

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

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**Heland, Rebecca (Health)**

**From:** Barrett, Scott (Health)  
**Sent:** Thursday, 18 January 2018 12:09 PM  
**To:** [REDACTED] (Health)  
**Cc:** [REDACTED] (Health); [REDACTED] (Health); Crossley, Nick; [REDACTED] (Health)  
**Subject:** FW: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

Hi All,

Please see Chris's email below regarding options for the data transfer.

Thanks

Scott

Scott Barrett | Manager

Direct Phone: 02 6174 8039 | Direct Email: [scott.barrett@act.gov.au](mailto:scott.barrett@act.gov.au)

Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: [DSD.DIS@act.gov.au](mailto:DSD.DIS@act.gov.au)

Technology Operations Branch | Digital Solutions Division | Health Directorate | ACT Government

Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | [act.gov.au](http://act.gov.au)

**From:** Pearce, Christopher (Health)  
**Sent:** Thursday, 18 January 2018 12:04 PM  
**To:** Barrett, Scott (Health) <[Scott.Barrett@act.gov.au](mailto:Scott.Barrett@act.gov.au)>  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

Hi Scott,

As discussed re: available disk space, the sdm2 location *syspart01* only has 152GB available after deleting files as per Siemens request/expectation.

Nowhere near the 300GB needed:

Filesystem	Size	Used	Avail	Use%	Mounted on
/dev/sda2	15G	4.0G	11G	29%	/
udev	64G	3.3M	64G	1%	/dev
tmpfs	64G	12K	64G	1%	/dev/shm
/dev/sda3	15G	648M	14G	5%	/var
/dev/sda5	20G	7.1G	12G	38%	/opt
/dev/sda6	218G	56G	152G	27%	/data/mnt/syspart01
tmpfs	4.0K	0	4.0K	0%	/dev/vx

Previously it was the 507GB copy of the RIS dB (Backup Copy DS1) this was stored to the RIS Esxi1 server not one of the PACS servers.

The Esxi1 server appears to have 850GB free on /vmfs/volumes/RIS-ESX1-local

Filesystem	Size	Used	Available	Use%	Mounted on
VMFS-\$	2.1T	1.6T	440.3G	79%	/vmfs/volumes/SystemDS1
VMFS-\$	1.1T	259.7G	850.6G	23%	/vmfs/volumes/RIS-ESX1-Local
VMFS-\$	599.9G	316.3G	283.5G	53%	/vmfs/volumes/BackupDS1
vfat	249.7M	196.1M	53.6M	79%	/vmfs/volumes/0a4d737b-271d910e-dff9-7ac35abc2e
vfat	249.7M	183.6M	66.2M	74%	/vmfs/volumes/e3b56776-b765ef92-04b0-6ab4153c9e
vfat	4.0G	33.7M	4.0G	1%	/vmfs/volumes/568e026c-5429d6d9-314d-288023a3e8
vfat	285.8M	208.1M	77.7M	73%	/vmfs/volumes/568e0267-25edab32-7a2d-288023a3e8

## Option 1:

Siemens store to Esxi server and we can copy files off it using WinSCP to USB drive again.

## Option2 :

If Option 1 not suitable, I have set up a shared drive using our 1TB USB drive on the Reporting workstation (TSIRSWS18).

The C: and F: drives of this workstation can be accessed from OPM1.

The USB drive (F:) has sufficient space, 553GB and another 45GB can be freed if required.

## OPM1:

Regards,

Chris

Chris Pearce | PACS Administrator

Direct Phone: 02 61747961 | Direct Email: [Christopher.Pearce@act.gov.au](mailto:Christopher.Pearce@act.gov.au)

Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: [DSD.DIS@act.gov.au](mailto:DSD.DIS@act.gov.au)

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**From:** Barrett, Scott (Health)

**Sent:** Thursday, 18 January 2018 8:59 AM

**To:** Pearce, Christopher (Health) <[Christopher.Pearce@act.gov.au](mailto:Christopher.Pearce@act.gov.au)>

**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

Sorry, one extra thing.

If you could give me an approximate on how much space in on there too that would be great.

Scott Barrett | Manager

Direct Phone: 02 6174 8039 | Direct Email: [scott.barrett@act.gov.au](mailto:scott.barrett@act.gov.au)

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**From:** Barrett, Scott (Health)

**Sent:** Thursday, 18 January 2018 8:41 AM

**To:** Pearce, Christopher (Health) <[Christopher.Pearce@act.gov.au](mailto:Christopher.Pearce@act.gov.au)>

**Subject:** FW: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

Hi Chris,

When you have a moment, please can you delete the old data dump in siesdm2 Linux server that Siemens placed there last year?

