

# Northern Indiana, Ann Arbor Workflow

The following describes the complete workflow between a referring and consulting site. We use Northern Indiana and Ann Arbor as example sites.

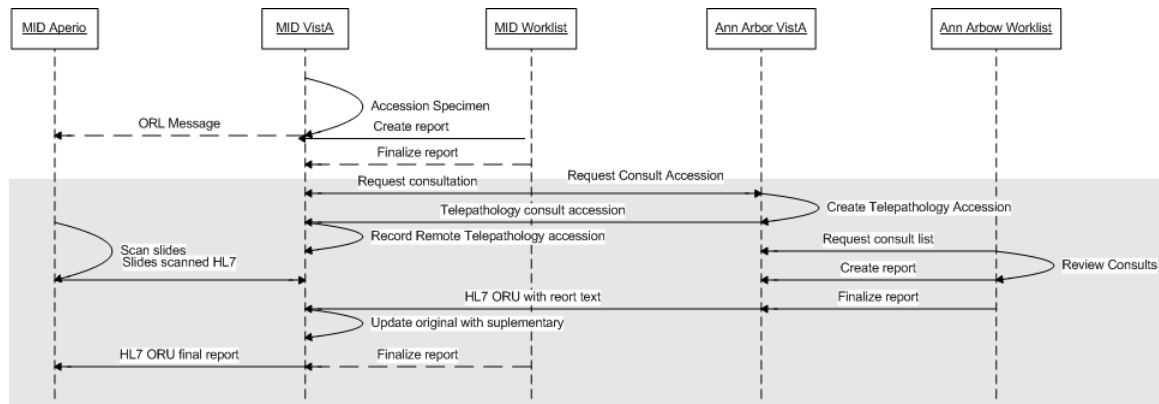


Figure 1 Sequence of Consultation Events

## Assumptions:

1. All cases in MID are accessioned for local examinations
2. Only a percentage of cases will require remote review (i.e. consult, QA, tumor board etc.)
3. The report for all cases has to be available to local providers
4. Patients are already registered at the consulting site, process is needed to deal with unregistered patients

## Sequence of Events

As illustrated by Figure 1 once the referring pathologist requests a consultation, an accession is created in the Telepathology accession area at each site where the referring pathologist requested a consultation. These accessions are recorded in the referring site's VistA system and become associated with the original accession.

Optionally an ORL (Lab Order) message is sent to the acquisition system (Aperio in this example) upon the creation of the accessions from referring site's VistA. This allows any accession become a target for a consult request any time.

The acquisition system creates all necessary database constructs, to acquire scanned slices and associate them with the telepathology accession. The acquisition system informs the acquisition site VistA with HL7 message(s) that slides are acquired. The HL7 message(s) contains information identifying the patient and the accession and the images scanned for the slides.

The consultant, through the worklist application, reviews the scanned slides. Since the original accession and the telepathology accessions at the consulting sites are associated and tracked at the referral site, worklist application provides the original accession to the Aperio Viewer to open the images. The consultant reviews the images, produces and finalizes the report for the telepathology accession at the consulting site. This action triggers an HL7 ORU message with an OBX segment containing the finalized report to be sent to the referral site VistA. Upon receipt the report text is filed to the original accession as a supplementary report.