

Telemedicine Conference

**Improving Daily Medical Practice through Technology**

Moevenpick Hotel, Ramallah, 11 November 2014

Report





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## 1. Introduction

The Telemedicine Network was established in 2009 by the Palestinian Ministry of Health (MoH) in cooperation with the Open Regional Fund (ORF) of the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) on behalf of the Federal Ministry for Economic Cooperation and Development (BMZ). The aim of the network is to connect highly-qualified physicians to be able to exchange second opinion consultations through a free, accessible, and user-friendly online application. The ratio of specialised physicians to patients in the Palestinian Territories is alarming, and many patients are transferred to other hospitals to receive treatment. The unstable political situation in the Palestinian Territories restricts movement of individuals, patients or physicians. Public hospitals suffer from limited resources, and the need of well-developed medical infrastructure still prevails strongly. In most cases, treatment is delayed: Local or regional referrals request a long process that starts with applying for special travel permits and culminates in the transfer of patients' files, which can be very complicated and often leads to the loss of patients' data. The Telemedicine Network's objective is to facilitate this process in a fast and cost-effective way.



The MoH and GIZ have held a series of three conferences on telemedicine as an initiative to expand the Telemedicine Network, and to prioritise telemedicine on the public health agenda at the national and the regional level. The goal is to strengthen cross-border cooperation in the medical field to ultimately achieve higher quality health care. In November 2013, the first conference titled "Telemedicine: A New Approach to Comprehensive Health Care" was held in Ramallah to discuss the challenges that the Telemedicine Network faces. The second conference titled "Telemedicine: Strengthening Medical Regional Cooperation in the Middle East" was held in May 2014 at the Marriott



Hotel in Amman. The objective of the event was to bring together Palestinian and Jordanian physicians to further expand the network and emphasise the importance of cross-border cooperation for enhanced health care systems. International guest speakers shared their extensive experience with telemedicine in Germany and the U.K. and showcased the best practices that ought to be adopted in the Middle East. The third conference

titled: "Improving Daily Medical Practice through Technology" was held on 11 November 2014 at the Moevenpick Hotel in Ramallah. The event focused on how telemedicine ought to be part of physicians' daily practice and how it should be viewed as an application which improves rather than hinders access to healthcare. In addition to integrating telemedicine in daily medical practice, three other aspects of the telemedicine network were discussed by local and international experts. First, the significance of integrating telemedicine in medical training especially for medical residents was introduced. Second, the benefits of using telemedicine in pre-screening, treatment, and follow-up procedures with international experts who live outside of Palestine was showcased especially through partnering with committed organisations



such as the *Palestine Children's Relief Fund* and *Telemedicine Without Borders*. Finally, the future of the telemedicine network was discussed.

The event convened more than 80 participants working as Ministry of Health officials, hospital administrators, physicians, users of the telemedicine application, and IT specialists. Most Palestinian hospitals, clinics, NGOs, UN agency, and universities were represented: Palestine Medical Complex in Ramallah, Dunya Women's Cancer Clinic in Ramallah, Rafidiyah Hospital in Nablus, Hebron Governmental Hospital, Beit Jala Hospital, Al Ahli Hospital in Hebron, Specialized Arab Hospital in Nablus, An-Najah University in Nablus, Al Quds School of Medicine, IMET 2000, IntraHealth International, Juzoor for Health and Social Development, United Palestinian Appeal, Palestine Medical Relief Services, Ibn Sina College, UNRWA, and both Augusta Victoria Hospital and Al Maqassed Hospital in East Jerusalem.

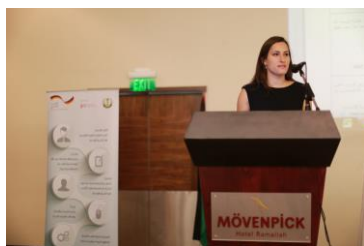
## 2. Opening: Improving Daily Medical Practice through Technology



The Director General of Hospitals at the Palestinian Ministry of Health, Dr. Mohammad Abu Ghali, delivered the opening remarks by first welcoming attendees and emphasising the commitment of the MoH in ensuring the adoption of telemedicine in the Palestinian Territories. Dr. Abu Ghali thanked GIZ for the telemedicine initiative and emphasised the importance of prioritising telemedicine in the agenda of the MoH. Dr. Abu Ghali is one of the

Steering Committee members of the Telemedicine Network and has been involved in expanding the network to include more physicians. Dr. Abu Ghali has also made an effort to connect the telemedicine network with other technological initiatives in the Palestinian Territories such as the Health Information System and the online resource centers which are currently being launched. Dr. Abu Ghali encouraged doctors to use the telemedicine application to enhance the healthcare system in Palestine. He wished participants a successful conference and that the telemedicine application users will come up with recommendations on how to continue with the telemedicine system.