Thanks

Scott

Scott Barrett | Manager



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**From:** [REDACTED] [mailto:[REDACTED]]  
**Sent:** Wednesday, 17 January 2018 5:21 PM  
**To:** [REDACTED] (Health) <[REDACTED]>  
**Cc:** [REDACTED] <[REDACTED]>, [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]@act.gov.au>; Barrett, Scott (Health) <Scott.Barrett@act.gov.au>  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

Hello [REDACTED]

As explained before, these systems are handled by different teams. RIS Team does not mingle in PACS affairs and vice versa.

If files are not needed in the provided share, then I would expect the RISPACS team to clear them out. Also there is a danger that the wrong files may be deleted and therefore we want to avoid this at all cost.

Can I please ask you to liaise with the RISPACS Team and have them clear the space or provide a more suitable share.

We need these details as soon as possible.

Kind Regards,

[REDACTED]  
**Siemens Healthcare Pty Ltd**  
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 Macquarie Park NSW 2113

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**From:** [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]  
**Sent:** Wed, 17 January 2018 4:34 PM  
**To:** [REDACTED] Crossley, Nick; [REDACTED] (Health); Barrett, Scott (Health)  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

██████████

We received the following advice from the RISPACS team on the share space for the RIS extract (apart from the attachments – they still have to provide us with the drive location for that). If you clear any older extracts from the below directory they believe that there will be enough space.

The server location listed below should have the capacity for the RIS dump and it can then be moved to the portable HD. However, Siemens will need to delete the data in the folder from the previous PACS dump to make space.

Thanks

Scot

Scott Barrett | Manager  
 Direct Phone: 02 6174 8039 | Direct Email: [scott.barrett@act.gov.au](mailto:scott.barrett@act.gov.au)  
 Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: [DSD.DIS@act.gov.au](mailto:DSD.DIS@act.gov.au)  
 Technology Operations Branch | Digital Solutions Division | Health Directorate | ACT Government  
 Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | [act.gov.au](http://act.gov.au)

Hi Scott,

If this is for another db dump from Siemens PACS – same as before I would suggest. Siemens put it in this directory on the siesdm2 Linux server: and we copied to the USB HD:

/data/mnt/syspart01/

and we copied to the USB HD via Reporting workstation here.

Chris

Chris Pearce | PACS Administrator

Please check that you can access the share and let us know so we can organise something else if there is a problem.

██████████

██████████ | IDIS Delivery Manager - UCPH Digital Solutions Program  
 Phone: 02 6174 8768 | Mobile: ██████████ | Email: [Tony.██████████@act.gov.au](mailto:Tony.██████████@act.gov.au)  
 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:██████████@act.gov.au]  
 Sent: Wednesday, 17 January 2018 1:48 PM  
 To: ██████████ (Health) <██████████@act.gov.au>  
 Cc: ██████████ <██████████@act.gov.au> (Health)  
 <██████████@act.gov.au> (Health) <██████████@act.gov.au>; ██████████ (Health)  
 <██████████@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>  
 Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

Hello ██████████

Just to let you know that the PACS 20% delivery is now available. I have also attached a mapping document for the PACS to assist your team



Data is located on : SIEOPM1\d\$\backups\PACSExtract

Please have your team analyse the files and advise of any issues.

The RIS 20% delivery will be available later this week...most likely by the 20<sup>th</sup>.

Please note that without the share we cannot complete the 20% delivery due to the sheer amount of data, Can you please advise on the status of the share?

Kind Regards,

[Redacted signature]

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

Sent: Mon, 15 January 2018 3:24 PM

To: [Redacted]

RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

Hi [Redacted]

Thanks for the update.

Speak soon.

Warm Regards,

[Redacted signature]

From: [Redacted] [mailto:[Redacted]]

Sent: Monday, 15 January 2018 3:20 PM

To: [Redacted]

[Redacted]

<[REDACTED]act.gov.au>

**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

Hello [REDACTED]

Thank you for the update!

From our side, we are still on track to provide the data by end of week. As discussed, I am hoping that some data will be made available by the 19<sup>th</sup> and the bulk of data to be delivered by the 20<sup>th</sup>.

I will keep you posted throughout the week about any changes.

Kind Regards,

[REDACTED]

**Siemens Healthcare Pty Ltd**  
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**From:** [REDACTED] (Health) [mailto:[REDACTED]act.gov.au]

**Sent:** Mon, 15 January 2018 2:44 PM

**To:** [REDACTED]

[REDACTED]

**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

Good Morning Gents.

Hope you have had a nice weekend and welcome back [REDACTED]

Are we still on track for the 19<sup>th</sup> January?

Also, have an answer for you regarding shared location, we do have an external drive, and do have space availability and we will coordinate with you on exact location soon. Either [REDACTED] or I will get back to you on location path.

Many Thanks.

