

I also will be able to deliver the mapping document for RIS today that I promised for this Wednesday.

Best regards

---

**From:** [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]

**Sent:** Monday, 18 December 2017 9:30 AM

**To:** [REDACTED]

**Cc:** [REDACTED] (Health); Duggan, Mark (Health); [REDACTED] Crossley, Nick; [REDACTED] (Health); [REDACTED] (Health)

**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

**Importance:** High

Good Morning Gents.

Any updates from our conversations and minutes from last week?

Warm Regards,

---

**From:** [REDACTED] (Health)

**Sent:** Friday, 15 December 2017 12:20 PM

**To:** [REDACTED] <[REDACTED]> Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] <[REDACTED]> (Health)

<[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]>

**Cc:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>; [REDACTED] <[REDACTED]>

**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

**Importance:** High

Hi [REDACTED]

Thank you for your quick response!

I have highlighted my question in red.

Warm Regards,

---

**From:** [REDACTED] [mailto:[REDACTED]]

**Sent:** Friday, 15 December 2017 11:05 AM

**To:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] <[REDACTED]>

<[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]>

[REDACTED] (Health) <[REDACTED]>

**Cc:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>; [REDACTED] <[REDACTED]>

**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi All

Please find below amended minutes as per feedback from [REDACTED]

I have also included updates for the items flagged for today in brown.

#### 1. RIS/PACS Test Extract

- a. New extract sent by Siemens 8<sup>th</sup> December
- b. █████ sent feedback 13<sup>th</sup> December
- c. █████ stepped through the questions relating to the RIS extract in her feedback
- d. █████ stepped through the questions relating to the PACS extract in her feedback
- e. **ACTION** – █████ to send sample data for the topics discussed in c) and d) above by **COB 13<sup>th</sup> December**.  
**Complete**
- f. **ACTION** – Siemens to get clarification on all topics and confirm date revised extracts will be delivered.  
**Target – 15<sup>th</sup> December**
  - i. GM – Clarifications are in progress between █████ We will deliver updated extracts no later than Wednesday 20<sup>th</sup> December.  
PR – thank you. Due to Christmas holiday, we will need to have extracts the earliest the possible by Monday 18<sup>th</sup>. As we officially shut down on Thursday, and █████ will need time to analyse, transform, digest the information and forward to AGFA and loaded on Dev by the 22<sup>nd</sup> Dec 2017.  
**ACTION** – Siemens to confirm delivery date of mapping documentation as per SoW. **Target – 15<sup>th</sup> December**
  - ii. GM – Mapping document to be delivered by Wednesday 20<sup>th</sup> December.  
PR – Excellent!

#### Duplicate Accession Number Issue

- g. █████ updated team on █████ questions from last meeting regarding transformation of accession numbers ID to make unique
- h. █████ highlighted data transformations are out of scope as per the SoW
- i. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by **15<sup>th</sup> December**.
  - i. GM – Our data migration team are uncomfortable with changing the accession number. Reason being is that this is the unique number that links to the report. This number is created by the RIS and is then sent on to downstream systems (i.e. PACS, HIS) and is referred to on Radiology Report that may be with a patient. I want to find a solution for you here. Could we have a technical discussion with Agfa to try and find a path forward?
  - PR – We understand why Siemens would be uncomfortable, unfortunately, this is the only approach we have in having Siemens modify accession numbers we have and we have discussed this with AGFA. The modified accession number and approach to deal with related image migration, has been discussed previously with AGFA. They are aware of the work involved. Thank You.

█████ to escalate to █████ if Siemens unable to make this modification as per SoW)

#### 2. PACS Test System

- a. █████ confirmed that to create a Test PACS system, we require a VM with an oracle license. Then the back-up could be important into the VM.
- b. **ACTION** – Siemens to provide a quote to create a Test PACS VM including Professional Services and an Oracle license. **Target – Wednesday 20<sup>th</sup> December**

- c. **ACTION** – Nick to confirm a storage location to store the attachments. **Target – Wednesday 20<sup>th</sup> December**

PR – Target is for 2<sup>nd</sup> of January 2018 as the samples will be delivered by the 3<sup>rd</sup> of January 2018.

- d. ██████ requested in interim, whether an export of the tables used in the PACS migrations was possible to a CSV.

- e. **ACTION** – ██████ to confirm whether CSV exports of tables used in PACS extract is possible by 15<sup>th</sup> December.

i. GM – This is possible but quite a bit of work involved from our side to make happen. There would also be a limitation with Excel when opening the CSV due to size of the tables so you won't be able to work with it in Excel. The best and fastest option is to go with the oracle option. From my understanding of oracle licensing, you can install oracle and start work whilst the purchase happens in the background to move forward. Has ACT health got any arrangement in place with Oracle directly?

ii. PR – ACT Health does not have an Oracle agreements in place, the csv is going to be loaded into sql server, excel will not be used to analyse, so therefore size is not an issue.

### 3. RIS Extract Part 2 - Attachments

- a. ██████ requested an example of each type of attachment file (Interactive documents, protocol documents, clinical alerts & scanned images) a head of the target delivery date of 12<sup>th</sup> January as per SoW.

- b. **ACTION** – ██████ to request and confirm an indicative date by 15<sup>th</sup> December.

i. GM – I can confirm we can deliver this on 3<sup>rd</sup> January.

ii. PR – ██████ and ██████ will be away until the 8<sup>th</sup> of January. This is fine.

- c. Following the meeting ██████ requested whether this could be delivered by 20<sup>th</sup> December.

i. GM – The SoW has this task due 12<sup>th</sup> Jan. I have resource allocated to do this from 2<sup>nd</sup> January and can confirm this sample set will be delivered by 3<sup>rd</sup> January. Due to planned leave next week and being the week before Xmas it will be difficult for me to find an alternate resource to meet 20<sup>th</sup> December. Can you work with this timing? (We have provided a good sample set of attachments previously which maybe a good start. You may also be able to get the info you required from your System Administrator?).

ii. PR - fine.

### 4. New Test Extract request

- a. ██████ requested a new test extract for RIS (including attachments) and PACS to be delivered by 19<sup>th</sup> January which contains 20% of total data

- b. ██████ confirmed it would be great if we can secure 2 months data from each year to make up the 20% extract

- c. **ACTION** – ██████ to confirm whether 2 months of each year is viable option or suggest an alternative. **Target – Wednesday 20<sup>th</sup> December**

d. **ACTION** – [REDACTED] to confirm whether this date is achievable. **Target** – Wednesday 20<sup>th</sup> December

Best regards

**From:** [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]

**Sent:** Wednesday, 13 December 2017 4:11 PM

**To:** [REDACTED] Crossley, Nick; [REDACTED]

**Cc:** [REDACTED] (Health); Duggan, Mark (Health)

**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Thank You [REDACTED] I look forward in speaking with you and [REDACTED] on Friday with excellent feedback from our conversation today.

[REDACTED] will be providing examples/samples for [REDACTED] today from our conversations this afternoon.

Have a lovely day mate.

/arm Regards,

**From:** [REDACTED] [mailto:[REDACTED]]

**Sent:** Wednesday, 13 December 2017 4:05 PM

**To:** Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] <[REDACTED]>

[REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]>

[REDACTED] <[REDACTED]> [REDACTED] (Health)

<[REDACTED]@act.gov.au>

**Cc:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>

**Subject:** NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17

Hi All

Minutes and actions from today's meeting. Please let me know if any amendments.

## 1. RIS/PACS Test Extract

- a. New extract sent by Siemens 8<sup>th</sup> December
- b. [REDACTED] sent feedback 13<sup>th</sup> December
- c. [REDACTED] stepped through the questions relating to the RIS extract in her feedback
- d. [REDACTED] stepped through the questions relating to the PACS extract in her feedback

**ACTION** – [REDACTED] to send sample data for the topics discussed in c) and d) above by **COB 13<sup>th</sup> December**.

**ACTION** – Siemens to get clarification on all topics. **Target** – 15<sup>th</sup> December

## 2. Duplicate Accession Number Issue

- e. [REDACTED] updated team on [REDACTED] questions from last meeting regarding transformation of accession numbers ID to make unique
- f. [REDACTED] highlighted data transformations are out of scope as per the SoW



Please find attached my notes from the meeting on Wednesday.

Further to this, I can confirm as of today we are still awaiting an error free extract to be delivered for both RIS and PACS. We are hoping to have these to you early next week.