Ms. Nora-Elise Beck, the Open Regional Fund Programme Advisor, discussed the objectives of the conference and gave a brief overview on the status of the telemedicine project. Ms Beck started by welcoming the participants and the Steering Committee



members for their commitment to the development of the telemedicine network. The Steering Committee continues to be the main decision-making body of the telemedicine network and will also be responsible for the sustainability of the telemedicine network once GIZ's involvement finishes in March 2015. Ms. Beck shared the achievements from the past six months which include the installation of gateways, which are servers that expedite

the upload of medical images, training of the MoH IT staff on using the gateways, and including UNRWA in the project. Specialists who visit all UNRWA clinics in the West Bank can review and follow up on cases without traveling to all locations. Additionally, among the achievements are the inclusion of visiting physicians from missions organised by the *Palestine Children's Relief Fund*, who are willing to help physicians from the Palestinian Territories in diagnosing and treating patients. The website of the



telemedicine application was transferred to a new domain ([www.telemed-palglobal.org](http://www.telemed-palglobal.org)) as decided on by the Steering Committee to be more inclusive of foreign doctors. The development of the new website was done in cooperation with the MoH. The storage units which were initially purchased from Germany were replaced by local storage units from the Palestinian Territories to ensure that the MoH is well equipped to handle the administration of the network in the future.

### 3. Integrating Telemedicine in Medical Education and Training



Dr. Amal Abu Awad, Dean of Ibn Sina College and Acting General Director of Continuing and Higher Health Education at the MoH, delivered spoke about "The Role of Telehealth in Continuous Professional Development for Health Professionals in Palestine." Dr. Abu Awad is one of the proponents of including an educational component in the telemedicine network. She recommended adding a subscription to online courses with the British Medical Journal. Throughout her presentation, Dr. Abu Awad first described the difference between telemedicine and telehealth, and recognised the realities of distance and online learning. Dr. Abu Awad also gave a brief overview on the quality requirements of open-online and distance learning (ODL), and on building the foundation for ODL activities for health providers at the MoH. According to Dr. Abu Awad, telemedicine and telehealth should facilitate clinical care, teaching, research, and public services. Continuous medical education comes in various forms: live events, written publications, online courses, videos, and social media; therefore, any technological solution can integrate continuous medical education initiatives. Moving toward online courses and distance learning can overcome the geographical and financial barriers which have hindered many professionals from advancing their careers. Dr. Abu Awad gave some examples of the use of online learning, like in the case of training perioperative nurses in rural settings in the U.S.

Furthermore, Dr. Abu Awad stipulated that the MoH is taking some steps toward integrating ODL in their systems. As part of this mission, online resource centers have been established in MoH hospitals. Web portals for continuous professional development have been integrated with the MoH website through the moodle system. Additionally, MoH health professionals are being trained on designing online courses. To ensure the effectiveness of these courses, Dr. Awad recommended evaluating the online resource centers, and accrediting all offered online courses by a national accrediting body.





#### 4. Telemedicine in the Palestinian Territories

The second session featured one of the most active users of the telemedicine application. Dr. Areej Khatib, the Head of the Pathology Department and Laboratory Medicine at Augusta Victoria Hospital in East Jerusalem, explained the benefits of using telemedicine from her personal experience with the application. Dr. Khatib's speech



titled: "Tele-pathology, Our Experience," shed light on the different systems of telepathology systems: static image systems, real-time systems and virtual systems, as well as virtual slide systems. Dr. Khatib confirmed the fact that every specialist needs to consult and gave statistics from hospitals around the world and the frequency with which physicians consult with each other. Due to the existence of hundreds of sub-specialties in medicine, it is almost

impossible to always know the exact diagnosis of all cases. Consulting with others in the same field but with a different sub-specialty can save lives. Dr. Khatib gave examples of publications, congresses, and books which advocate for the use of telepathology. She strongly believes that telemedicine should be an integral part of the daily practice of all pathologists. Dr. Khatib supported her argument using statistics which confirm the low number of pathologists in the Palestinian Territories in relation to other countries in the world. In terms of legal issues related to misdiagnoses, Dr. Khatib assures doctors that it is their responsibility to either accept or reject the response of a consultation. The doctor ultimately treating the patient bears the burden of diagnosis even if the responding consultant was mistaken.