Warm Regards,

[REDACTED]



From: [REDACTED] (mailto:[REDACTED])  
 Sent: Thursday, 11 January 2018 2:19 PM  
 To: [REDACTED] (Health) <[REDACTED]@act.gov.au>  
 Cc: [REDACTED] (Health) <[REDACTED]@act.gov.au>; [REDACTED] (Health)  
 <[REDACTED]@act.gov.au>; [REDACTED] <[REDACTED]>  
 Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]

Hello [REDACTED]

The most important delivery is the 20% by end of next week. Both [REDACTED] and [REDACTED] are happy with the current extracts. Therefore as we stand, I believe we are on track to meet the 20% delivery by the 20<sup>th</sup> Jan.

Please note that if further changes are required, this could potentially delay the delivery date.

I have provided feedback to my team in regards to the Gap Analysis document and I am hoping to have an updated version for you next week.

On the other hand, Can I please ask you for an ETA about the share location necessary for the 20% delivery? We do not want to use local resources as this could have a negative impact on the current operational systems.

Kind Regards,

[REDACTED]  
 Siemens Healthcare Pty Ltd  
 160 Herring Road  
 Macquarie Park NSW 2113

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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, 11 January 2018 1:36 PM  
 To: [REDACTED]  
 Cc: [REDACTED] (Health); [REDACTED] (Health)  
 Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18 [SEC=UNOFFICIAL]  
 Importance: High

Hi [REDACTED]

Hope you are going well mate. How are we tracking for next week deliverables?

Warm Regards,

From: [redacted] [mailto:[redacted]]  
 Sent: Wednesday, 10 January 2018 3:04 PM  
 To: [redacted] <[redacted]@act.gov.au> (Health)  
 <[redacted]@act.gov.au>; Crossley, Nick <Nick.Crossley@act.gov.au>; [redacted] (Health)  
 <[redacted]@act.gov.au>; [redacted] (Health) <[redacted]@act.gov.au> [redacted] (Health)  
 <[redacted]@act.gov.au>; [redacted] <[redacted]@act.gov.au>  
 Cc: Duggan, Mark (Health) <Mark.Duggan@act.gov.au>; [redacted] <[redacted]@act.gov.au>  
 [redacted].com>  
 Subject: RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 10/01/18

Hi All

Please see my Meeting Notes following our meeting today (in blue).

MEETING NOTES:

1. RIS/PACS Test Extract

- a. ME 10/01 - New RIS extracts, RIS PDF attachments, RIS scans delivered by Siemens on 09/01/18
- b. **ACTION** – Siemens to get clarification on all topics and confirm date revised extracts will be delivered.  
 Target – 15<sup>th</sup> December
  - i. GM 15/12 – Clarifications are in progress between [redacted] We will deliver updated extracts no later than Wednesday 20<sup>th</sup> December.
  - ii. PR 15/12 – 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.
  - iii. GM 20/12 – New extracts have been provided for both RIS and PACS on Monday 18<sup>th</sup> December
  - iv. 20/12 – Canberra team confirmed most data loaded well into the Agfa system. Canberra would like to better understand why something may not be in RIS but in PACS. [redacted] confirmed very difficult for Siemens to explain this and Canberra should leverage knowledge of their System Administrator whom are responsible for data in and out of RIS/PACS since go-live. ACT Health to discuss variations with RIS/PACS Administrators.
- c. **ACTION** – Siemens to confirm delivery date of mapping documentation as per SoW. Target – 15<sup>th</sup> December
  - i. GM 15/12 – Mapping document to be delivered by Wednesday 20<sup>th</sup> December.
  - ii. PR 15/12 – Excellent!
  - iii. GM 18/12 – Delivered Monday 18<sup>th</sup> December
  - iv. PR 15/12 – Excellent
  - v. PR 19/12 – 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?
  - vi. GM 19/12 – Can you provide some examples of what you think is missing? I am not familiar with the front end so wondering if you could provide examples of other fields that are not being migrated to the Agfa system that may be of use? As this is a subjective exercise of what is clinically important, if you have some examples from your side that will help.