With regards to 3. below, I was asked to investigate whether we could modify the extract and modify the accession numbers so these are unique. As per the SoW, as Siemens cannot guarantee the quality of data if changes like this are made, we encourage this change to be made at the Agfa end. There was an out of scope topic in the SoW as per the below.

### Transition-Out Activities and Documents Not In-Scope

Execution of any data transformation during the extract process. ACT Health will be responsible for any transformation of data prior to loading into the Agfa system

In saying that, happy to discuss further though if this is not viable.

### Meeting Minutes – 6<sup>th</sup> December 2017

Attendees: [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

1. [REDACTED] will cover [REDACTED] whilst on leave so all correspondence to include both [REDACTED] and [REDACTED]
2. RIS/PACS Test Extract
  - a. [REDACTED] updated team on progress since last week
    - i. Test extract triaged by [REDACTED] Friday last week
    - ii. Errors found in both RIS and PACS extracts
    - iii. Received new PACS extract Monday, further issues found
    - iv. Received new RIS extract Tuesday, further issues found
    - v. Expect new extracts Thursday, if all OK can send through Friday (earliest)
  - b. Team discussed accuracy of extracts being an issue, and [REDACTED] seeing firsthand what [REDACTED] was facing with earlier extracts
  - c. [REDACTED] confirmed this is the most time consuming task of the process. Once test extract in place and accurate, further extracts will be easy to generate
  - d. Team acknowledged we need to ensure the extract is correct from the source, as opposed to modifying the extracts themselves to meet timelines.
  - e. [REDACTED] confirmed timeline of 12<sup>th</sup> Dec on track
  - f. [REDACTED] confirmed date of 12<sup>th</sup> Dec in SoW should have indicated a completion of the test migration as opposed to delivery of test extract
3. Duplicate Accession Number Issue

g. [REDACTED] asked whether Siemens can modify extract make accession numbers unique

h. [REDACTED] agreed to investigate

#### 4. PACS Migration

i. [REDACTED] indicated SDC pilot proposal likely to proceed

j. Siemens will need to receive requests from the Agfa RIS to move studies in that order

k. SDC Pilot likely to be requested for Jan

l. GM to tentatively schedule resources for January

#### 5. PACS Extract

m. [REDACTED] request a new single PACS database extract be produced by Siemens. [REDACTED] will investigate if possible

n. [REDACTED] requested a network drive

#### 6. Timeline clarification

o. [REDACTED] asked for clarification of how migration activity sits on critical path of the project

p. [REDACTED] confirmed important that there is sufficient time for 2 years studies to be migrated prior to Agfa go-live

q. [REDACTED] indicated a successfully partial migration needs to be completed by 2<sup>nd</sup> Feb

r. Plan is to test full test migration during Feb

s. Production migration to begin start of March

Best regards

[REDACTED]  
[REDACTED]

**Siemens Healthcare Pty Ltd (Australia)**

885 Mountain Highway

Bayswater, 3153

Mobile: [REDACTED]

Work: +61 (0)3 9721 7507

[mailto:\[REDACTED\]](mailto:[REDACTED])

[www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)

<< OLE Object: Picture (Device Independent Bitmap) >>

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**Heland, Rebecca (Health)**

---

**From:** Crossley, Nick  
**Sent:** Tuesday, 19 December 2017 2:30 PM  
**To:** [REDACTED] (Health)  
**Cc:** [REDACTED] (Health); [REDACTED] (Health)  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Files here

[Q:\COMMON\Projects\IM&IT\UCPH Digital Solutions Program\Integrated Diagnostic Imaging Solution\Data Migration\Siemens\PACS Extracts\PACS\\_DBFullExtracts](Q:\COMMON\Projects\IM&IT\UCPH Digital Solutions Program\Integrated Diagnostic Imaging Solution\Data Migration\Siemens\PACS Extracts\PACS_DBFullExtracts)

Cheers

[REDACTED]

---

**From:** [REDACTED] (Health)  
**Sent:** Tuesday, 19 December 2017 1:19 PM  
**To:** Crossley, Nick <Nick.Crossley@act.gov.au>  
**Cc:** [REDACTED] (Health) <[REDACTED]@act.gov.au>  
**Subject:** FW: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi [REDACTED]

FYI...

---

**From:** [REDACTED] [mailto:[REDACTED]]  
**Sent:** Tuesday, 19 December 2017 12:53 PM  
**To:** [REDACTED] (Health) <[REDACTED]@act.gov.au>  
**Cc:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi [REDACTED]

As per [REDACTED] email, PACS DB extracts are now available on: SIEOPM1\d\$\backups\PACS\_DBFullExtracts

Please liaise with [REDACTED] on how to pick up the files.

Kind Regards,

[REDACTED]

**Siemens Healthcare Pty Ltd**  
 160 Herring Road  
 Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009  
 Mobile: [REDACTED]  
 Email: [REDACTED]  
 Internet: [www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)



 Please consider the environment before printing this email

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---

**From:** [REDACTED] (Health) [mailto:[REDACTED]act.gov.au]  
**Sent:** Tue, 19 December 2017 11:14 AM  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi [REDACTED]

Thanks for the extracts and mappings for RIS (apologies). Thank you and we look forward in seeing the csv files. Yes, everything is looking 'ok' so far, but with regards to the gap analysis it reads very light in content. Can Siemens provide us with more information on the database, quite a bit that's missing?

Also, as for the Accession numbers, with the 'script' and time/material for Siemens to make those changes, can we explore how much effort will your technical resource be able to commit as an option to make those changes? [REDACTED] and [REDACTED] will get back to you. As for the attachments, how much of a push back are we seeing, in days, weeks?

Many thanks [REDACTED]

Warm Regards,  
 [REDACTED]

---

**From:** [REDACTED] (Health) [mailto:[REDACTED]act.gov.au]  
**Sent:** Tuesday, 19 December 2017 9:25 AM  
**To:** [REDACTED] (Health) <[REDACTED]act.gov.au>  
**Cc:** [REDACTED] (Health) <[REDACTED]act.gov.au>; [REDACTED] <[REDACTED]>  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi [REDACTED]

I received some CSV files for the 4 PACS DB tables overnight. [REDACTED] is triaging now to see what was provided. Will update you shortly and send through if OK.

Not sure what you are referring to in the GAP analysis? The mapping table for RIS was provided yesterday. Did you receive this OK?

The other item I had on my list was the accession number change which is currently out of scope in the SoW. I phoned you yesterday to discuss. Basically, it is possible but quite a lot of effort to script such a change. It requires a lot of testing. This will required additional effort, and likely require a change request to SoW and impact subsequent delivery dates in the SoW. i.e. 12<sup>th</sup> January for Attachments may need to push back if this task was prioritised.

I am awaiting confirmation of the impact, if a day or two I am sure you are OK with this but if more it may be an issue. As I mentioned previously, my RIS resource is on leave this week so I may not get a response to the 2<sup>nd</sup> January. In saying that he has occasionally been checking emails for me.

What are your initial thoughts?

Best regards

---

**From:** [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]  
**Sent:** Tuesday, 19 December 2017 9:13 AM  
**To:** [REDACTED] (HC APC AUS SV-CS IT)  
**Cc:** [REDACTED] (Health)  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi Mate.

Any updates on the gap analysis? Csv files?

Many Thanks.

---

**From:** [REDACTED] [mailto:[REDACTED]]  
**Sent:** Monday, 18 December 2017 10:45 AM  
**To:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]>  
**Cc:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>; [REDACTED] <[REDACTED]> Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]> [REDACTED] (Health) <[REDACTED]@act.gov.au>  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi [REDACTED]

Good news, we received new extracts over the weekend for both RIS and PACS. [REDACTED] is currently triaging and will send through today.

[REDACTED] also will be able to deliver the mapping document for RIS today that I promised for this Wednesday.

Best regards

---

**From:** [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]  
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**Cc:** [REDACTED] (Health); Duggan, Mark (Health); [REDACTED] Crossley, Nick; [REDACTED] (Health); [REDACTED] (Health)  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]  
**Importance:** High

Good Morning Gents.

Any updates from our conversations and minutes from last week?

Warm Regards,

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 Sent: Friday, 15 December 2017 12:20 PM  
 To: [REDACTED] <[REDACTED]> Crossley, Nick <Nick.Crossley@act.gov.au>;  
 [REDACTED] <[REDACTED]> (Health)  
 <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]>  
 Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>;  
 [REDACTED] <[REDACTED]>  
 Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]  
 Importance: High

Hi [REDACTED]

Thank you for your quick response!