Additionally, Dr. Khatib stated that she wanted to start using telemedicine a few years ago but that a several factors delayed her and other pathologists. First of all, 90% of Pathology facilities in the Palestinian Territories use conventional pathology, and nowadays pathology is much more complex as it requires immuno-histology and molecular pathology. Secondly, most Palestinian pathologists are generalists, and subspecialties are not so common. Thirdly, although the relation with Arab and International pathologists is great, the fear of rejection to "no fees" and "limited time" persists. Dr. Khatib acknowledges these fears but stated that she decided to overcome this fear about three months ago when she started consulting with physicians from the U.S. Dr. Khatib showcased the telemedicine application to all the participants and encouraged the doctors to use the application. She assured all participants that they will be able to find physicians who are willing to dedicating their time and expertise to helping them. Even if the doctors in her immediate circle are not able to help, they usually circulate the difficult cases to other doctors from their networks until an answer is found. Dr. Khatib was able to start the treatment for a difficult case after receiving the correct diagnosis from her contacts in the U.S. She expressed that she is extremely happy to use the telemedicine application and believes that it will continue to help her in diagnosing and treating patients in the Palestinian Territories.

Afterwards, Mr. Shadi Albarqouni joined the conversation on telemedicine via Skype. Mr. Albarqouni is PhD Candidate and a Graduate Research Assistant for the Chair for Computer Aided Medical Procedure at the Technical University in Munich-Germany. His speech was titled:





"Telemedicine in the Palestinian Territories: Challenges and Prospects." Mr. Albarqouni gave a brief overview on the services offered by telemedicine and explained the way it all works. The benefits of using telemedicine in improving access, cost-effectiveness, quality, and patients' demand were outlined. The reality of the Palestinian Territories with the imposed checkpoints and lack of medical supplies and specialists strengthens the case of using telemedicine. Mr. Albarqouni proved the success of telemedicine by showcasing some pilot projects and success stories in the Palestinian Territories:

1. The Italian Project aimed at developing and provisioning telemedicine and e-learning services to eight clinical sites in the Palestinian Territories for Ophthalmology surgery consultations to San Rafael Hospital in Italy.
2. The Norwegian Project aimed at establishing a telemedicine rehabilitation network in the Palestinian Territories which links the four rehabilitation centres to each other and to relevant rehabilitation expertise abroad.
3. The Bethlehem Alliance attempted to benefit from the already existing EUMEDConnect network in Europe.
4. Steps Toward Establishing a Telemedicine Center in the Palestinian Territories is a project idea which was developed by Mr. Albarqouni during his time at the MoH in Gaza intended to prepare the IT infrastructure through connecting Medical equipment to a private network and developing a platform supported by the Patient's Electronic Health Record.

The challenges that the aforementioned projects faced were common: administrative engagement, physician engagement, lack of adequate infrastructure, and sustainability.

The current telemedicine network can be improved by ensuring that all practices align with the legal privacy and security guidelines as outlined by the American Telemedicine Association.

## **5. Recommendations on Sustaining Telemedicine in Palestine**

During this session, participants were divided into four groups to test the telemedicine application and to formulate their ideas on optimising the telemedicine software. The groups were also asked to discuss the important topics that should be presented and decided on by the Steering Committee.



Some of the doctors agreed that using telemedicine does not automatically mean that a doctor is unable to diagnose; it should rather be viewed as a tool that improves diagnosis. While trying the system, physicians had the opportunity to network with each other. Each group then had the chance to present its ideas to the rest of the participants. The challenges that the physicians face when using the telemedicine application are:



*Technical challenges:*

1. Poor internet connection at the hospitals.
2. Having an insufficient number of available computers.
3. Not having the option to upload a group of images at once (has already been solved).
4. Restriction to only some file extensions (for instance, videos cannot be uploaded).
5. The e-mail notification automatically goes to the spam file, unless the CHILI domain is modified to be a trusted source on every computer. We can inform them easily.



*Structural challenges:*

6. Lack of support from hospital administrators.
7. Lack of 24/7 technical support at each hospital since glitches may arise at any moment.
8. Absence of financial incentives for using telemedicine for consultations.
9. Lack of clear legal and ethical guidelines on using telemedicine.
10. Absence of a list of consultants including their biographies and qualifications.
11. Not having a telemedicine focal point in each hospital. This can be easily solved.

