

# IntelliBridge Enterprise (IBE)

**Support Sop**

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|  | **IntelliBridge Enterprise Support SOP** | Version 1.0 |

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| **Overview** |

**Summary:** Philips IntelliBridge Enterprise (IBE) provides a single, standards-based point of connection between clinical systems and the Northwell enterprise. The IBE allows for a consistent flow of patient data and provides automated exporting, allowing for fewer errors across the health system. Providers utilize IBE as a middleware to receive data from the bedside to their EMR for patient care.

**Application Owner:** IS Integration Support / IntelliBridge Enterprise

ISIntegrationSupportGroup@northwell.edu

**Philips Customer Support Contact Info:**

Phone: 800-722-9377 Option #1

Support Email: nocsupport@philips.com

**Hours of Operation:** 24/7 with on-call support

**Locations:** South Shore University Hospital; Huntington Hospital

**Downstream Applications:** Sunrise Clinical Manager; eCareManager

**DNS Entry (Production):**  CGEOPIBEINTDB01.nslijhs.net (10.170.64.245)

**Service:** Application Support

**Priority:** P2 – Incidents tickets are Priority 2 and escalated to the corresponding team following the escalation procedures list below.

**Password Resets & Account Creations:** The Orion Rhapsody interface engine for the IBE is operated and managed by the IntelliBridge Enterprise team.

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| **Escalation Procedures** |

NOTE: Issues related to the onsite Philips PIC iX should be escalated to the local Biomed team by clinical staff following the SOP- Enterprise Patient Monitoring Run Book found in the Related Documentation section below.

1. Clinical staff observes an issue and contacts the Northwell Service Desk via telephone (718/516/631) 470-7272 or chat (https://mytech.northwell.edu/mytech) to report an issue.
2. The Service Desk determine the scope of the issue –
   1. Clinical staff cannot auto-enter vitals into Sunrise Clinical Manager flowsheets – the Service Desk will create a Priority 2 ticket in Service Now and assign it to the *SCM – Change Operations* team.
   2. Clinical staff cannot locate information in PIC iX *–* the Service Desk will create a Priority 2 ticket in Service Now and assign it to the *Enterprise Inpatient Monitoring* team.
   3. Clinical staff cannot view vital signs data in eCareManager – the Service Desk will create a Priority 2 ticket in Service Now and assign it to the *Telehealth Delivery Services* team.
3. Technical teams will troubleshoot.
   1. *Is the issue resolved?*
      1. If *yes* – The technician will place the ticket in the ‘Resolved’ status.
      2. If *no* – The technician will transfer the ticket to the IntelliBridge Enterprise team in the ‘New’ status.
         1. The IntelliBridge Enterprise team will troubleshoot the issue and escalate it to the vendor if necessary.

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| **Outages** |

1. Scheduled Outages
   1. Biomed engineering schedules work to perform maintenance, upgrades, patches, or replacement of devices impacting data flow through the IBE. A scheduled outage can be defined as –

* Work being performed on bedside monitors
  + Replacement or addition of bedside monitors to a unit
  + Renaming of a bedside monitor
* Work is being performed on the servers
  + Maintenance to a server
  + Patching a server
  + Upgrades to a server
    1. Biomed will notify the Enterprise Patient Monitoring team two weeks before the work is performed.
    2. The Enterprise Patient Monitoring team will place a Standard Change Order ticket in ServiceNow and follow the Change Management approval process.
    3. The Enterprise Patient Monitoring team will monitor the change until the environment(s) returns to normal.
    4. Once the change is complete, the Enterprise Patient Monitoring team will complete the Change Order and note any pertinent information into the ticket.
  1. The Enterprise Patient Monitoring team schedules work to perform maintenance, upgrades, or patches on a device(s).
     1. The Enterprise Patient Monitoring team will notify Biomed engineering two weeks before the work is performed.
     2. The Enterprise Patient Monitoring team will place a Standard Change Order ticket in ServiceNow and follow the Change Management approval process.
     3. Once the change is complete, the Enterprise Patient Monitoring team will complete the Change Order and note any pertinent information in the ticket.