- vii. GM 20/12 – [REDACTED] sent through feedback for Mapping File and Gap Analysis. I will feedback and request updated copies of both documents. Timing of these documents dependant on prioritisation against other deliverables.
- viii. 20/12 – Canberra team confirm this is priority #2, and asked us to target for delivery on 8<sup>th</sup> Jan. [REDACTED] confirmed a good source of information for the gap analysis is the original document he put together at the outset of the project. [REDACTED] highlighted that leveraging the System Administrators knowledge of the front-end would be a valuable source of information for any clinically relevant data.
- ix. ME 10/01 – Gap Analysis, DB Fields and Data Retention tool documents delivered on 10/01/2018
- x. TP 10/01 – [REDACTED] advised that GAP Analysis DB Fields file can be used as both mapping and Gap analysis document. Require and extra Mapping column highlighting fields mapped to Agfa. PB and SS to provide further feedback.
- xi. TP/SS 10/01 – [REDACTED] and [REDACTED] are happy with latest extracts and are confident with upcoming 20% test data upload. Do not envisage any changes to latest extracts. Advised not to include period of 01-01-2013 to 20-01-2013 in 20% delivery to avoid duplication
- xii. ME 10/01 – Advised that we will need confirmation ASAP about extracts to get ball rolling for the 20% delivery. Advised that delivery will happen on 20/01 if no changes are required.
- xiii. TP 10/01 – [REDACTED] advised to send deliverables as part of the 20% that are ready prior to 20/01/18
- xiv. ME 10/01 – Advised that I will bring this up with the team but cannot promise any deliveries before 20/01/18

## 2. Duplicate Accession Number Issue

- a. Siemens delivered new RIS extracts containing changes to the Accession Number on the Result file on 9<sup>th</sup> January 2018
- b. [REDACTED] provided feedback on the 10/01/18 advising that change to Accession number works
- c. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by 15<sup>th</sup> December.
  - i. GM 15/12 – 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 Radlology 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?
  - ii. PR 15/12 – 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.
  - iii. PB 19/12 - 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?
  - iv. GM 19/12 – As mentioned below, I may not know until the 2nd January. I would however expect days, not weeks. I just need to understand how to prioritise the tasks, whether this tasks precedent over the Part 2 Test migration scheduled for 12th Jan.

- v. GM – 20/12 – Overnight our Data Migration resource confirmed approximately 3 additional days effort to do this change and also indicated up to 2 weeks delay in delivery of remaining items in SoW. Canberra to prioritise which tasks our Data Migration resource should focus on from 2<sup>nd</sup> January.
- vi. 20/12 – Canberra confirmed that this change is priority #3 and asked us to deliver this with the 20% test data extract requested by 19<sup>th</sup> January. Siemens confirmed this timing is fine.
- vii. ME – Closed

### 3. 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**
  - i. GM 20/12 – Siemens has supplied the CSV DB export of key tables from DB as interim measure. Siemens unable to provide a quotation for an oracle license for a test server. As Imaging PACS is a legacy system, Siemens no longer have an arrangement in place with Oracle we can leverage for short term use license.
  - ii. 20/12 - All agreed to park this for now and use the CSV method for PACS DB. [REDACTED] confirmed we can supply refreshed CSV's for the 5 PACS tables upon request in place of the PACS back-ups mentioned in the SoW.
- c. **ACTION** – Nick to confirm a storage location to store the attachments. **Target – Wednesday 20<sup>th</sup> December**
  - i. PR 15/12 – 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.
- ii. ME 09/01 – Requested details of the share. Advised that this will be required for the 20% and final deliveries. Advised we need this ASAP
  - iii. NC 10/01 – [REDACTED] working on this
- 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 15/12 – 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 15/12 – 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.



iii. GM 20/12 – CSV extracts provided 19/11/17.

iv. 20/12 – [REDACTED] to finish loading CSV files. All looks OK so far and good solution.

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

g. ME 10/01 - Closed

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

a. [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.

b. ACTION – [REDACTED] to request and confirm an indicative date by 15<sup>th</sup> December.

i. GM 15/12 – I can confirm we can deliver this on 3<sup>rd</sup> January.

ii. PR 15/12 – [REDACTED] and [REDACTED] will be away until the 8<sup>th</sup> of January. This is fine.

iii. Following the meeting [REDACTED] requested whether this could be delivered by 20<sup>th</sup> December.

iv. 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?).

v. PR 15/12 - Fine

vi. GM 20/12 – Needs to be prioritised against the accession number change on 2) above.

vii. 20/12 – Canberra agreed this task is #1 priority, this will be commenced on 2<sup>nd</sup> January by Siemens resource when back from leave. This will be ready for Canberra team when back on 8<sup>th</sup> January.

viii. ME 09/01 – Siemens delivered attachment files on the 09/01/18.

ix. PB/SS 10/01 - [REDACTED] and [REDACTED] are happy with the delivered attachments. Non-Standard PDFs are not in scope for 20% delivery but want to know when will the work start and when can they expect delivery.

