

### **Building the Solution**

**How?** Formatting collection and retrieval uniformly

What? Type of data: a fully evolved EHR

Where? Site of the Collection: Any clinical site

**When?** Real-time (prospective>retrospective)

Who? Physician, physician extender, paramedical staff,

administrator/clerk

**Why?** Stated objectives supported by advanced metrics







### The ideal EHR



Contains all the elements of a traditional medical record, in a traditional medical format.



All data fields, representing both structured and unstructured data, are extractable and accountable.



Personal Health Information is easily sanitized for data analytics.

# The ideal EHR analytics tool

(How We Do It)



Mining from a specific EHR data base, using a generic template (design, matrix)



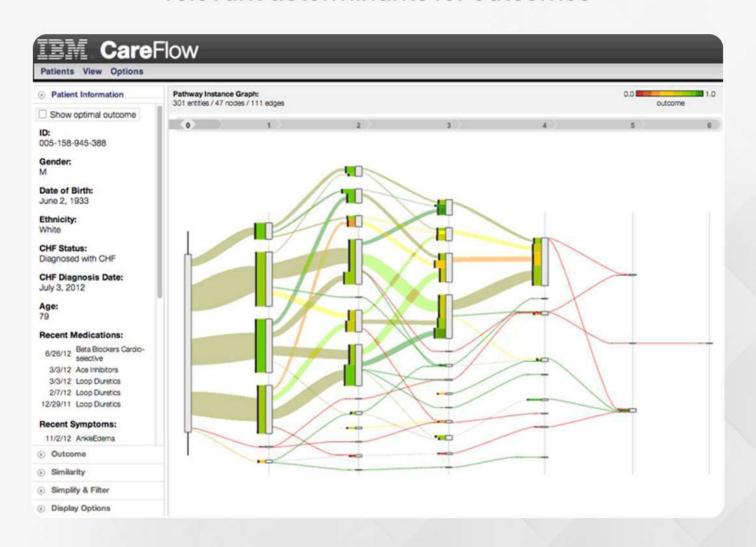
Identical method of aggregation, assembly and Bayesian analysis



Same access/usability at multiple sites

### **Example of Similarity Analytics**

Includes patient features that may not ultimately be relevant determinants for outcomes



### **Similarity Analytics**

#### WHAT ARE THE DRAWBACKS



What qualifies as a feature?



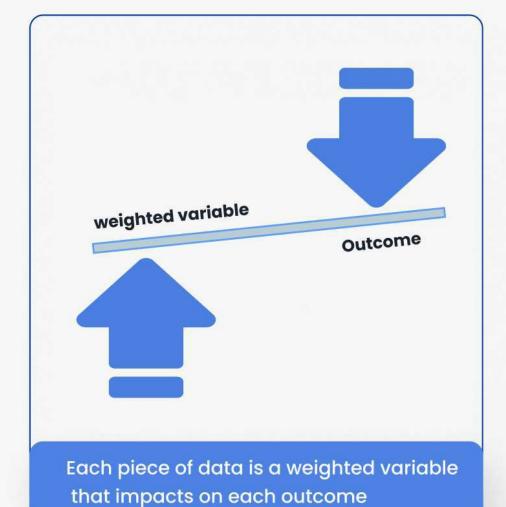
How do the weights change across judgment contexts?



What determines the feature weights?



Behavioral and Brain Sciences





### **Bayesian Based Metrics**

Allow for detection of nuances in a disease pattern/presentation.

# HOW?

Application of such a tool have shown valid predictability with a short "ramp-up" period (number of cases required for validity) because of the number of data fields collected per encounter.

## **Bayesian Models**

Designed to deal with uncertainty.

Transparency, so the model is easily interpreted.

Intuitive usage, which is attractive in complex modeling problems such as systematic review.



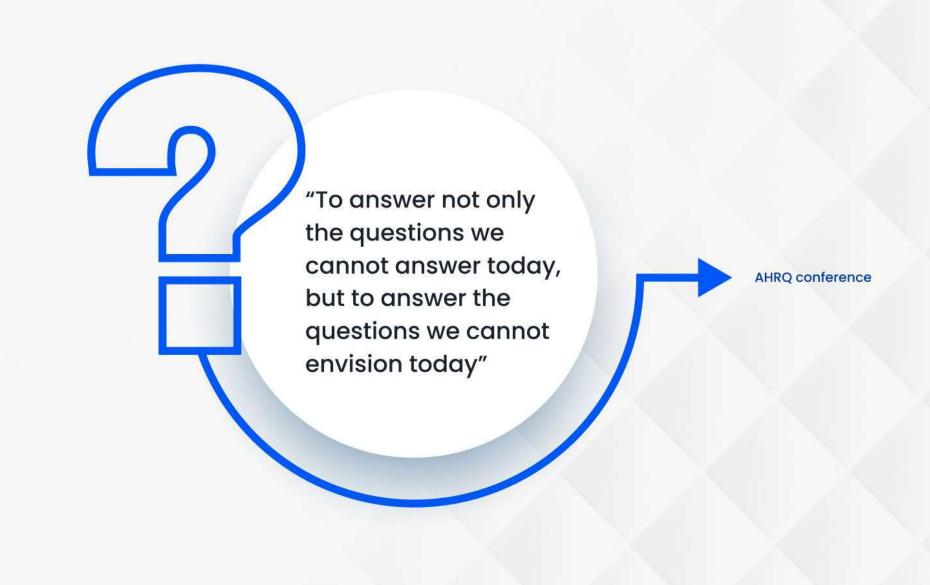
### **Bayesian Models**

Probabilistic inference capability facilitates predictions about unobserved data that could allow for filling of data gaps.

Bayesian Networks and machine learning technology support complex optimizations.



**AHIMA** 





 Use of the tool within standard clinical processes does not require additional personnel

One template multiple applications

Multiple management decisions