I have highlighted my question in red.

Warm Regards,  
 [REDACTED]

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From: [REDACTED] [mailto:[REDACTED]]  
 Sent: Friday, 15 December 2017 11:05 AM  
 To: [REDACTED] (Health) <[REDACTED]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED]  
 <[REDACTED]> (Health) <[REDACTED]@act.gov.au>; [REDACTED]  
 [REDACTED] (Health) <[REDACTED]>  
 Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>;  
 [REDACTED] <[REDACTED]>  
 Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi All

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I have also included updates for the items flagged for today in **brown**.

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- e. **ACTION** – [REDACTED] to send sample data for the topics discussed in c) and d) above by **COB 13<sup>th</sup> December**.  
**Complete**
- f. **ACTION** – Siemens to get clarification on all topics and confirm date revised extracts will be delivered.  
**Target – 15<sup>th</sup> December**
  - i. GM – Clarifications are in progress between [REDACTED] We will deliver updated extracts no later than Wednesday 20<sup>th</sup> December.  
 PR – thank you. Due to Christmas holiday, we will need to have extracts the earliest the possible by Monday 18<sup>th</sup>. As we officially shut down on Thursday, and [REDACTED] will need time to analyse, transform, digest the information and forward to AGFA and loaded on Dev by the 22<sup>nd</sup> Dec 2017.

**ACTION** – Siemens to confirm delivery date of mapping documentation as per SoW. **Target – 15<sup>th</sup> December**

ii. **GM** – Mapping document to be delivered by **Wednesday 20<sup>th</sup> December.**

**PR** – Excellent!

#### **Duplicate Accession Number Issue**

g. [REDACTED] updated team on [REDACTED] questions from last meeting regarding transformation of accession numbers ID to make unique

h. [REDACTED] highlighted data transformations are out of scope as per the SoW

i. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by **15<sup>th</sup> December.**

i. **GM** – Our data migration team are uncomfortable with changing the accession number. Reason being is that this is the unique number that links to the report. This number is created by the RIS and is then sent on to downstream systems (i.e. PACS, HIS) and is referred to on Radiology Report that may be with a patient. I want to find a solution for you here. Could we have a technical discussion with Agfa to try and find a path forward?

**PR** – We understand why Siemens would be uncomfortable, unfortunately, this is the only approach we have in having Siemens modify accession numbers we have and we have discussed this with AGFA. The modified accession number and approach to deal with related image migration, has been discussed previously with AGFA. They are aware of the work involved. Thank You.

[REDACTED] to escalate to [REDACTED] if Siemens unable to make this modification as per SoW)

#### **2. PACS Test System**

a. [REDACTED] confirmed that to create a Test PACS system, we require a VM with an oracle license. Then the back-up could be important into the VM.

b. **ACTION** – Siemens to provide a quote to create a Test PACS VM including Professional Services and an Oracle license. **Target – Wednesday 20<sup>th</sup> December**

c. **ACTION** – Nick to confirm a storage location to store the attachments. **Target – Wednesday 20<sup>th</sup> December**

**PR** – Target is for **2<sup>nd</sup> of January 2018** as the samples will be delivered by the **3<sup>rd</sup> of January 2018.**

d. [REDACTED] requested in interim, whether an export of the tables used in the PACS migrations was possible to a CSV.

e. **ACTION** - [REDACTED] to confirm whether CSV exports of tables used in PACS extract is possible by **15<sup>th</sup> December.**

i. **GM** – This is possible but quite a bit of work involved from our side to make happen. There would also be a limitation with Excel when opening the CSV due to size of the tables so you won't be able to work with it in Excel. The best and fastest option is to go with the oracle option. From my understanding of oracle licensing, you can install oracle and start work whilst the purchase happens in the background to move forward. Has ACT health got any arrangement in place with Oracle directly?

- ii. PR – ACT Health does not have an Oracle agreements in place, the csv is going to be loaded into sql server, excel will not be used to analyse, so therefore size is not an issue.

### 3. RIS Extract Part 2 - Attachments

- a. ██████ requested an example of each type of attachment file (Interactive documents, protocol documents, clinical alerts & scanned images) a head of the target delivery date of 12<sup>th</sup> January as per SoW.
- b. **ACTION** – ██████ to request and confirm an indicative date by **15<sup>th</sup> December**.
- i. GM – I can confirm we can deliver this on 3<sup>rd</sup> January.
- ii. PR – ██████ and ██████ will be away until the 8<sup>th</sup> of January. This is fine.
- c. Following the meeting ██████ requested whether this could be delivered by 20<sup>th</sup> December.
- i. GM – The SoW has this task due 12<sup>th</sup> Jan. I have resource allocated to do this from 2<sup>nd</sup> January and can confirm this sample set will be delivered by 3<sup>rd</sup> January. Due to planned leave next week and being the week before Xmas it will be difficult for me to find an alternate resource to meet 20<sup>th</sup> December. Can you work with this timing? (We have provided a good sample set of attachments previously which maybe a good start. You may also be able to get the info you required from your System Administrator?).
- ii. PR - fine.

### 4. New Test Extract request

- a. ██████ requested a new test extract for RIS (including attachments) and PACS to be delivered by 19<sup>th</sup> January which contains 20% of total data
- b. ██████ confirmed it would be great if we can secure 2 months data from each year to make up the 20% extract
- c. **ACTION** – ██████ to confirm whether 2 months of each year is viable option or suggest an alternative.  
**Target – Wednesday 20<sup>th</sup> December**
- d. **ACTION** – ██████ to confirm whether this date is achievable. **Target – Wednesday 20<sup>th</sup> December**

Best regards

**From:** ██████ (Health) [mailto:████████@act.gov.au]

**Sent:** Wednesday, 13 December 2017 4:11 PM

**To:** ██████ Crossley, Nick; ██████

**Cc:** ██████ (Health); Duggan, Mark (Health)

**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Thank You ██████ I look forward in speaking with you and ██████ on Friday with excellent feedback from our conversation today.

████████ will be providing examples/samples for ██████ today from our conversations this afternoon.

Have a lovely day mate.

Warm Regards,

From: [REDACTED] [mailto:[REDACTED]]  
 Sent: Wednesday, 13 December 2017 4:05 PM  
 To: Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] <[REDACTED]>  
 [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]>  
 [REDACTED] <[REDACTED]> [REDACTED] (Health)  
 <[REDACTED]@act.gov.au>  
 Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>  
 Subject: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17

Hi All

Minutes and actions from today's meeting. Please let me know if any amendments.

### 1. PIS/PACS Test Extract

- a. New extract sent by Siemens 8<sup>th</sup> December
- b. [REDACTED] sent feedback 13<sup>th</sup> December
- c. [REDACTED] stepped through the questions relating to the RIS extract in her feedback
- d. [REDACTED] stepped through the questions relating to the PACS extract in her feedback

**ACTION** – [REDACTED] to send sample data for the topics discussed in c) and d) above by **COB 13<sup>th</sup> December**.  
**ACTION** – Siemens to get clarification on all topics. **Target** – **15<sup>th</sup> December**

### 2. Duplicate Accession Number Issue

- e. [REDACTED] updated team on [REDACTED] questions from last meeting regarding transformation of accession numbers ID to make unique
- f. [REDACTED] highlighted data transformations are out of scope as per the SoW
- g. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by **15<sup>th</sup> December**.

[REDACTED] to escalate to [REDACTED] if Siemens unable to make this modification as per SoW)

### 3. PACS Test System

- h. [REDACTED] confirmed an export of oracle DB to single file is possible. For this to occur the production database would need to be taken down.
- i. [REDACTED] confirmed that to create a Test PACS system, we require a VM with an oracle license. Then the back-up could be important into the VM.
- j. **ACTION** – Siemens to provide a quote to create a Test PACS VM including Professional Services and an Oracle license.  
**Target** – **Wednesday 20<sup>th</sup> December**
- k. **ACTION** – Nick to confirm a storage location to store the PACS Database Export. **Target** – **Wednesday 20<sup>th</sup> December**

l. ██████ requested in interim, whether an export of the tables used in the PACS migrations was possible to a CSV.

m. **ACTION** – ██████ to confirm whether CSV exports of tables used in PACS extract is possible by **15<sup>th</sup> December**.