#### 5. New Test Extract request

a. [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

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

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

I. GM 20/12 – Needs to be prioritised against the accession number change on 2) above.

II. GM 20/12 – Priority # 3, will be delivered by 19<sup>th</sup> January. Part A is priority only for 19<sup>th</sup> January. This deliverable has been prioritised over the Part B – Attachments Test Extract due for 12<sup>th</sup> January in the SoW.

d. **ACTION** - Siemens to confirm new timing for delivery of the Part B – Attachments Test Extract by 8<sup>th</sup> January 2018.

e. ME 10/01 - Closed

#### 6. SDC trial

- a. Siemens confirmed that we need to know by Xmas if a SDC trial is required during January due to set-up tasks/prep.
- b. [REDACTED] confirmed PO is still in progress and with Mark.
- c. Canberra team confirmed to put on hold until further notice

#### 7. leave

- a. [REDACTED] back on 15<sup>th</sup> Jan

#### 8. Next meeting

- a. Wed 17<sup>th</sup> Jan

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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[REDACTED]  
 Sent: Wed, 20 December 2017 3:05 PM  
 To: [REDACTED] (Health); Crossley, Nick; [REDACTED]  
 Cc: Duggan, Mark (Health); [REDACTED]  
 Subject: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 20/12/17

Hi All

Please see my Meeting Notes following our meeting today (in purple).

Further to the notes/actions, we prioritised the deliverables for our RIS data migration resource upon return on 2<sup>nd</sup> Jan as follows:

1. Attachments Samples (3<sup>rd</sup> Jan)
2. Mapping Document & Gap Analysis (8<sup>th</sup> Jan)
3. Accession Number Change (on 19<sup>th</sup> Jan with 20% migration for RIS/PACS) – Part A
4. Test Data Extract - Part B – Attachments

s always, please let me know if any corrections.

#### MEETING NOTES:

##### 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 15/12 – Clarifications are in progress between [REDACTED] We will deliver updated extracts no later than Wednesday 20<sup>th</sup> December.
  - ii. PR 15/12 – 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.
  - iii. GM 20/12 – New extracts have been provided for both RIS and PACS on Monday 18<sup>th</sup> December
  - iv. 20/12 – Canberra team confirmed most data loaded well into the Agfa system. Canberra would like to better understand why something may not be in RIS but in PACS. [REDACTED] confirmed very difficult for Siemens to explain this and Canberra should leverage knowledge of their System Administrator whom are responsible for data in and out of RIS/PACS since go-live. ACT Health to discuss variations with RIS/PACS Administrators.
- g. **ACTION** – Siemens to confirm delivery date of mapping documentation as per SoW. **Target – 15<sup>th</sup> December**
- i. GM 15/12 – Mapping document to be delivered by Wednesday 20<sup>th</sup> December.
  - ii. PR 15/12 – Excellent!
  - iii. GM 18/12 – Delivered Monday 18<sup>th</sup> December
  - iv. PR 15/12 – Excellent
  - v. PR 19/12 – 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?
  - vi. GM 19/12 – Can you provide some examples of what you think is missing? I am not familiar with the front end so wondering if you could provide examples of other fields that are not being migrated to the Agfa system that may be of use? As this is a subjective exercise of what is clinically important, if you have some examples from your side that will help.
  - vii. GM 20/12 – [REDACTED] sent through feedback for Mapping File and Gap Analysis. I will feedback and request updated copies of both documents. Timing of these documents dependant on prioritisation against other deliverables.
  - viii. 20/12 – Canberra team confirm this is priority #2, and asked us to target for delivery on 8<sup>th</sup> Jan. [REDACTED] confirmed a good source of information for the gap analysis is the original document he put together at the outset of the project. [REDACTED] highlighted that leveraging the System Administrators knowledge of the front-end would be a valuable source of information for any clinically relevant data.

## 2. Duplicate Accession Number Issue

- a. [REDACTED] updated team on [REDACTED] questions from last meeting regarding transformation of accession numbers ID to make unique
  - b. [REDACTED] highlighted data transformations are out of scope as per the SoW
- c. **ACTION** - Siemens to verify position on *modifying Accession Numbers* to make unique for subsequent extracts by **15<sup>th</sup> December**.
- i. GM 15/12 – 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?
  - ii. PR 15/12 – 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.

- iii. PB 19/12 – 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?
- iv. GM 19/12 – As mentioned below, I may not know until the 2nd January. I would however expect days, not weeks. I just need to understand how to prioritise the tasks, whether this tasks precedent over the Part 2 Test migration scheduled for 12th Jan.
- v. GM – 20/12 – Overnight our Data Migration resource confirmed approximately 3 additional days effort to do this change and also indicated up to 2 weeks delay in delivery of remaining items in SoW. Canberra to prioritise which tasks our Data Migration resource should focus on from 2<sup>nd</sup> January.
- vi. 20/12 – Canberra confirmed that this change is priority #3 and asked us to deliver this with the 20% test data extract requested by 19<sup>th</sup> January. Siemens confirmed this timing is fine.