In terms of issues that the Steering Committee should either follow up or decide on, the points below were mentioned:

*Technical issues:*

1. JAVA, computer software, is needed for the telemedicine network; physicians should be reminded to update the JAVA on their computer prior to using telemedicine. Additionally, lowering the security settings of the computer will not require updating JAVA frequently.
2. MoH should check the internet connection at all governmental hospitals to ensure that internet access is not one of the obstacles to telemedicine.
3. Integrate telemedicine with the HIS at the MoH, and include the referral hospitals of East Jerusalem.
4. Include real-time consultations (synchronous method) in the system, and a mobile application.

*Legal issues:*

5. Having a patient consent form whenever a case is being sent for consultation via telemedicine. SC members suggested that this issue is addressed by the Legal Advisor.
6. Determine guidelines and criteria for paid consultations.
7. Determine legal consequences of consulting via telemedicine.

*Sustainability issues:*

8. Adding health professionals other than physicians to the network, such as nurses.
9. Clarify whether or not the telemedicine system will remain open to the public or not.





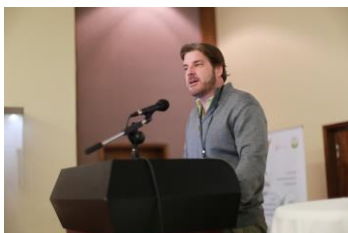
10. Strengthen the advocacy initiatives in favour of telemedicine.
11. Include PalMED in the system.
12. Allow physicians to use some of their working time for consulting via telemedicine.
13. Include telemedicine in residency programmes and in medical school curricula especially for 5<sup>th</sup> and 6<sup>th</sup> year students.



The points raised during this session will be brought forth to the Steering Committee in the upcoming meeting.

## 6. Connecting with International Experts

Telemedicine can be used to connect physicians in the Palestinian Territories with international medical consultants, predominantly in specialisations where there is a shortage in Palestinian expertise. Through the work of the *Palestine Children's Relief Fund* and *Telemedicine Without Borders*, physicians from around the world travel to the Palestinian Territories on medical missions. The pre-screening and follow-up can be done easily through the telemedicine application. International experts joined us in the conference to describe their vision for using telemedicine for the benefit of Palestinian physicians and patients.



The first presentation was delivered by Dr. Boris Schmitt who has been a consultant for the telemedicine project since its beginning. Dr. Schmitt is a consultant in Pediatric Cardiology at the German Heart Institute in Berlin. Dr. Schmitt's presentation titled "Perspectives in Telemedicine," focused on the numerous ways telemedicine can be used. In addition to its function as a tool for second opinion consultations, it can be a useful tool for continuous medical education as pointed out in earlier sessions. Dr. Schmitt believes that all hospitals in the Palestinian Territories should be connected via telemedicine. In terms of reimbursement policies, Dr. Schmitt recommended checking publications by the center of telemedicine law.

Mr. Steve Sosebee, the CEO of the *Palestine Children's Relief Fund (PCRF)*, discussed how telemedicine can support the healing of children with cancer in the Palestinian Territories. He presented the work of the PCRF and its focus on bringing volunteer doctors from abroad to treat Palestinians. Additionally, the services provided are medical training, pain management, in and out-patient treatment, tutoring of children with cancer to compensate for missed school days, book reading, and playrooms. Mr. Sosebee also talked about the Huda Al Masri Pediatric Cancer Department at Beit Jala Hospital which was established in 2013 with funds raised through PCRF. It is currently the only state of the art pediatric public cancer department in the Palestinian Territories. A twin cancer department will be built in Gaza as well. Telemedicine can support the cancer departments since it can be used for the follow-up and treatment of patients. The asynchronous interaction, store-and-forward technique can be used in the pediatric oncology department to interact with other paediatrics. The synchronised method can be added for weekly online meetings with different partners, and can be used to discuss difficult cases in teams.



Telemedicine and telehealth have gained more traction in European health care systems in the past few years, and there are numerous associations working towards institutionalising the practice the telemedicine in all hospitals across Europe. Mr. Marc



Lange, the Secretary General of the European Health Telematics Association (EHTEL), presented the success factors for deploying technological advances in health care in his talk titled: "Scaling up in Health Care, an Impossible Dream?" Mr. Lange has 15 years of experience with Telehealth in Europe. EHTEL is a forum for all actors and

stakeholders working in the field of e-health. There are more than 60 members in the forum; representatives from the industry, ministries, health professionals, health workers, and social care people are among the members.