#### 4. RIS Extract Part 2 - Attachments

n. ██████ requested an example of each type of attachment file (Interactive documents, protocol documents, clinical alerts & scanned images) a head of the target delivery date of 12<sup>th</sup> January as per SoW.

o. **ACTION** – ██████ to request and confirm an indicative date by **15<sup>th</sup> December**

#### 5. New Test Extract request

p. ██████ requested a new test extract for RIS (including attachments) and PACS to be delivered by 19<sup>th</sup> January which contains 20% of total data

q. ██████ confirmed it would be great if we can secure 2 months data from each year to make up the 20% extract

r. **ACTION** – ██████ to confirm whether 2 months of each year is viable option or suggest an alternative. **Target** – **Wednesday 20<sup>th</sup> December**

s. **ACTION** – ██████ to confirm whether this date is achievable. **Target** – **Wednesday 20<sup>th</sup> December**

Best regards

---

**From:** ██████ ██████  
**Sent:** Friday, 8 December 2017 1:21 PM  
**To:** 'Crossley, Nick'; ██████ ██████ ██████ ██████ (Health); ██████ ██████ (Health); ██████ ██████ (Health)  
**Cc:** ██████ ██████ (Health); Duggan, Mark (Health)  
**Subject:** NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 6/12/17

Hi ██████

Please find attached my notes from the meeting on Wednesday.

Further to this, I can confirm as of today we are still awaiting an error free extract to be delivered for both RIS and PACS. We are hoping to have these to you early next week.

With regards to 3. below, I was asked to investigate whether we could modify the extract and modify the accession numbers so these are unique. As per the SoW, as Siemens cannot guarantee the quality of data if changes like this are made, we encourage this change to be made at the Agfa end. There was an out of scope topic in the SoW as per the below.

#### Transition-Out Activities and Documents Not In-Scope

Execution of any data transformation during the extract process. ACT Health will be responsible for any transformation of data prior to loading into the Agfa system

In saying that, happy to discuss further though if this is not viable.

Meeting Minutes – 6<sup>th</sup> December 2017

Attendees: [REDACTED]

1. [REDACTED] will cover [REDACTED] whilst on leave so all correspondence to include both [REDACTED] and [REDACTED]
2. RIS/PACS Test Extract
  - a. [REDACTED] updated team on progress since last week
    - i. Test extract triaged by [REDACTED] Friday last week
    - ii. Errors found in both RIS and PACS extracts
    - iii. Received new PACS extract Monday, further issues found
    - iv. Received new RIS extract Tuesday, further issues found
    - v. [REDACTED] expect new extracts Thursday, if all OK can send through Friday (earliest)
  - b. Team discussed accuracy of extracts being an issue, and [REDACTED] seeing firsthand what [REDACTED] was facing with earlier extracts
  - c. [REDACTED] confirmed this is the most time consuming task of the process. Once test extract in place and accurate, further extracts will be easy to generate
  - d. Team acknowledged we need to ensure the extract is correct from the source, as opposed to modifying the extracts themselves to meet timelines.
  - e. [REDACTED] confirmed timeline of 12<sup>th</sup> Dec on track
  - f. [REDACTED] confirmed date of 12<sup>th</sup> Dec in SoW should have indicated a completion of the test migration as opposed to delivery of test extract
3. Duplicate Accession Number Issue
  - g. [REDACTED] asked whether Siemens can modify extract make accession numbers unique
  - h. [REDACTED] agreed to investigate
4. PACS Migration
  - i. [REDACTED] indicated SDC pilot proposal likely to proceed
  - j. Siemens will need to receive requests from the Agfa RIS to move studies in that order
  - k. SDC Pilot likely to be requested for Jan
  - l. GM to tentatively schedule resources for January
5. PACS Extract
  - m. [REDACTED] request a new single PACS database extract be produced by Siemens. [REDACTED] will investigate if possible

n. [REDACTED] requested a network drive

6. Timeline clarification

o. [REDACTED] asked for clarification of how migration activity sits on critical path of the project

p. [REDACTED] confirmed important that there is sufficient time for 2 years studies to be migrated prior to Agfa go-live

q. [REDACTED] indicated a successfully partial migration needs to be completed by 2<sup>nd</sup> Feb

r. Plan is to test full test migration during Feb

s. Production migration to begin start of March

Best regards

[REDACTED]  
[REDACTED]  
**Siemens Healthcare Pty Ltd (Australia)**

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Bayswater, 3153

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Work: +61 (0)3 9721 7507

[mailto:\[REDACTED\]](mailto:[REDACTED])

[www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)

<< OLE Object: Picture (Device Independent Bitmap) >>

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**Heland, Rebecca (Health)**

---

**From:** [REDACTED] <[REDACTED]>  
**Sent:** Monday, 18 December 2017 2:42 PM  
**To:** [REDACTED] (Health); [REDACTED] (Health)  
**Cc:** [REDACTED] (Health); [REDACTED] Crossley, Nick; [REDACTED] (Health)  
**Subject:** RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hello [REDACTED]

Please find my responses below.

I will send a separate email to access RIS/PACS extracts and Mappings Document.

As always, please review and advise of any issues.

Kind Regards,

[REDACTED]

**Siemens Healthcare Pty Ltd**  
 160 Herring Road  
 Macquarie Park NSW 2113

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Mobile: [REDACTED]

Email: [REDACTED]@healthineers.com

Internet: [www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)



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---

**From:** [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]  
**Sent:** Wed, 13 December 2017 12:13 PM  
**To:** [REDACTED] (Health)  
**Cc:** [REDACTED] (Health); [REDACTED] Crossley, Nick; [REDACTED] (Health)  
**Subject:** RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hi [REDACTED]

Thanks for the extracts and thank you for validating the extracts on your end. The RIS and the PACS extract formats are now looking good.

I do have some feedback/questions on the extracts. We have got the data in the format that we wanted, my feedback is more about the data itself.

**RIS**

What date time column have the files been filtered on? The only date that I found in the file was the CreatedDateTime in the result file where the date ranges outside the 01-Jan to 20-Jan 2013, some dates are in 2014?(this will help me validate coverage of the extracts on my end).

[ME] field valued: activity.proc\_dtime (This is the time the exam was ended by the technician)

Duplicate patient data to be removed from the extract.

[ME] This has been addressed on the new extracts

Leading 0s to be removed from PatientID (PatientID from RIS does not match PatientID from PACS)

[ME] This has been addressed on the new extracts

Requesting Physician details (missing for most of the services) (We haven't received the mappings yet, but my guess is that the requesting physician details come from the ordering doctor, the system seems to have ordering doctor details for more records than what's in the extract)

[ME] This has been addressed on the new extracts

OrderCreationDateTime and ScheduledStudydateTime(many dates in the Activity and Activity info tables) – which dates correspond to these?? What are our alternatives? (You have suggested using End procedure Date Time, will confirm with AGFA). The exam file has an additional '|', the ScheduledStudyDateTime therefore shows as '|'

[ME] Currently these 2 fields have been left empty until further notice. The extra '|' issue has been addressed on the new extracts

Accession numbers sequencing was requested as .01 and .02(can this be corrected)?

Example

Original Accession number: [REDACTED] Modified: [REDACTED]

[ME] This has been addressed on the new extracts

Study UIDs duplicated where same study is associated to linked accession numbers, does PACS have the studies associated to all the accession numbers or just the one linked accession number, we need the Study UIDs to be unique, can this be discussed further?

[ME] In most cases where exams have been linked in RIS, PACS will hold 1 record (chosen SUID depends on order chosen at the modality). we do not have a way to tell which exams have a reference in PACS and which do not, doing this maybe a risk. This should be a task for your team and AGFA as you will have both the RIS and PACS extracts in hand and therefore minimizing any risks to the equation for such scenario.

Some exams are missing a StudyInstance UID, I understand the ones with a Status 'CA' (cancelled) will not have one, but what about the completed (Status - CM) ones?

[ME] Will get back to you on that

Again, I understand cancelled exams with no results but what about the completed exams, why are they missing a result body?

[ME] Exams have not been performed and there could be many reasons for this. Please check with Business I think cancelled exams with no results should be excluded from the exam file (will confirm with AGFA). Status 'P' stands for preliminary, which I think will be used for results which have been drafted but not validated yet.

[ME] we left the CM exams with 'P' status on in the report file until further notice

[ME] Please also note that some 'CA' exams have a real report attached to them. We have decided to include these in the extract until further notice

The TranscriptionistFirstName seems to have been populated with the first and last name and the TranscriptionistLastName seems like a code value or ID for the same, can this be fixed?