### 3. 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
  - i. GM 20/12 – Siemens has supplied the CSV DB export of key tables from DB as interim measure. Siemens unable to provide a quotation for an oracle license for a test server. As Imaging PACS is a legacy system, Siemens no longer have an arrangement in place with Oracle we can leverage for short term use license.
  - ii. 20/12 - All agreed to park this for now and use the CSV method for PACS DB. [redacted] confirmed we can supply refreshed CSV's for the 5 PACS tables upon request in place of the PACS back-ups mentioned in the SoW.
- c. **ACTION** – [redacted] to confirm a storage location to store the attachments. Target – Wednesday 20<sup>th</sup> December
  - i. PR 15/12 – 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 15/12 – 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 15/12 – 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.
- iii. GM 20/12 – CSV extracts provided 19/11/17.
- iv. 20/12 – ██████ to finish loading CSV files. All looks OK so far and good solution.

#### 4. 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 15/12 – I can confirm we can deliver this on 3<sup>rd</sup> January.
  - ii. PR 15/12 – ██████ and ██████ will be away until the 8<sup>th</sup> of January. This is fine.
  - iii. Following the meeting ██████ requested whether this could be delivered by 20<sup>th</sup> December.
  - iv. 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?).
  - v. PR 15/12 - Fine
  - vi. GM 20/12 – Needs to be prioritised against the accession number change on 2) above.
  - vii. 20/12 – Canberra agreed this task is #1 priority, this will be commenced on 2<sup>nd</sup> January by Siemens resource when back from leave. This will be ready for Canberra team when back on 8<sup>th</sup> January.

#### 5. 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**
  - i. GM 20/12 – This is viable.
  - ii. GM 20/12 – Closed.



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

i. GM 20/12 – Needs to be prioritised against the accession number change on 2) above.

ii. GM 20/12 – Priority # 3, will be delivered by 19<sup>th</sup> January. Part A is priority only for 19<sup>th</sup> January. This deliverable has been prioritised over the Part B – Attachments Test Extract due for 12<sup>th</sup> January in the SoW.

e. ACTION - Siemens to confirm new timing for delivery of the Part B – Attachments Test Extract by 8<sup>th</sup> January 2018.

#### 6. SDC trial

a. Siemens confirmed that we need to know by Xmas if a SDC trial is required during January due to set-up tasks/prep.

b. [REDACTED] confirmed PO is still in progress and with Mark.

c. Canberra team confirmed to put on hold until further notice

#### 7. Xmas period leave

a. [REDACTED] back on 2<sup>nd</sup> Jan

b. Canberra team -- back on 8<sup>th</sup> Jan.

c. [REDACTED] -- back on 15<sup>th</sup> Jan

#### 8. Next meeting

a. Wed 10<sup>th</sup> Jan

Best regards

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

Sent: Friday, 15 December 2017 12:20 PM

To: [REDACTED] Crossley, Nick; [REDACTED] [REDACTED] (Health); [REDACTED] (Health)

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

██████ 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. [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
- b. [REDACTED] confirmed it would be great if we can secure 2 months data from each year to make up the 20% extract
- c. **ACTION** – [REDACTED] 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.

Warm Regards,

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

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

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

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

[REDACTED] <[REDACTED]@act.gov.au> [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
- g. **ACTION** - Siemens to verify position on modifying Accession Numbers to make unique for subsequent extracts by 15<sup>th</sup> December.

(Junitha 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** – [REDACTED] 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, Nick'; [REDACTED]

[REDACTED] 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.

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

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]

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. Greg 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]

[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, 11 December 2017 2:42 PM  
**To:** [REDACTED] (Health); Crossley, Nick; [REDACTED] (Health); [REDACTED] (Health); [REDACTED] (Health)  
**Cc:** Duggan, Mark (Health); Cook, Sandra (Health); [REDACTED] [REDACTED] [REDACTED]  
**Subject:** RE: NOTES: Siemens Telecon - RIS Data Analysis - Canberra Hospital - 6/12/17

Hi [REDACTED]

The new RIS-PACS extracts were sent through on Friday shortly after my email below. [REDACTED] has verified these locally so all should be in check. We look forward to your feedback on the testing.

As far as the documentation is concerned, the formal documents are currently being finalised. I know [REDACTED] were keen to receive this but asked us to focus on the extracts as priority. In the interim I have included the key information you require from this analysis. This will enable you to proceed with your QA of the test extracts, and also begin discussing fields that may be of interest that are not included in the Agfa migration documents. Our comprehensive documentation will follow.

#### Data Mapping Documentation:

The following tables in SLR were used to extract the information populated in the Agfa scripts.