The vision of EHTEL is to have an impact on the health care system and to answer the demand for quality and accessible care. The challenge of introducing new technological advances is that whenever these innovations are added to an old system, it does not automatically make the service more efficient and accessible. Different tools and methods are needed to accompany the introduction of such technology, such as new business models, impact assessment framework, cost and benefit analysis, and guidelines for large-scale deployment. EHTEL members have worked on the success factors that enable telemedicine deployment which include having the cultural readiness, strong leadership, privacy awareness, stakeholder involvement, user-friendliness, as well as IT and e-health infrastructure.

The final presentation was given by Dr. Khaldoun Al-Moosawi, who is an ER physician and the Executive Director of *Telemedicine Without Borders in the U.S.* Dr. Al-Moosawi introduced the work of *Telemedicine Without Borders*, and its mission to improve the health of underserved people, especially struck by disasters. Dr. Al-Moosawi said that there is a plan to set up missions to the Middle East in the near future. They are interested in partnering up with the Telemedicine Network in the Palestinian Territories to facilitate future medical missions. Additionally, *Telemedicine Without Borders* signed a Memorandum of Understanding (MoU) with GIZ stating their willingness to recruit some volunteer doctors in the system that would respond to consultations from Palestinian doctors.



## 7. Conclusion

The third telemedicine conference "Improving Daily Medical Practice through Technology" was a success with a high participation number. The conference shed light on new dimensions and functions which can be integrated in the current telemedicine network. The conference aimed at promoting the telemedicine project and learning from different local and international initiatives in e-health. The conference featured new partners in the project, such as the PCRf and Telemedicine without Borders. Medical students from Al Quds School of Medicine participated in the conference to get more familiar with the system, and they will potentially be included in the telemedicine





network soon. The event was covered in several Palestinian media outlets such as Al Quds Newspaper, Raya, Ma'an News, Al Hayat, Wattan, Al Watan Voice, and the Palestine News Network.

The conference focused on widening the scope of telemedicine in terms of using it as a tool for pre-screening and follow-up on patients, especially with medical missions. Medical education can be a part of telemedicine since teams of doctors can learn from each other especially when dealing with difficult cases.

The best case practice of using telemedicine was showcased in the conference as Dr. Khatib described her experience of using the application to consult with various pathologists from the U.S. and how it helped her diagnose a patient. The recommendations and feedback shared during the conference will be discussed by the Steering Committee on the 8<sup>th</sup> of December and in upcoming meetings. As deduced from the presentations of the conference, the challenges that doctors face with using telemedicine persist even in more advanced health care systems such as those in Europe. It is only through experience and willingness to change that the telemedicine network will thrive. The next few months will be focused on handing over the telemedicine network to the MoH to ensure its sustainability and expansion.



Telemedicine Conference  
Improving Daily Medical Practice through Technology  
Ramallah, 11 November 2014

**giz** Deutsche Gesellschaft  
für Internationale  
Zusammenarbeit (GIZ) GmbH

## ANNEXES



Annex A: Agenda

## Agenda

| Tuesday, 11 November 2014 |  |
|---------------------------|--|
| 09:30-10:00               | <b>Registration</b>  |
| 10:00-10:30               | <p><b>Opening: Improving Daily Medical Practice through Technology</b><br/>Welcoming remarks followed by a clarification of the conference objectives. The integration of telemedicine in daily medical practice will be discussed. Additionally, including telemedicine in medical training and residency programmes will be emphasised as a step towards sustainability.</p> <p><b>Sustainability of the Telemedicine Network</b><br/><i>Mohammad Abu Ghali, MD, Director General of Hospitals, Ministry of Health, Palestinian Territories</i></p> <p><b>The Future of Telemedicine beyond the Open Regional Fund</b><br/><i>Nora-Elise Beck, Programme Advisor, Open Regional Fund, GIZ</i></p>  |
| 10:30-11:00               | <p><b>Integrating Telemedicine in Medical Education and Training</b><br/>Fostering the cultural readiness towards telemedicine is crucial for the sustainability of the network. Integrating telemedicine in formal medical training and residency programmes will contribute to the sustainability of the network. Professionals from academia will present the different methods of connecting telemedicine with continuous medical education.</p> <p><i>Amal Abu Awad, BSN, MSN, PhD, Dean of Ibn Sina College and Acting General Director of Continuing and Higher Health Education, Ministry of Health, Palestine</i></p>   |
| 11:00-11:30               | <i>Networking</i>  |
| 11:30-12:25               | <p><b>Telemedicine in the Palestinian Territories</b><br/>Telemedicine initiatives stemmed in the Palestinian Territories between hospitals in the West Bank and Gaza Strip in the past. The unique challenges and lessons learned from deploying telemedicine in the Palestinian Territories will be presented and the new experience along with the recommendations on sustaining the telemedicine network will be showcased.</p> <p><b>Palestinian New Experience with International Pathology Consultation</b><br/><i>Areej Khatib, MD, Head of the Pathology Department and Laboratory Medicine at Augusta Victoria Hospital, East Jerusalem</i></p> <p><b>Challenges and Prospects of using Telemedicine in the Palestinian Territories</b><br/><i>Shadi Albarqouni, PhD Candidate, Graduate Research Assistant for the Chair for Computer Aided Medical Procedure, Technical University Munich, Germany</i></p> |
| 12:25-12:30               | <b>Group Photo</b>   |
| 12:30-13:30               | <i>Lunch break</i>   |
| 13:30-15:00               | <p><b>Recommendations on Sustaining Telemedicine in the Palestinian Territories</b><br/>Participants will break into four groups to test the telemedicine application. Each group will formulate their recommendations on optimising the telemedicine software. The important topics which should be brought forward to the Steering Committee will be discussed. The groups will then present their ideas to the rest of the audience.</p>  |





