of Regimen Visi	Received Regimen?	Regimen	# of Days of AZT given	Phase of Pregnancy	Tested for CD4?	WHO Screen	Referred to ART Clinic?	Del.
2007-06-19	Yes	NVP + AZT		Antenatal	Yes	Positive	Yes - Non-urgent appointment in 1-2 months	X

Problem List

Active Problems							
Problem	Date						
MISSING LAB RESULTS							
CD4 Count							
SYSTEM-GENERATED OUTCOMES							
Lab Result: Reactive	19 Jun 07						
Lab Results: Urinalysis Acetone > 1+.	19 Jun 07						
Systolic blood pressure is >= 150: Consider referral to UTH	19 Jun 07						
Diabetes: Medical/Surgical History: Consider referral to UTH.	19 Jun 07						
Patient had a C/S delivery: 19 J Consider referral to UTH.							
LONG-TERM PROBLEMS							
Patient had a C/S delivery: Consider referral to UTH.	19 Jun 07						

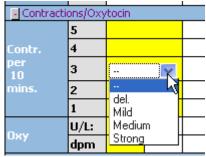
Partograph: Complex data entry with simple user interface

Tracking Cervix/Decent plot



Elapsed Time: 0:02:13 Cervix Elapsed: 0:00:25

Entering data:



Result:

■ Contractions/Oxytocin							
	5						
Contr.	4						
per 10	3						
mins.	2						
	1						
O	U/L:						
Оху	dpm						

				_
 Contract 	tions/Oxy	/tocin		
	5			
Contr.	4			
per 10	3			
mins.	2			
	1			
0	U/L:			
Оху	dpm			

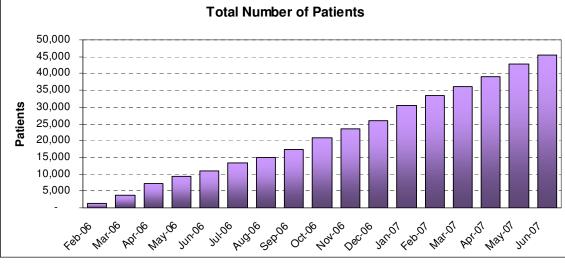
ANC Monthly Report

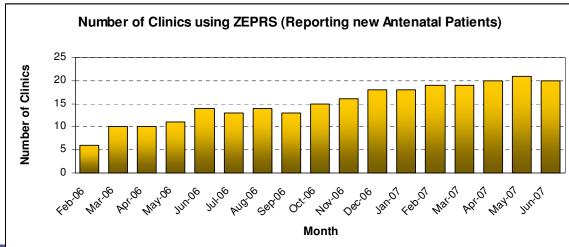
Date	New ANC Client	Missing ANC Forms	Revisits	Counseled New ANC	Counseled Revisit	Pre-Test Counseled	HIV Tested New ANC	HIV Tested Revisit		Refused Testing	Received Results	Uncollect. Results	HIV Positive:	HIV Negative	HIV Indeterm.
TOTAL	153	1	204	137	9	146	138	9	147	0	143	3	36	110	0
2007-05-01	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2007-05-02	12	0	13	8	1	9	9	1	10	0	11	0	4	7	0
2007-05-03	7	0	6	7	0	7	7	0	7	0	6	1	2	5	0
2007-05-04	3	0	1	2	0	2	2	0	2	0	2	1	0	3	0
2007-05-05	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2007-05-06	0	0	0	0	1	1	0	1	1	0	1	0	0	1	0
2007-05-07	12	0	7	11	0	11	11	0	11	0	11	0	5	6	0
2007-05-08	18	0	34	16	0	16	16	0	16	0	16	0	7	9	0
2007-05-09	7	0	3	7	0	7	7	0	7	0	7	0	0	7	0
2007-05-10	2	0	23	2	0	2	2	0	2	0	2	0	1	1	0
2007-05-11	7	0	22	7	0	7	7	0	7	0	7	0	2	5	0
2007-05-12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2007-05-13	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2007-05-14	16	0	5	16	0	16	16	0	16	0	16	0	4	12	0
2007-05-15	8	0	8	9	0	9	9	0	9	0	9	0	0	9	0
2007-05-16	8	0	8	8	0	8	8	0	8	0	8	0	2	6	0
2007-05-17	4	0	7	4	0	4	4	0	4	0	4	0	0	4	0

Results: Patient Records Managed

20 clinics and more than 45,000 patients (June 2007)

Average of 2,608 new antenatal patients/month





System role-out at average rate of 1 new clinic/month.

ZEPRS Summary - Critical Success Factors

- Close collaboration with health workers and UAB
- Thorough testing
- Effective user training
- User acceptance and participation
- Reliability and performance of network
- Reliability of computers in facilities
- Project management
- Use of on-line tools, and IM for remote project support

Software Platform

Platform Component	Selected Solution
Operating System	Red Hat Enterprise 3 (Currently CentOS 4.2)
Server Backup	Arkeia Backup 5.2
Wireless Authentication	AEGIS Premium Server 1.1.4
Relational Database	MySQL 3.23 (currently MySQL 5.0)
Web Application Server	Apache (httpd) 2 Tomcat 5 (servlet container)
E-mail	Cyrus IMAP, Postfix, Spam Assassin
E-mail Web Interface	Squirrel Mail
Firewall	SonicWALL
Client Anti-virus	McAfee
E-mail Server Anti-virus	AMaVIS

ZEPRS Team

RTI Development Team

Eileen Reynolds, Project Manager Chris E. Kelley, Senior Software Developer Niamh Darcy, Senior Technical Advisor Pablo Destefanis, Senior Networking and Telecommunications Specialist Gordon M. Cressman, Senior Project Advisor

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