[ME] This has been addressed on the new extracts

Will the accession numbers be modified in the results file for the next extract?

[ME] This is still on hold

Activity.ord\_for\_dtime has not been answered, what value does this field store

[ME] it is not activity, it is visit\_activity.ord\_for\_dtime, and that is the time the exam was set to be performed.

## PACS

Some Study\_UIDs in the RIS extract do not have corresponding PACS Study records and some Study\_UIDs in PACS have no information in the RIS extract.

The study file specification indicates multiple Modalities to be extracted under the same column 'Modality'. The study extract has different rows for studies under different modalities, this needs to be fixed. The modalities can be comma separated. (I will confirm with AGFA if ',' is their preferred separator)

[ME] This has been addressed on the new extracts

There are some records where the study\_ref, modality, Study\_UID has been duplicated, I would have expected the study\_ref to be unique for the study records.

[ME] This has been addressed on the new extracts

The accession numbers in PACS have not been modified (Will confirm with AGFA if the PACS is expected to have the modified accession numbers).

[ME] No changes

Study\_description and Series\_description is blank for some records.

[ME] No changes until further notice

Institution name is the same as the department name in the study file?

[ME] Same data in DB

Is the series number meant to be unique for a study?

[ME] will get back to you on that

Is the image number meant to be unique for a series?

[ME] will get back to you on that

Will the optional fields be included in the next extract?

[ME] No, still working on that

We can discuss all of this in detail at our regular meeting today at 2:00pm.

Regards,

[REDACTED] | IDIS Data Migration Analyst - UCPH Digital Solutions Program  
Mobile: [REDACTED] | Email: [REDACTED]@act.gov.au

---

**From:** [REDACTED] [mailto:[REDACTED]]  
**Sent:** Friday, 8 December 2017 3:18 PM  
**To:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]>  
**Cc:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]> [REDACTED]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>  
**Subject:** RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hi [REDACTED] and [REDACTED]

I also forgot to mention that PACS extracts will not contain optional fields at this stage as further investigation is required to work out proper mapping with the Agfa spec.

Kind Regards,

██████████  
 ██████████  
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 Macquarie Park NSW 2113

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---

**From:** ██████████  
**Sent:** Fri, 8 December 2017 3:05 PM  
**To:** ██████████ (Health); ██████████ (Health)  
**Cc:** ██████████ (Health); ██████████ 'Crossley, Nick'; ██████████ (Health)  
**Subject:** RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hello ██████████ and ██████████

Please find on a separate email a link to access both RIS and PACS newest extracts.

Extracts Date Range for both PACS and RIS: 01/01/2013 – 20/01/2013

As previously discussed, all efforts were spent making sure the extracts meet as close as possible the Agfa spec document.

We have replaced the FillerOrderNumber by the Accession Number as requested but I was also advised that many exams do contain the FillerOrderNumber from ACT/CAL which seem to have its own combination (i.e.: 19202-1921790001002) hence why the IssuerOfFillerOrderNumber was 'Siemens' or 'PAS' depending on where it came from originally. Either way it does not play a role for PACS but maybe something for you and your team to think about.

The ScheduledStudyDateTime is a required field on the procedure file but I was advised that this is data we purge from our side and therefore will be blank. We can set this up to be the 'End procedure DateTime', Please check with Agfa and let me know if the workaround works for you?

Finally, Exams where a report do not exist were set with a status 'P' to keep up with the Spec document.

Please thoroughly examine the files and let me know if this works for you or if anything was missed

Thank you kindly for your patience throughout this process!

Kind Regards,

██████████

[REDACTED]

**Siemens Healthcare Pty Ltd**  
160 Herring Road  
Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009  
Mobile: +61 (0)4 1972 6428

Email: [REDACTED]  
Internet: [www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)



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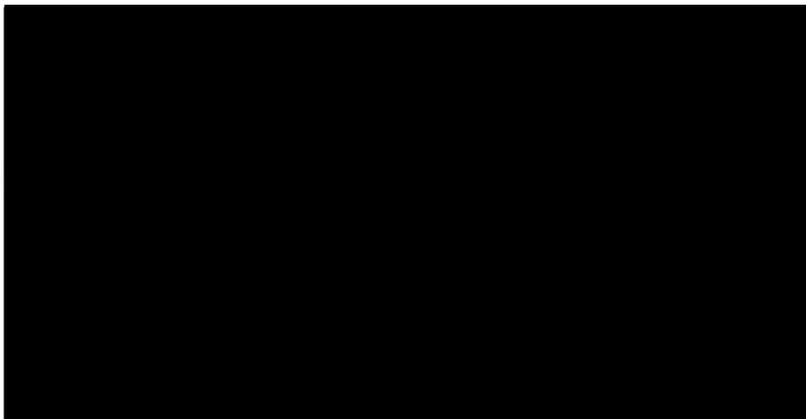
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---

**From:** [REDACTED]  
**Sent:** Thu, 7 December 2017 3:50 PM  
**To:** [REDACTED] (Health)  
**Cc:** [REDACTED] (Health); [REDACTED] Crossley, Nick; [REDACTED] (Health); [REDACTED] (Health)  
**Subject:** RE: Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hello [REDACTED]

I can confirm that the modified accession numbers will be available on the request file as seen below.



As for the Report file, this will need to be discussed internally but will most likely not be available on the next batch of extracts.

About the FillerOrderNumber topic, what do you want to appear under the IssuerOfFillerOrderNumber? currently 'Siemens' and 'PAS' are the values. I cannot also promise that this will be made available in the next batch but will push for it.

Kind Regards,

[REDACTED]

**Siemens Healthcare Pty Ltd**  
 160 Herring Road  
 Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: [REDACTED]

Email: [REDACTED]

Internet: [www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)



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**From:** [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]

**Sent:** Thu, 7 December 2017 3:15 PM

**To:** [REDACTED]

**Cc:** [REDACTED] (Health); [REDACTED] Crossley, Nick; [REDACTED] (Health); [REDACTED] (Health)

**Subject:** Modified Accession numbers in the report file [SEC=UNCLASSIFIED]

Hi [REDACTED]

We have discussed this with AGFA and it has been confirmed that the 'requested procedure' and the 'report' files will both need the modified accession numbers.

This will ensure referential integrity on Agfa's side, as accession numbers in both files will directly match up.

Example:

Requested Procedure

Accession number Study UID

[REDACTED]

Report

Accession number Report Body

[REDACTED] Patient: \*\* Result: Normal

[REDACTED] Patient: \*\* Result: Normal

Therefore the same result body will be duplicated across multiple rows, when the result is associated to multiple studies.

Though it will be good to have this worked out for the coming extract, if not workable in the given timeframes, I can work with a file with duplicate accession numbers which can then be modified on our end to add the sequencing.

The other thing that we discussed with AGFA was regarding this question that I had raised previously, Question from me - FillerOrderNumber mapped as acc\_itn + ord\_no + seq\_no, is this the same combination used as FillerOrderNumber in PACS as well?

Answer from Siemens: No it is not the case on PACS. Accession number is the ID used between RIS and PACS and therefore should match. The combination was created for the purpose of the RIS extracts as Agfa expects a FillerOrderNumber.

Since the FillerOrderNumber is not used to match RIS and PACS, the filler order numbers can be populated with the accession number only, instead of the acc\_itn + ord\_no + seq\_no.

The FillerOrderNumber will always be the non-modified accession number (all 3 files Service Request, Requested Procedure and Report).

Again though it will be good to have this implemented in the coming extracts, if not possible, I could work on this update as part of my transformations for now.

Let me know if you need any further details.

Thanks,

██████████ | IDIS Data Migration Analyst - UCPH Digital Solutions Program  
Mobile: ██████████ Email: ██████████@act.gov.au

---

**From:** ██████████ (Health)  
**Sent:** Wednesday, 6 December 2017 2:37 PM  
**To:** ██████████ <██████████>  
**Cc:** ██████████ (Health) <██████████@act.gov.au>; ██████████ (Health) <██████████@act.gov.au>; ██████████ <██████████> Crossley, Nick <Nick.Crossley@act.gov.au>; ██████████ <██████████> ██████████ (Health) <██████████@act.gov.au>  
**Subject:** RE: PACS Extract [SEC=UNCLASSIFIED]

As discussed today, we will run through the scenario again with Agfa tomorrow at our regular meeting, and confirm the approach that will work best for them. We will then confirm with you in writing.