|             |   |
|-------------|---|
| 15:00-16:15 | <p><b>Connecting with International Experts</b><br/>In this session, the experience with implementing telemedicine in Europe will be shared along with the success factors for its sustainability. Furthermore, it will be presented how telemedicine can be used to connect physicians in the Palestinian Territories with international medical consultants, predominantly in specialisations where there is a shortage in Palestinian expertise. Through the Palestine Children's Relief Fund and Telemedicine Without Borders, physicians from around the world travel to the Palestinian Territories on medical missions. The pre-screening and follow-up can be done easily through the telemedicine application.</p> <p><b>Using Telemedicine in Healing Children with Cancer in the Palestinian Territories</b><br/><i>Steve Sosebee, CEO, Palestine Children's Relief Fund, Palestine</i></p> <p><b>Perspectives in Telemedicine</b><br/><i>Boris Schmitt, MD, Consultant in Pediatric Cardiology, German Heart Institute, Germany</i></p> <p><b>The Secrets of Telehealth: Critical Success Factors for Deploying Telemedicine</b><br/><i>Marc Lange, Secretary General, European Health Telematics Association, Belgium</i></p> <p><b>Telemedicine and Volunteering</b><br/><i>Khaldoun Al-Moosawi, MD, ER Physician in rural hospitals and Executive Director of Telemedicine Without Borders, U.S.</i></p> |
| 16:15-16:45 | <i>Networking</i>   |
| 16:45-17:00 | <p><b>Closing Remarks</b><br/>Final recap of the recommendations from physicians and the future of the Telemedicine Network.</p> <p><b>Leadership behind the Telemedicine Network</b><br/><i>Ali Helou, Director General of Computer and Engineering Unit, Ministry of Health, Palestine</i></p>  |
| 17:00-17:30 | <i>Farewell Reception</i>   |



## Annex B: Media Coverage

### 1. Al Quds Newspaper



### 2. Ma'an News Agency



#### التعاون الألماني تعقد والصحة مؤتمرا لتحسين الممارسة الطبية اليومية

نشر الأربعاء 2014/11/12 الساعة 17:35

رام الله- معا- عقدت مؤسسة التعاون الألماني للتنمية الدولية (GIZ) بالشراكة مع وزارة الصحة الفلسطينية ضمن مشروع الطب الاتصالي، يوم الثلاثاء الموافق 11 تشرين الثاني 2014 مؤتمراً في فندق الموفنيك في رام الله تحت عنوان "تحسين الممارسة الطبية اليومية من خلال التكنولوجيا". وقد تم افتتاح المؤتمر بكلمة الدكتور محمد أبو غالي، مدير عام الإدارة للمستشفيات في وزارة الصحة الفلسطينية تلتها كلمة مستشارة المشروع من (GIZ) نورا اليزا بيك.



وقد حضر المؤتمر حوالي 85 شخصية منهم أطباء من وزارة الصحة وممثلين عن المنظمات الغير حكومية والمستشفيات الخاصة من مختلف أنحاء الوطن (نابلس والخليل وبيت جالا ورام الله والقدس).