1. Unscheduled Outages
   1. Biomed engineering is notified of an outage by bedside staff. An unscheduled outage can be defined as –

* When an issue is reported by bedside staff
  + An entire unit is no longer transmitting vital signs data
  + A bedside monitor is no longer transmitting vital signs data
  + The central station is no longer receiving vital signs data
* If the vendor is contacted for escalated support with equipment
  + 1. Biomed Engineering will notify the Enterprise Patient Monitoring team of the downtime.
    2. The Enterprise Patient Monitoring team will place an Emergency Change Order in ServiceNow and follow the Change Management approval process.
       1. If the downtime requires an IS Notification, the Enterprise Patient Monitoring team will engage Situation Management to post an outage notice on the myTech portal.
    3. The Enterprise Patient Monitoring team will monitor the outage and troubleshoot until the environment returns to normal.
    4. The Enterprise Patient Monitoring team will complete the Change Order and note any pertinent information in the ticket.
  1. Biomed engineering is notified of an outage by the Enterprise Patient Monitoring team.
     1. The Enterprise Patient Monitoring team will contact Biomed engineering to inform them of the downtime and engage if necessary.
     2. The Enterprise Patient Monitoring team will place an Emergency Change Order in ServiceNow and follow the Change Management approval process.
        1. If the downtime requires an IS Notification, the Enterprise Patient Monitoring team will engage Situation Management to post an outage notice on the myTech portal.
     3. The Enterprise Patient Monitoring team will monitor the outage and troubleshoot until the environment returns to normal.
     4. The Enterprise Patient Monitoring team will complete the Change Order ticket and note any pertinent information in the ticket.

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| **Dataflow** |



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| **Technical Information** |

Primary Server Downtime:

The Primary Server replicates its Primary Database to every host in the topology every five minutes during normal operation. If the Primary Database on the Primary Server becomes unavailable, the Surveillance and Overview systems switch to Local Mode and use their replicated Primary Database.

With PIC iX Release B and later, the services that provide the Primary Database are separate from other centralized services. An interruption in the other centralized services will not trigger disruptive Local Mode transitions.

During Local Mode:

• Central monitoring is operational.

• Overview systems can communicate with Surveillance systems.

• Physiological data is stored locally but remains available after exiting Local Mode.

• HIS ADT, ECG 12-Lead Export, Reports, Recording, and Printing remain operational.

• Centralized services are not operational. HL7 and Alert Data Integration can be configured to be Centralized or Distributed.

Surveillance and Overview Stations can be configured to Auto-Reconnect when the server becomes available. Once reconnected, data stored locally (while in Local Mode) remains available for review from anywhere in the system with network access per iX disclosure license duration.

Surveillance PIC iX Downtime:

Surveillance system failures result in loss of central monitoring. Bedside monitors continue to provide primary monitoring. Mitigations include:

• Correct the failure in place.

• Replace the host with a cold or warm standby system.

• If other existing systems have spare sectors, delete the host from the topology to free the Equipment Labels and their assignments, which allows them to be assigned to other Surveillance systems.

Monitor Downtime:

When a failure occurs at the monitor, the Surveillance and Overview systems display a “No Data…” alert.

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| **Environment** | **Role** | **Hostname** | **IP** | **OS** | **CPUs** | **RAM (GBs)** | **Drive Configuration** |
| Production | Interoperability | SYKPIBEINTDB01V | 10.140.94.174 | Windows Server 2016 64 Bit | 16 | 16GB | C: 100GB, D: 50GB, E: 200GB, F: 380GB, G: 60GB, H: 80GB, I: 30GB |
| Production | ADT Processor | SYKPIBEHIF01V | 10.140.94.176 | Windows Server 2016 64 Bit | 4 | 4GB | C: 80GB |
| Production | ADT Processor | SYKPIBEHIF02V | 10.140.94.177 | Windows Server 2016 64 Bit | 4 | 4GB | C: 80GB |
| Backup within DC1 | Interoperability | SYKPIBEINTDB02V | 10.140.94.173 | Windows Server 2016 64 Bit | 16 | 16GB | C: 100GB, D: 50GB, E: 200GB, F: 380GB, G: 60GB, H: 80GB, I: 30GB |
| Production | Application Server - Primary | SYKPPPMAP01V | 10.141.50.31 | OVA/OVF Windows 2016 | 8 | 16 | SAN;C;300 GB;Application |
| Production | Web Server | SYKPPPMWB01V | 10.141.50.33 | OVA/OVF Windows 2016 | 8 | 16 | SAN;C;300 GB;Application |
| Production | Database Server - Physio | SYKPPPMPHYDB01V | 10.141.50.35 | OVA/OVF Windows 2016 | 4 | 16 | SAN;C;300 GB;OS|SAN;B;50 GB;Backup |
| Production | Database Server - Physio | SYKPPPMPHYDB02V | 10.141.50.36 | OVA/OVF Windows 2016 | 4 | 16 | SAN;C;300 GB;OS|SAN;B;50 GB;Backup |
| Production | Database Server - Physio | SYKPPPMPHYDB03V | 10.141.50.37 | OVA/OVF Windows 2016 | 4 | 16 | SAN;C;300 GB;OS|SAN;B;50 GB;Backup |

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| **Related Documentations** |



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| **Revision History** |

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| **Date** | **Version** | **Description** | **Author** |
| October 2021 | 1.0 | Final Document | Telehealth Delivery Services Team; |