Regards

██████████ | IDIS Delivery Manager - UCPH Digital Solutions Program  
Phone: 02 6174 8768 | Mobile: ██████████ | Email: ██████████  
Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government  
Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | [www.act.gov.au](http://www.act.gov.au)

---

**From:** ██████████ [mailto:██████████]  
**Sent:** Friday, 1 December 2017 3:45 PM  
**To:** ██████████ (Health) <██████████>  
**Cc:** ██████████ (Health) <██████████@act.gov.au>; ██████████ (Health) <██████████@act.gov.au>; ██████████ <██████████> Crossley, Nick <Nick.Crossley@act.gov.au>; ██████████ <██████████>  
**Subject:** RE: PACS Extract [SEC=UNCLASSIFIED]

Hello ██████████

I went back to the team about this and the feedback is that we can generate the necessary records to the request file where multiple Study UID's exist for an accession number. However we are not comfortable with generating these records to the other files such as the result file for dummy accession numbers.

Kind Regards,

**Siemens Healthcare Pty Ltd**  
 160 Herring Road  
 Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: [REDACTED]

Email: [REDACTED]

Internet: [www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)



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**From:** [REDACTED] (Health) [mailto:[REDACTED]]

**Sent:** Thu, 30 November 2017 11:03 AM

**To:** [REDACTED]

[REDACTED] Crossley, Nick;  
 Nick [REDACTED]

**Subject:** RE: PACS Extract [SEC=UNCLASSIFIED]

Thanks [REDACTED]

The Service request file is OK as is, because it just has the FillerOrderNumber. The one row there is fine.

However, if you can create the additional rows in the Report file that will mean that each accession number in the requested procedure will be linked to a report record, even though it will be the same report for each of the generated accession numbers. For example:

Original accession number [REDACTED] with 3 Study UUIDs, and one report 'abc' that covers all 3 studies.

In the report file, it will be:

Modified: [REDACTED] UID 1 Report abc

[REDACTED] UID 2 Report abc

[REDACTED] UID 3 Report abc

Thanks

[REDACTED]

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: [REDACTED] | Mobile: [REDACTED] | Email: [REDACTED]

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**From:** [REDACTED] [mailto:[REDACTED]]

**Sent:** Thursday, 30 November 2017 12:51 AM

**To:** [REDACTED] (Health) <[REDACTED]>

**Cc:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health)

<[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]> Crossley, Nick

<[REDACTED]Crossley@act.gov.au>; [REDACTED] [REDACTED] <[REDACTED]>  
**Subject:** RE: PACS Extract [SEC=UNCLASSIFIED]

Hello [REDACTED]

Currently we are creating a record in the service, request and result files per each accession number. For multiple Study UID's per accession number, are you expecting an additional record on all 3 files? This is because the Filler order number and all the other information would stay the same.

Please find below answer to Sunitha's question

FillerOrderNumber mapped as acc\_itn + ord\_no + seq\_no, is this the same combination used as FillerOrderNumber in PACS as well?

Answer: No it is not the case on PACS. Accession number is the ID used between RIS and PACS and therefore should match. The combination was created for the purpose of the RIS extracts as Agfa expects a FillerOrderNumber.

Kind Regards,

[REDACTED]

Siemens Healthcare Pty Ltd  
 160 Herring Road  
 Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: [REDACTED]

Email: [REDACTED]

Internet: [www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)

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**From:** [REDACTED] [REDACTED] (Health) [mailto:[REDACTED]]

**Sent:** Wed, 29 November 2017 2:17 PM

**To:** [REDACTED]

**Cc:** [REDACTED] (Health); [REDACTED] Crossley, Nick; Nick [REDACTED] [REDACTED]

[REDACTED] (Health)

**Subject:** RE: PACS Extract [SEC=UNCLASSIFIED]

Yes, that should be OK for now.

[REDACTED] [REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: [REDACTED] | Mobile: [REDACTED] | Email: [REDACTED]

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**From:** [REDACTED] [REDACTED] [mailto:[REDACTED]]

**Sent:** Wednesday, 29 November 2017 1:58 PM

**To:** [REDACTED] [REDACTED] (Health) <[REDACTED]>

Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]@[REDACTED].com>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] <[REDACTED]@[REDACTED].act.gov.au>

**Subject:** RE: PACS Extract [SEC=UNCLASSIFIED]

Thank you [REDACTED]

I will pass along the information and will let you know.

If the outcome remains the same from our side, are you happy to keep things as is and use [REDACTED] process to massage the data?

Kind Regards,

[REDACTED]

**Siemens Healthcare Pty Ltd**  
160 Herring Road  
Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: [REDACTED]

Email: [REDACTED]

Internet: [www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)



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---

**From:** [REDACTED] (Health) [mailto:[REDACTED]]  
**Sent:** Wed, 29 November 2017 1:03 PM  
**To:** [REDACTED]  
**Cc:** [REDACTED] (Health); Crossley, Nick; Nick [REDACTED] (Health)  
**Subject:** FW: PACS Extract [SEC=UNCLASSIFIED]

[REDACTED]

[REDACTED] has done some work in this space (see below for her explanation) as part of our own investigations of the issue. While we have been working with an older copy of the database until we install the most recent copy you provided, if you restrict your extract to before July this year then what she has provided should allow you to match the rows and replace with her data.

Let us know if that option will work, otherwise just send the extract with duplicate accession number rows and [REDACTED] will look to massage it while she is doing other field transforms prior to sending it to Agfa.

Regards

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: | Mobile: [REDACTED] | Email: [REDACTED]  
 Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government  
 Level 10, Building 1, TCH, Garran ACT | PO Box 11, Woden ACT 2606 | [www.act.gov.au](http://www.act.gov.au)

**From:** [REDACTED] (Health)  
**Sent:** Wednesday, 29 November 2017 12:50 PM  
**To:** [REDACTED] (Health) <[REDACTED]>  
**Subject:** FW: PACS Extract [SEC=UNCLASSIFIED]

Hi [REDACTED]

I have worked out the sequencing for all accession numbers with multiple Studies.(production backup from July 2017)

Attached is a list of all such accession numbers and the associated Study\_UIDs.

I have used a '.' to separate the acc\_itn and the seqno, but will send through an updated list depending on the feedback from AGFA (AGFA yet to confirm the special character to be used as a separator).

Will this help, can we get this included in the next extract?

Regards,

[REDACTED] | IDIS Data Migration Analyst - UCPH Digital Solutions Program  
 Mobile: [REDACTED] | Email: [REDACTED]@act.gov.au

**From:** [REDACTED] [mailto:[REDACTED]]  
**Sent:** Wednesday, 29 November 2017 10:41 AM  
**To:** [REDACTED] (Health) <[REDACTED]>  
**Cc:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] <[REDACTED]>  
**Subject:** RE: PACS Extract [SEC=UNCLASSIFIED]

Hello [REDACTED]

I was advised that this can be done but adds a very high level of complexity from our side. This logic will not be applied in the next batch of extracts.

Please advise when you get further information from Agfa about this topic

Kind Regards,

**Siemens Healthcare Pty Ltd**  
 160 Herring Road  
 Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Internet: [www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)



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**From:** [REDACTED] (Health) [mailto:[REDACTED]]

**Sent:** Tue, 28 November 2017 4:51 PM

**To:** [REDACTED]

[REDACTED] (Health); Duggan, Mark (Health); [REDACTED] (Health); Crossley, Nick; Nick [REDACTED]

**Subject:** RE: PACS Extract [SEC=UNCLASSIFIED]

[REDACTED]

I have confirmed with Agfa that they do need the Study UID's to be in separate records where there are more than one Study UID for a given accession number. The preferred method of ensuring uniqueness of accession numbers is currently being confirmed by Agfa, but it is expected that it will be something like the following:

Original:

[REDACTED]  
[REDACTED]

Becomes:

[REDACTED]  
[REDACTED]

This will ensure that the unique accession numbers generated do not conflict with existing values. We have done a quick analysis of current data and an approach like this will not introduce issues.

I will confirm Agfa's preferred approach as soon as I get their feedback.

Regards

[REDACTED]

[REDACTED] | IDIS Delivery Manager - UCPH Digital Solutions Program

Phone: [REDACTED] | Mobile: [REDACTED] | Email: [REDACTED]

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**From:** [REDACTED] [mailto:[REDACTED]]

**Sent:** Tuesday, 28 November 2017 8:28 AM

**To:** [REDACTED] (Health) <[REDACTED]> [REDACTED] (Health)

<[REDACTED]@act.gov.au>

**Subject:** RE: PACS Extract [SEC=UNCLASSIFIED]

Hello [REDACTED] and [REDACTED]

I was advised by our headquarters that creating a separate record per Study UID is a major risk as the new accession numbers may already exist in the database. Preferred method would be to separate the Study UID by a delimiter of your choice ( , . - ) or to create a separate file for records containing multiple Study UID's. Can you please advise on how you want to proceed with this?

