

Step	Discussion	Jane's Story	StMungos Story	Dr. Good's Story	Dr. Primary's Story
	The 5 encounter episodes below flow down in roughly chronological order. The perspective and user interfaces of the key actors runs across.	Coloring of boxes is used to depict the technical responsibility of each of the 4 vendors in the demo: Sun, Novell, Ping Identity and MedCommons.			
	The plot has Jane Doe as an existing customer of the Liberty-enabled HooYa ISP moving to Newtown. Jane breaks her arm carrying a bookcase and is treated by Dr. Good at St. Mungos. After her arm is X-rayed and cast, Jane selects Dr. Primary as her PCP. Please continue reading across to the right >>>	St. Mungo's helps Jane out by offering her an account on their fancy, standards-based and LA-enabled patient portal and a link to an independent patient-centric national registry called MedCommons. >>>	St. Mungos also uses the MedCommons account as a way of giving Jane an archival copy of her x-rays and radiology report that she might use any way that she wants at any point in the future. >>>	Dr. Primary helps Jane out by recommending the standards-based HealthFrame personal health record management software which is also linked to the independent MedCommons registry. >>>	Dr. Primary's office also helps Jane to create an Emergency CCR that meets AHIC breakthrough requirements for Registration and Medication Summary and can be posted for Emergency Access directly from her MedCommons account.
Pre-demo	Novell and Sun may or may not choose to show how a new account is created with their respective IDPs but this is beyond the scope of this clinical plotline.	[Novell] Jane opens account at HooYa as JaneDoe@HooYa.com		[Sun] Dr. Good opens account at DrAUTH as goodprovider99@drauth.org	
Pre-demo	When Dr. Good gets privileges at St. Mungos, she requests that her DrAuth account be used as single-sign-on (SSO) into St. Mungo's LA-enabled OpenEHR. Ping may choose to demonstrate this step.			[Ping] Requests use of DrAUTH ID as login to StMungos OpenEHR	
Encounter 1					
1-A	The registration includes Name, Address, eMail etc... and assigns Jane her St. Mungos Hospital ID 123-4567.	Moves to Newtown, breaks her arm, goes to StMungos for cast fills a Registration Form	StMungos has a Liberty-Enabled OpenEHR as their Registration System and Patient Portal	Jane is added to Dr. Good's <u>OpenEHR PATIENT LIST</u> - Jack - Jill - Jane	
1-B	Rather than use a new username and password, Jane asks St. Mungos to use her HooYa login to authorize access to their OpenEHR patient portal.	Requests use of her HooYa ID			
1-C	HooYa assigns 111 as Jane's pseudonym at St. Mungos.		Jane is 111@HooYa in OpenEHR		
1-D	This step assumes that OpenEHR has a CCR export command. Because this process is lengthy, we will probably use a CCR previously created in HealthFrame and containing the registration information and hide this step. JanuaryCCR is italicized in this memo because it's just a proxy for the CCR's standard unique identifier. In general, CCR's can be sorted and disambiguated by their mandatory Date - Time stamp.		St Mungos sends Jane's Registration Summary to MedCommons as a CCR we will refer to as <i>JanuaryCCR</i> .		
1-E	OpenEHR receives Jane's new (voluntary) MedCommons ID 0001 5467 2341 6544 as part of the Commons eXchange Protocol transaction and saves it for subsequent queries to MedCommons.		[MedCommons] On the basis of the federation agreement with St. Mungos, MedCommons automatically creates an account for Jane and notifies her by email.		

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1-F	When Dr. Good logs into the St. Mungos intranet and clicks OpenEHR he now sees Jane has (1) CCR at MedCommons. Clicking on the (1) shows Dr. Good a list of CCRs with one entry the we call <i>JanuaryCCR</i> . Clicking JanuaryCCR logs Dr. Good into MedCommons via SSO and displays Jane's registration info in Firefox.			OpenEHR PATIENT LIST - Jack - Jill - Jane (1) > <i>JanuaryCCR</i>	
1-G	Based on their federation agreement with St. Mungos, MedCommons extracts Jane's email from the JanuaryCCR Patient Actor and sends her an email that alerts her to her new MedCommons account with ID 0001 5467 2341 6544. The email reminds Jane of the St. Mungos Patient Portal and uses SSO with HooYa to check her account. If she clicks <i>JanuaryCCR</i> , she will be taken to MedCommons and see exactly what Dr. Good saw in the previous step.	Jane gets an email notification that an account has been created by StMungos and it has her MedCommons Account ID and one CCR labeled <i>JanuaryCCR</i> .	Jane logs into to check the StMungos Patient Portal using her HooYa SSO and sees: <u>OpenEHR PATIENT PORTAL</u> Jane Hernandez > <i>JanuaryCCR</i>		
Encounter 2					
2-A	Dr. Primary does not have a standards-based EHR or a patient portal. He prefers to sponsor a PHR for each of his patients and helps them to use it in his waiting room or at their home.	Picks Dr. Primary as her PCP			[HealthFrame] Dr. Primary gives Jane the HealthFrame PHR
2-B	Jane might have her MedCommons Account ID from St. Mungos or from the MedCommons email. She might also have a MedCommons Tracking Number and PIN.	Remembers that she has a CCR at MedCommons and decides to use it to seed her PHR.			
2-C	HealthFrame uses CXP to send Jane's MedCommons ID to MedCommons. A password challenge from MedCommons shows up and Jane elects to use HooYa as her SSO identity.	Enters her MedCommons ID and uses her HooYA ID to import <i>JanuaryCCR</i> into her HealthFrame.			
2-D	222 demonstrates LA pseudonymity. On top of this, Jane voluntarily uses her MedCommons Account ID to link St. Mungos to her MedCommons PHR account. This has much greater transparency than an MPI-based linkage because it assures Jane that she can track what information is shared about her as opposed to the credit-bureau-like probabilistic behavior of an MPI or the coercive aspects of a national health identifier.	Jane is 222@HooYa in MedCommons.			
2-E	This kind of email protects Jane by alerting her if the login to her MedCommons account is compromised.	Gets email Notification of Activity from MedCommons > <i>JanuaryCCR</i>			
2-F	The setting of the Emergency CCR is a MedCommons web service accessible via HealthFrame as a checkbox in the Export CCR function.				Dr. Primary prescribes Lipitor and helps Jane create her Emergency CCR with Registration and Medications in HealthFrame.
2-G	Currently, MedCommons makes the Emergency CCR accessible on the Web to anyone that enters a MedCommons Account ID. The patient is asked to verify that the Emergency CCR has only contact and health-critical information such as allergies or selected medications.	Gets email Notification of Activity from MedCommons > <i>JanuaryCCR</i> + > <i>FebruaryCCR</i>			