- Patient
- Pat\_name
- Pat\_demo
- Pat\_info
- Activity
- Activity\_info
- Activity\_usr\_flds
- Activity\_study
- Document\_xref
- Arch\_doc
- Visit\_activity
- Doctor
- Doctor\_entity
- Item
- Dicom\_modality\_item
- Users
- Scan\_image
- Scan\_image\_detail
- Hosp

This should be helpful with your QA in the interim given you have a copy of the SLR database.

#### 1. Gap Analysis Documentation

Gap Analysis document was to list all clinically relevant database fields that have not been mapped to an equivalent field in the Agfa migration file specification.

Our analysis has highlighted the following fields:

- Because of only sending doctors with a doctor entity value, we may be missing other doctors that have created orders or have done work at the site.
- Cancelled exams? This was not discussed clearly. [REDACTED]
- Patient class





██████████  
██████████ | Project Director - Integrated Diagnostic Imaging Solution Project  
Phone: 02 6174 8729 | Mobile: ██████████ | E-Mail : ██████████@act.gov.au  
Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government  
Building 1, Lv 10 Canberra Hospital, Garran ACT | PO Box 11, WODEN ACT 2606 | [www.act.gov.au](http://www.act.gov.au)

From: ██████████ [mailto:██████████]  
Sent: Friday, 8 December 2017 1:21 PM  
To: Crossley, Nick <Nick.Crossley@act.gov.au>; ██████████ <██████████@act.gov.au>  
██████████ (Health) <██████████@act.gov.au>; ██████████ (Health) <██████████@act.gov.au>  
██████████ <██████████@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 - 6/12/17

Hi ██████████

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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.

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

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

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1. ██████████ will cover ██████████ whilst on leave so all correspondence to include both ██████████ and ██████████
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d. Team acknowledged we need to ensure the extract is correct from the source, as opposed to modifying the extracts themselves to meet timelines.

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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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 Mobile: [REDACTED]  
 Work: +61 (0)3 9721 7507  
 mailto:[REDACTED]  
[www.healthcare.siemens.com.au](http://www.healthcare.siemens.com.au)



-----Original Appointment-----

**From:** Crossley, Nick [mailto:Nick.Crossley@act.gov.au]

**Sent:** Thursday, 12 October 2017 4:43 PM

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

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

**Subject:** Siemens Telecon - RIS Data Analysis - Canberra Hospital

**/when:** Occurs every Wednesday effective 18/10/2017 until 20/12/2017 from 2:00 PM to 3:00 PM AUS Eastern Standard Time.

**Where:** WebEx - Telcon (see below)

\*\*\*DO NOT DELETE OR CHANGE ANY OF THE TEXT BELOW THIS LINE\*\*\*

Nick Crossley has scheduled this WebEx meeting.

Siemens Telecon - RIS Data Analysis - Canberra Hospital

Host: [REDACTED] Crossley

When it's time, start or join the WebEx meeting from here:

<https://webex-client.dpa.act.gov.au/orion/joinmeeting.do?MK=998017969>

#### Access Information

Meeting Number: 998 017 969

Meeting Password: This meeting does not require a password.

#### Audio Connection

74720 (Internal (ACT Government))

02 62074720 (National)

+612 62074720 (International)

Access Code:

998 017 969

Hosts, need your host access code or key? Go to the meeting information page:

<https://webex-client.dpa.act.gov.au/orion/meeting/meetingInfo?MeetingKey=998017969>



Delivering the power of collaboration  
The webex-client.dpa.act.gov.au team

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**Heland, Rebecca (Health)**

---

**From:** Crossley, Nick  
**Sent:** Thursday, 16 November 2017 6:49 PM  
**To:** [REDACTED] (Health); [REDACTED] (Health)  
**Cc:** [REDACTED] (Health)  
**Subject:** RE: UCPH Digital Solutions Program - SoW Siemens PACS Transition Out v0.03 [SEC=UNCLASSIFIED]

Hi [REDACTED]

I am curious if Siemens would be charging us for this infrastructure instance, (operating system\licences, virtual server) this is important to know as that as = \$\$\$ (below screenshot)

I am yet convinced that Siemens are the preferred option. For me, Agfa are contractually engaged to do (so no cost)

Agfa have greater control on the data and importation into AHEI. If there are issues, it will be the responsibility of Agfa to resolve. As mentioned, if Siemens are to do and there are issues, Agfa will be hands off as they weren't responsible for the migration works.

Siemens have mentioned that performance\speed of the migration is superior to Agfa's approach, though for me that isn't everything. Quality, validation and greater control of the migration is more important.

Tony, what do you think?

[REDACTED] we agreed to have a telcon with Agfa and Siemens (as discussed with Siemens y'day, with both parties on Weds 22<sup>nd</sup> Nov @ 6pm (our time) - can you setup a meeting?