وتم عرض 7 أبحاث عن مواضيع متعددة أهمها دمج الطب الاتصالي في التعليم والتدريب الطبي، والتجربة الفلسطينية، والاستشارات الدولية، و أسرار الرعاية الصحية الاتصالية.

ومن الملفت ذكره عرض تجربة خاصة للدكتورة أريج الخطيب رئيسة قسم علم الأمراض والطب المخبري في مستشفى المطلع، والتي تمكنت من انقاذ حياة شخص فلسطيني الجنسية في 51 من عمره، من خلال استخدامها لبرنامج الطب الاتصالي، حيث تمكنت من استشارة أطباء في الولايات المتحدة في التأكيد على تشخيص حالة مستعصية مصابة بمرض من نوع محدد جداً للسرطان.

Link: <http://www.maannnews.net/arb/ViewDetails.aspx?ID=739578&MARK=giz>

### 3. AlHayat Agency



**التعاون الألماني تعقد مؤتمراً لتحسين الممارسة الطبية اليومية من خلال التكنولوجيا**  
الحياة برس – حذيفة جلامنة – عقدت مؤسسة التعاون الألماني للتنمية الدولية (GIZ) بالشراكة مع وزارة الصحة الفلسطينية ضمن مشروع الطب الاتصالي، مؤتمراً في فندق الموفنبيك في رام الله تحت عنوان “تحسين الممارسة الطبية اليومية من خلال التكنولوجيا وقد تم افتتاح المؤتمر بكلمة الدكتور محمد أبو غالي، مدير عام الادارة للمستشفيات في وزارة الصحة الفلسطينية تلتها كلمة مستشارة المشروع من (GIZ) نورا اليزا بيبك.  
وقد حضر المؤتمر حوالي 85 شخصية منهم أطباء من وزارة الصحة وممثلين عن المنظمات الغير حكومية والمستشفيات الخاصة من مختلف أنحاء الوطن (نابلس والخليل وبيت جالا ورام الله والقدس).  
وتم عرض 7 أبحاث عن مواضيع متعددة أهمها دمج الطب الاتصالي في التعليم والتدريب الطبي، والتجربة الفلسطينية، والاستشارات الدولية، و أسرار الرعاية الصحية الاتصالية.  
كما عرضت تجربة فريدة خاصة بالدكتورة أريج الخطيب رئيسة قسم علم الأمراض والطب المخبري في مستشفى المطلع، والتي تمكنت من انقاذ حياة شخص فلسطيني الجنسية في 51 من عمره، من خلال استخدامها لبرنامج الطب الاتصالي، حيث تمكنت من استشارة أطباء في الولايات المتحدة في التأكيد على تشخيص حالة مستعصية مصابة بمرض من نوع محدد جداً للسرطان.  
جدير بالذكر أن شبكة الطب الاتصالي تأسست في العام 2009 من قبل وزارة الصحة الفلسطينية بالتعاون مع (GIZ) نيابة عن الوزارة الاتحادية للتعاون والتنمية الاقتصادية. وهدفت الشبكة إلى ربط الأطباء المؤهلين ليتمكنوا من تبادل الاستشارات الطبية من خلال تطبيق مجاني سهل الاستعمال ويمكن الوصول إليه عن طريق شبكة الإنترنت. ذلك أن نسبة الأطباء المختصين في الأراضي الفلسطينية تنذر بالخطر، حيث يتم نقل العديد من المرضى إلى مستشفيات أخرى لتلقي العلاج. كما أن الوضع السياسي غير المستقر في الأراضي الفلسطينية يقيد حركة الأفراد والمرضى والأطباء.

Link: <http://www.alhayatp.net/?p=44859>



#### 4. Raya News Agency



**التعاون الألماني تعقد مؤتمراً لتحسين الممارسة الطبية اليومية من خلال التكنولوجيا**  
رام الله - راية:

عقدت مؤسسة التعاون الألماني للتنمية الدولية (GIZ) بالشراكة مع وزارة الصحة الفلسطينية ضمن مشروع الطب الاتصالي، مؤتمراً في فندق الموفنيك في رام الله تحت عنوان "تحسين الممارسة الطبية اليومية من خلال التكنولوجيا".

وقد تم افتتاح المؤتمر بكلمة الدكتور محمد أبو غالي، مدير عام الإدارة للمستشفيات في وزارة الصحة الفلسطينية تلتها كلمة مستشارة المشروع من (GIZ) نورا اليزا بيك.

وقد حضر المؤتمر حوالي 85 شخصية منهم أطباء من وزارة الصحة وممثلين عن المنظمات الغير حكومية والمستشفيات الخاصة من مختلف أنحاء الوطن (نابلس والخليل وبيت جالا ورام الله والقدس).