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Encounter 3					
3-A	The radiology report comes back to St. Mungo's is reviewed and deemed acceptable to share with the patient. If it had been positive, Jane would probably be contacted by Dr. Good personally prior to posting the result to the patient portal and to hre MedCommons archive.		Adds a Radiology Report to Jane's Patient Portal and sends an updated <i>MarchCCR</i> to her account.		
3-B	Please note that in this implementation, MedCommons does not share Jane's FebruaryCCR with the St. Mungo's staff because Jane has not requested that we do so and MedCommons does not disclose information without informed consent. Jane could send a copy of her FebruaryCCR to D. Good or, in a future version, could set a preference for the Emergency CCR to be sent to Dr. Good automatically whenever it changes.	Gets email Notification of Activity from MedCommons > <i>JanuaryCCR</i> + > <i>FebruaryCCR</i> > <i>MarchCCR</i>	Jane logs into St. Mungos: <u>OpenEHR PATIENT PORTAL</u> Jane Hernandez > <i>JanuaryCCR</i> > <i>MarchCCR</i>	<u>OpenEHR PATIENT LIST</u> - John - Jane (2) > <i>JanuaryCCR</i> > <i>MarchCCR</i>	

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Encounter 4					
4-A	Jane wants to add the X-ray and report to her PHR. HealthFrame does not handle FDA-registered diagnostic imaging and so it merely imports a link GUID to the <i>MarchCCR</i> that will always be displayed out of the FDA-registered MedCommons viewer.	Jane imports the MarchCCR into HealthFrame			
4-B	This is just MedCommons letting Jane know someone accessed her account.	Gets email Notification of Activity from MedCommons > <i>JanuaryCCR</i> + > <i>FebruaryCCR</i> > <i>MarchCCR</i>			
4-C	This is the first example of Jane actually using the MedCommons user interface directly to manipulate her account. Until now, all changes to her MedCommons account have been a result of CXP or Web services transactions with HealthFrame or OpenEHR applications.	Jane logs into her MedCommons account using her HooYa SSO: Jane forwards her <i>MarchCCR</i> with a comment as <i>AprilCCR</i> to Dr. Primary.			
4-D	Email Notification is a standard feature of MedCommons and does not assume that Dr. Primary has a CCR or CXP enabled EHR or any particular relationship with Jane. If Dr. Primary wants to read the report and see the x-rays, he will need to contact Jane for the PIN associated with <i>AprilCCR</i> .				Dr. Primary gets a MedCommons Notification email and saves it along with Jane's other emails.
4-E	<i>AprilCCR</i> has a new timw stamp and Jane's "signature" but it references the <i>MarchCCR</i> which is left unmodified so that it retains full legal validity under the original radiologist's signature.	Gets email Notification of Activity from MedCommons > <i>JanuaryCCR</i> + > <i>FebruaryCCR</i> > <i>MarchCCR</i> > <i>AprilCCR</i>			
Encounter 5					
5-A	Some CCRs are used to reflect a patient's PHR. In this example, <i>FebruaryCCR</i> has everything in the <i>JanuaryCCR</i> and more so Jane has no reason to keep it around. It's as if <i>JanuaryCCR</i> were "wrong" or obsolete as a PHR. Prior to deletion, Jane can use the MedCommons Viewer Get CCR command to download <i>JanuaryCCR</i> to a CD or flash memory stick if she wants to keep an offline copy for legal or sentimental reasons.	Jane logs into her MedCommons account using her HooYa SSO: Deletes <i>JanuaryCCR</i> because it's irrelevant.	<u>OpenEHR PATIENT PORTAL</u> Jane Hernandez > <i>MarchCCR</i>	<u>OpenEHR PATIENT LIST</u> - Fred - Jane (1) > <i>MarchCCR</i>	