Kind Regards,

**Siemens Healthcare Pty Ltd**  
160 Herring Road  
Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009

Mobile: [REDACTED]

Email: [REDACTED]

Internet: [www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)



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**Heland, Rebecca (Health)**

---

**From:** [REDACTED] <[REDACTED]>  
**Sent:** Monday, 18 December 2017 11:21 AM  
**To:** Duggan, Mark (Health)  
**Cc:** [REDACTED] O'Halloran, Peter (Health); Cook, Sandra (Health)  
**Subject:** Re: Migration meeting

**Importance:** High

Hi Mark,

Could I please request that this information be sent through ASAP. We were expecting it last Thursday as committed. It will be difficult to have a meaningful conversation on this topic tomorrow if AGFA are not given visibility into the Agenda and Discussion points well prior to the executive meeting tomorrow.

Kind Regards,

[REDACTED]  
 [REDACTED]  
 M [REDACTED]

[REDACTED] Australia Pty Ltd, 14 Marlow Road, Keswick, South Australia 5035  
<http://www.agfahealthcare.com>  
[http://blog.\[REDACTED\].com](http://blog.[REDACTED].com)

Click on link to read important disclaimer: <http://www.agfahealthcare.com/maildisclaimer>

From: "Duggan, Mark (Health)" <Mark.Duggan@act.gov.au>  
 To: [REDACTED]  
 Cc: "O'Halloran, Peter (Health)" <Peter.O'Halloran@act.gov.au>, [REDACTED] "Cook, Sandra (Health)" <Sandra.Cook@act.gov.au>  
 Date: 15/12/2017 11:34 AM  
 Subject: Re: Migration meeting

Being finalised [REDACTED] will have to you by end of day

Mark Duggan  
 Acting Manager Medical Imaging  
 Mobile: [REDACTED]

Sent from my iPhone

On 15 Dec 2017, at 11:46 am, [REDACTED] <[REDACTED]> wrote:

Hi Peter,

I am just following up our conversation on Wednesday afternoon regarding ACT Health's concerns relating to the Migration component of the current project. I was expecting an email from your team yesterday detailing the specific concerns and an Agenda of discussion points for our next Executive Management meeting next week.

Could you please let me know if we can expect this today?

Kind Regards,

[REDACTED]  
[REDACTED]  
[REDACTED] Australia Pty Ltd, 14 Marlow Road, Keswick, South Australia 5035  
<http://www.agfahealthcare.com>  
<http://blog.agfahealthcare.com>

---

<mime-attachment.jpg>

Click on link to read important disclaimer: <http://www.agfahealthcare.com/maildisclaimer>

From: "Duggan, Mark (Health)" <Mark.Duggan@act.gov.au>  
To: [REDACTED]  
Cc: [REDACTED] "O'Halloran, Peter (Health)" <Peter.O'Halloran@act.gov.au>, "Cook, Sandra (Health)" <Sandra.Cook@act.gov.au>  
Date: 13/12/2017 10:11 AM  
Subject: Re: Migration meeting

---

Dear [REDACTED]

ACT Health have concerns with the progress, responsibility and management of data migration into the AGFA system. Please note that this is not a technical discussion.

Kind Regards,

Mark.

Mark Duggan  
Acting Manager Medical Imaging  
Mobile: [REDACTED]

Sent from my iPhone

On 13 Dec 2017, at 10:05 am, [REDACTED] <[REDACTED]> wrote:

Hi Mark.

I have recently accepted Peter's meeting request for this afternoon to discuss Data Migration. Could you please send me an

agenda for this call.

Kind Regards,

[Redacted signature]

[Redacted] Australia Pty Ltd, 14 Marlow Road, Keswick, South Australia 5035  
<http://www.agfahealthcare.com>  
<http://blog.agfahealthcare.com>

---

<mime-attachment.jpg>

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-----[attachment "ATT00001.jpg" deleted by [Redacted]  
[Redacted] AWWQG/AGFA] [attachment "ATT00001.jpg" deleted by [Redacted] AWWQG/AGFA]  
[attachment "ATT00002.jpg" deleted by [Redacted] AWWQG/AGFA]

**Heland, Rebecca (Health)**

---

**From:** [REDACTED] (Health)  
**Sent:** Monday, 18 December 2017 10:52 AM  
**To:** [REDACTED]  
**Cc:** [REDACTED] (Health); Duggan, Mark (Health); [REDACTED] Crossley, Nick; [REDACTED] (Health); [REDACTED] (Health)  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

**Importance:** High

Thank You [REDACTED] and [REDACTED]

We look forward in seeing the extracts and mapping.

Quick question – any updates on the accession and csv format from last week.

Many Thanks.

Warm Regards,  
 [REDACTED]

---

**From:** [REDACTED] [mailto:[REDACTED]]  
**Sent:** Monday, 18 December 2017 10:45 AM  
**To:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED]  
**Cc:** [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>; [REDACTED] <[REDACTED]> Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi [REDACTED]

Good news, we received new extracts over the weekend for both RIS and PACS. [REDACTED] is currently triaging and will end through today.

I also will be able to deliver the mapping document for RIS today that I promised for this Wednesday.

Best regards  
 [REDACTED]

---

**From:** [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]  
**Sent:** Monday, 18 December 2017 9:30 AM  
**To:** [REDACTED]  
**Cc:** [REDACTED] (Health); Duggan, Mark (Health); [REDACTED] Crossley, Nick; [REDACTED] (Health); [REDACTED] (Health)  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]  
**Importance:** High

Good Morning Gents.

Any updates from our conversations and minutes from last week?

Warm Regards,  
 [REDACTED]

**From:** [REDACTED] [REDACTED] (Health)  
**Sent:** Friday, 15 December 2017 12:20 PM  
**To:** [REDACTED] [REDACTED] <[REDACTED]> Crossley, Nick <Nick.Crossley@act.gov.au>;  
 [REDACTED] [REDACTED] <[REDACTED]> [REDACTED] [REDACTED] (Health)  
 <[REDACTED]@act.gov.au>; [REDACTED] [REDACTED] (Health) <[REDACTED]>  
**Cc:** [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>;  
 [REDACTED] [REDACTED] <[REDACTED]>  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]  
**Importance:** High

Hi [REDACTED]

Thank you for your quick response!

I have highlighted my question in red.

Warm Regards,  
 [REDACTED]

**From:** [REDACTED] [REDACTED] [mailto:[REDACTED]]  
**Sent:** Friday, 15 December 2017 11:05 AM  
**To:** [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] [REDACTED]  
 <[REDACTED]> [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED]  
 [REDACTED] (Health) <[REDACTED]>  
**Cc:** [REDACTED] [REDACTED] (Health) <[REDACTED]@act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>;  
 [REDACTED] [REDACTED] <[REDACTED]>  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17 [SEC=UNOFFICIAL]

Hi All

Please find below amended minutes as per feedback from [REDACTED]

I have also included updates for the items flagged for today in **brown**.

#### 1. RIS/PACS Test Extract

- a. New extract sent by Siemens 8<sup>th</sup> December
- b. [REDACTED] sent feedback 13<sup>th</sup> December
- c. [REDACTED] stepped through the questions relating to the RIS extract in her feedback
- d. [REDACTED] stepped through the questions relating to the PACS extract in her feedback
- e. **ACTION** – [REDACTED] to send sample data for the topics discussed in c) and d) above by **COB 13<sup>th</sup> December**.  
**Complete**
- f. **ACTION** – Siemens to get clarification on all topics and confirm date revised extracts will be delivered.  
**Target – 15<sup>th</sup> December**
  - i. **GM** – Clarifications are in progress between [REDACTED] We will deliver updated extracts no later than **Wednesday 20<sup>th</sup> December**.

PR – thank you. Due to Christmas holiday, we will need to have extracts the earliest the possible by Monday 18th. As we officially shut down on Thursday, and [REDACTED] will need time to analyse, transform, digest the information and forward to AGFA and loaded on Dev by the 22<sup>nd</sup> Dec 2017.