وتم عرض 7 أبحاث عن مواضيع متعددة أهمها دمج الطب الاتصالي في التعليم والتدريب الطبي، والتجربة الفلسطينية، والاستشارات الدولية، و أسرار الرعاية الصحية الاتصالية.

كما عرضت تجربة فريدة خاصة بالدكتورة أريج الخطيب رئيسة قسم علم الأمراض والطب المخبري في مستشفى المطلاع، والتي تمكنت من انقاذ حياة شخص فلسطيني الجنسية في 51 من عمره، من خلال استخدامها لبرنامج الطب الاتصالي، حيث تمكنت من استشارة أطباء في الولايات المتحدة في التأكيد على تشخيص حالة مستعصية مصابة بمرض من نوع محدد جداً للسرطان.

جدير بالذكر أن شبكة الطب الاتصالي تأسست في العام 2009 من قبل وزارة الصحة الفلسطينية بالتعاون مع (GIZ) نيابة عن الوزارة الاتحادية للتعاون والتنمية الاقتصادية. وهدفت الشبكة إلى ربط الأطباء المؤهلين ليتمكنوا من تبادل الاستشارات الطبية من خلال تطبيق مجاني سهل الاستعمال ويمكن الوصول إليه عن طريق شبكة الإنترنت. ذلك أن نسبة الأطباء المختصين في الأراضي الفلسطينية تنذر بالخطر، حيث يتم نقل العديد من المرضى إلى مستشفيات أخرى لتلقي العلاج. كما أن الوضع السياسي غير المستقر في الأراضي الفلسطينية يقيد حركة الأفراد والمرضى والأطباء.

Link: <http://www.raya.ps/ar/news/878569.html>



## 5. Palestine News Network



رام الله/PNN عقدت مؤسسة التعاون الألماني للتنمية الدولية (GIZ) بالشراكة مع وزارة الصحة الفلسطينية ضمن مشروع الطب الاتصالي، مؤتمراً في فندق الموفنبيك في رام الله تحت عنوان "تحسين الممارسة الطبية اليومية من خلال التكنولوجيا"

وقد تم افتتاح المؤتمر بكلمة الدكتور محمد أبو غالي، مدير عام الإدارة للمستشفيات في وزارة الصحة الفلسطينية تلتها كلمة مستشارة المشروع من (GIZ) نورا اليزا بيك.

وقد حضر المؤتمر حوالي 85 شخصية منهم أطباء من وزارة الصحة وممثلين عن المنظمات الغير حكومية والمستشفيات الخاصة من مختلف أنحاء الوطن (نابلس والخليل وبيت جالا ورام الله والقدس).

وتم عرض 7 أبحاث عن مواضيع متعددة أهمها دمج الطب الاتصالي في التعليم والتدريب الطبي، والتجربة الفلسطينية، والاستشارات الدولية، و أسرار الرعاية الصحية الاتصالية.

كما عرضت تجربة فريدة خاصة بالدكتورة أريج الخطيب رئيسة قسم علم الأمراض والطب المخبري في مستشفى المطلع، والتي تمكنت من انقاذ حياة شخص فلسطيني الجنسية في 51 من عمره، من خلال استخدامها لبرنامج الطب الاتصالي، حيث تمكنت من استشارة أطباء في الولايات المتحدة في التأكيد على تشخيص حالة مستعصية مصابة بمرض من نوع محدد جداً للسرطان.

جدير بالذكر أن شبكة الطب الاتصالي تأسست في العام 2009 من قبل وزارة الصحة الفلسطينية بالتعاون مع (GIZ) نيابة عن الوزارة الاتحادية للتعاون والتنمية الاقتصادية. وهدفت الشبكة إلى ربط الأطباء المؤهلين ليتمكنوا من تبادل الاستشارات الطبية من خلال تطبيق مجاني سهل الاستعمال ويمكن الوصول إليه عن طريق شبكة الإنترنت. ذلك أن نسبة الأطباء المختصين في الأراضي الفلسطينية تنذر بالخطر، حيث يتم نقل العديد من المرضى إلى مستشفيات أخرى لتلقي العلاج. كما أن الوضع السياسي غير المستقر في الأراضي الفلسطينية يقيد حركة الأفراد والمرضى والأطباء.

Link:





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**giz** Deutsche Gesellschaft  
für Internationale  
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### Annex C: Participants' List

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