Regards  
 [REDACTED]

## SDC HW and OS Requirements

The SDC controller has the following minimal requirements on the virtual image HW:

- CPU: Quad-Core CPU
- RAM: 32 GB
- HDD: 2 TB for OS, system data & log files
- Additional 10 TB storage for GE / Infinitt data caching

Virtualization is preferred (e.g. ESX, VMWare)

The OS is a Ubuntu version 16.04.2

**From:** [REDACTED] [mailto:[REDACTED]]  
**Sent:** Friday, 3 November 2017 1:20 PM  
**To:** [REDACTED] (Health) <[REDACTED]@act.gov.au>  
**Cc:** Crossley, Nick <Nick.Crossley@act.gov.au>; [REDACTED] (Health) <[REDACTED]>

<[REDACTED]>  
**Subject:** RE: UCPH Digital Solutions Program - SoW Siemens PACS Transition Out v0.03 [SEC=UNCLASSIFIED]

Hi [REDACTED]

Please find attached the slides referred below for option 2.

Best regards

---

**From:** [REDACTED] (HC APC AUS SV-CS OP)

**Sent:** Friday, 3 November 2017 1:11 PM

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

**Cc:** 'Crossley, Nick'; [REDACTED] (Health); [REDACTED] (HC APC AUS DI)

**Subject:** FW: UCPH Digital Solutions Program - SoW Siemens PACS Transition Out v0.03 [SEC=UNCLASSIFIED]

Hi [REDACTED]

I spoke with my PACS Data Migration Experts last night regarding the Canberra PACS migration.

Basically we have two options. Option 1 is the approach we have been discussing and I have included some info on how we normally handle this. Option 2 is our recommended approach. Details as follows.

**Option 1: PACS Database Extracts**

- Siemens will provide 3 PACS database extracts to Agfa using the specifications in the Agfa SoW. (1 initial DB extract, 1 extract 2 weeks before Go Live and 1 extract at Go Live date.)
- Agfa will import the extracts and migrate the data using a DICOM C-MOVE (with AMT tool).
- Siemens will support with setting up the DICOM nodes in syngo Imaging for the migration
- No additional support for Agfa in scope of this option (e.g. error handling, syngo Imaging troubleshooting, Purging studies from PACS cache...)

**Option 2: Smart Data Conversion (SDC) Migration - RECOMMENDED**

- Siemens will drive the migration to Agfa End2End using SDC controller. Statement of work for that attached. I also have some slides with workflow diagram I will transfer to you.

Our team have a very mature and robust approach for migrating data from Syngo.Imaging given it is a legacy product. Hence we strongly suggest you consider option 2 for the following reasons:

- Migration will be performed directly from the syngo Imaging Centera archive – syngo Imaging application won't be touched with SDC (Agfa will use a DICOM C-MOVE approach which might slow down or even crash the application)
- Performance with SDC up to 1 TB per day, with standard DICOM connection is usually < 100GB per day. So migration will run very long with option 1.
- Syngo Imaging STS Cache won't be filled with old priors during migration (that would be stored there after DICOM C-MOVE is triggered by Agfa)
- Syngo Imaging monitoring and throttling of migration
- Daily sync for new incoming studies VS syngo Imaging database
- Comparison between RIS orders and PACS examinations during migration
- Handling of obsolete / deleted objects in syngo Imaging
- Verification on patient / study / series and image level on the fly
- Weekly reporting and statistics

Can you please consider these options and review the attached information. I can then work towards a quotation once you have decided which way to go. If option 2, we can incorporate the content of the attached SoW into the one you have written for Canberra.



Best regards

[REDACTED]

**From:** [REDACTED] (Health) [mailto:[REDACTED]@act.gov.au]  
**Sent:** Wednesday, 1 November 2017 9:03 AM  
**To:** [REDACTED] (HC APC AUS SV-CS OP)  
**Cc:** Crossley, Nick; [REDACTED] (Health); Duggan, Mark (Health); Norton, Sarah (Health)  
**Subject:** UCPH Digital Solutions Program - SoW Siemens PACS Transition Out v0.03 [SEC=UNCLASSIFIED]  
**Importance:** High

Good Morning [REDACTED]

Please find attached the statement of work (SoW) for the Siemens PACS transition out.

Can you please provide a quote, as discussed, against this SoW. Could I please have the quote back within 5 business days?

Once the quote is received we can adjust the current purchase order.

Thank you in advance,

[REDACTED]

[REDACTED] | Project Director - Integrated Diagnostic Imaging Solution Project  
Phone: 02 6174 8729 [REDACTED] | E-Mail: [REDACTED]@act.gov.au  
Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government  
Building 1, Lv 10 Canberra Hospital, Garran ACT | PO Box 11, WODEN ACT 2606 | [www.act.gov.au](http://www.act.gov.au)

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