**ACTION** – Siemens to confirm delivery date of mapping documentation as per SoW. **Target – 15<sup>th</sup> December**

ii. GM – Mapping document to be delivered by Wednesday 20<sup>th</sup> December.

PR – Excellent!

#### Duplicate Accession Number Issue

g. [REDACTED] updated team on [REDACTED] questions from last meeting regarding transformation of accession numbers ID to make unique

h. [REDACTED] highlighted data transformations are out of scope as per the SoW

i. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by 15<sup>th</sup> December.

i. GM – Our data migration team are uncomfortable with changing the accession number. Reason being is that this is the unique number that links to the report. This number is created by the RIS and is then sent on to downstream systems (i.e. PACS, HIS) and is referred to on Radiology Report that may be with a patient. I want to find a solution for you here. Could we have a technical discussion with Agfa to try and find a path forward?

PR – We understand why Siemens would be uncomfortable, unfortunately, this is the only approach we have in having Siemens modify accession numbers we have and we have discussed this with AGFA. The modified accession number and approach to deal with related image migration, has been discussed previously with AGFA. They are aware of the work involved. Thank You.

[REDACTED] to escalate to [REDACTED] if Siemens unable to make this modification as per SoW)

#### 2. PACS Test System

a. [REDACTED] confirmed that to create a Test PACS system, we require a VM with an oracle license. Then the back-up could be important into the VM.

b. **ACTION** – Siemens to provide a quote to create a Test PACS VM including Professional Services and an Oracle license. **Target – Wednesday 20<sup>th</sup> December**

c. **ACTION** – [REDACTED] to confirm a storage location to store the attachments. **Target – Wednesday 20<sup>th</sup> December**

PR – Target is for 2<sup>nd</sup> of January 2018 as the samples will be delivered by the 3<sup>rd</sup> of January 2018.

d. [REDACTED] requested in interim, whether an export of the tables used in the PACS migrations was possible to a CSV.

e. **ACTION** – [REDACTED] to confirm whether CSV exports of tables used in PACS extract is possible by 15<sup>th</sup> December.

i. GM – This is possible but quite a bit of work involved from our side to make happen. There would also be a limitation with Excel when opening the CSV due to size of the tables so you won't be able to work with it in Excel. The best and fastest option is to go with the



██████████ will be providing examples/samples for ██████████ today from our conversations this afternoon.

Have a lovely day mate.

Warm Regards,

---

**From:** ██████████ ██████████ [mailto:██████████@██████████.act.gov.au]  
**Sent:** Wednesday, 13 December 2017 4:05 PM  
**To:** Crossley, Nick <Nick.Crossley@act.gov.au>; ██████████ ██████████ <██████████@██████████.act.gov.au>; ██████████ ██████████ (Health) <██████████@██████████.act.gov.au>; ██████████ ██████████ (Health) <██████████@██████████.act.gov.au>; ██████████ ██████████ (Health) <██████████@██████████.act.gov.au>  
**Cc:** ██████████ ██████████ (Health) <██████████@██████████.act.gov.au>; Duggan, Mark (Health) <Mark.Duggan@act.gov.au>  
**Subject:** NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 13/12/17

Hi All

Minutes and actions from today's meeting. Please let me know if any amendments.

### 1. RIS/PACS Test Extract

- a. New extract sent by Siemens 8<sup>th</sup> December
- b. ██████████ sent feedback 13<sup>th</sup> December
- c. ██████████ stepped through the questions relating to the RIS extract in her feedback
- d. ██████████ stepped through the questions relating to the PACS extract in her feedback

**ACTION** – ██████████ to send sample data for the topics discussed in c) and d) above by **COB 13<sup>th</sup> December**.  
**ACTION** – Siemens to get clarification on all topics. **Target – 15<sup>th</sup> December**

### 2. Duplicate Accession Number Issue

- e. ██████████ updated team on ██████████ questions from last meeting regarding transformation of accession numbers ID to make unique
- f. ██████████ highlighted data transformations are out of scope as per the SoW
- g. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by **15<sup>th</sup> December**.

(██████████ to escalate to ██████████ if Siemens unable to make this modification as per SoW)

### 3. PACS Test System

- h. ██████████ confirmed an export of oracle DB to single file is possible. For this to occur the production database would need to be taken down.
- i. ██████████ confirmed that to create a Test PACS system, we require a VM with an oracle license. Then the back-up could be important into the VM.

- j. **ACTION** – Siemens to provide a quote to create a Test PACS VM including Professional Services and an Oracle license.  
**Target – Wednesday 20<sup>th</sup> December**
- k. **ACTION** – Nick to confirm a storage location to store the PACS Database Export. **Target – Wednesday 20<sup>th</sup> December**
- l. [REDACTED] requested in interim, whether an export of the tables used in the PACS migrations was possible to a CSV.
- m. **ACTION** – [REDACTED] to confirm whether CSV exports of tables used in PACS extract is possible by **15<sup>th</sup> December**.

#### 4. RIS Extract Part 2 - Attachments

- n. [REDACTED] requested an example of each type of attachment file (Interactive documents, protocol documents, clinical alerts & scanned images) a head of the target delivery date of 12<sup>th</sup> January as per SoW.
- o. **ACTION** – [REDACTED] to request and confirm an indicative date by **15<sup>th</sup> December**

#### 5. New Test Extract request

- p. [REDACTED] requested a new test extract for RIS (including attachments) and PACS to be delivered by 19<sup>th</sup> January which contains 20% of total data
- q. [REDACTED] confirmed it would be great if we can secure 2 months data from each year to make up the 20% extract
- r. **ACTION** – [REDACTED] to confirm whether 2 months of each year is viable option or suggest an alternative. **Target – Wednesday 20<sup>th</sup> December**
- s. **ACTION** – [REDACTED] to confirm whether this date is achievable. **Target – Wednesday 20<sup>th</sup> December**

Best regards

**From:** [REDACTED]  
**Sent:** Friday, 8 December 2017 1:21 PM  
**To:** 'Crossley, [REDACTED] (Health); [REDACTED] (Health); [REDACTED] (Health)  
**Cc:** [REDACTED] (Health); Duggan, Mark (Health)  
**Subject:** NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 6/12/17

Hi [REDACTED]

Please find attached my notes from the meeting on Wednesday.

Further to this, I can confirm as of today we are still awaiting an error free extract to be delivered for both RIS and PACS. We are hoping to have these to you early next week.

With regards to 3. below, I was asked to investigate whether we could modify the extract and modify the accession numbers so these are unique. As per the SoW, as Siemens cannot guarantee the quality of data if changes like this are made, we encourage this change to be made at the Agfa end. There was an out of scope topic in the SoW as per the below.

Execution of any data transformation during the ACT Health will be responsible for any transformation of data prior to extract process. loading into the Agfa system

In saying that, happy to discuss further though if this is not viable.

### Meeting Minutes – 6<sup>th</sup> December 2017

Attendees: [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

1. [REDACTED] will cover [REDACTED] whilst on leave so all correspondence to include both [REDACTED] and [REDACTED]
2. RIS/PACS Test Extract
  - a. [REDACTED] updated team on progress since last week
    - i. Test extract triaged by [REDACTED] Friday last week
    - ii. [REDACTED] errors found in both RIS and PACS extracts
    - iii. Received new PACS extract Monday, further issues found
    - iv. Received new RIS extract Tuesday, further issues found
    - v. Expect new extracts Thursday, if all OK can send through Friday (earliest)
  - b. Team discussed accuracy of extracts being an issue, and [REDACTED] seeing firsthand what [REDACTED] was facing with earlier extracts
  - c. [REDACTED] confirmed this is the most time consuming task of the process. Once test extract in place and accurate, further extracts will be easy to generate
  - d. Team acknowledged we need to ensure the extract is correct from the source, as opposed to modifying the extracts themselves to meet timelines.
  - e. [REDACTED] confirmed timeline of 12<sup>th</sup> Dec on track
  - f. [REDACTED] confirmed date of 12<sup>th</sup> Dec in SoW should have indicated a completion of the test migration as opposed to delivery of test extract
3. Duplicate Accession Number Issue
  - g. [REDACTED] asked whether Siemens can modify extract make accession numbers unique
  - h. [REDACTED] agreed to investigate
4. PACS Migration
  - i. [REDACTED] indicated SDC pilot proposal likely to proceed
  - j. Siemens will need to receive requests from the Agfa RIS to move studies in that order
  - k. SDC Pilot likely to be requested for Jan