

ENITS – Frequently Asked Questions

As of May 7, 2010

1. What unique identifier is used for the CT images?

Patient ID #, first name, last name and DOB will be used to ensure all patients can be uniquely identified in the system.

2. Who is responsible for pushing the CT images to the ENITS PACS?

The CT Technologist(s) operating the system will push the images. In some cases, an Emergency Head Protocol is being set-up to automatically push head scans to ENITS.

3. How does the referring clinician communicate to the responsible person that the image needs to be pushed to the ENITS PACS?

The physician ordering the scan of the patient's head should inform the CT Technologist that the image needs to be pushed to ENITS at the time of the request.

4. How does this process flow impact radiologists?

Minimal impact, however, CT Technologists will be responsible for pushing the image to the ENITS PACS.

5. How do neurosurgeons uniquely identify the relevant CT images?

Search the ENITS database using unique identifier(s) in #1. These unique identifiers will be provided to the neurosurgeons by CritiCall Ontario.

6. What are the privacy implications of each neurosurgeon having potential access to all the ENITS PAC images?

eHealth Ontario is currently finalizing the Privacy Impact Assessments (PIA) and Threat Risk Assessments (TRA) and preparing the ENITS agreements necessary to meet privacy requirements. We expect this work to be completed by the end of July 2010. If you have any questions about ENITS or the implementation process, please contact Iphigenia Mikroyiannakis, Implementation Lead, Ministry of Health and Long-Term Care at Iphigenia.Mikroyiannakis@ontario.ca or (416)327-8982.

7. Does the ENITS solution have the ability to expand to support services other than neurosurgery in the future?

While it is technically possible to extend remote CT viewing functionality to other specialties, the long term plan is to address these areas through the Provincial DI-r project.

8. How long will images be available on the ENITS Shared PACS?

Images will be removed from the ENITS Shared PACS system after 6 days.

9. How will on call Neurosurgeons be able to access the ENITS Shared PACS?

Access to ENITS is limited to on-call Neurosurgeons responding to a Neurosurgical consult request facilitated by CritiCall Ontario. In order to access the system, a one-time technical setup to install two browser add-ins (Java and ActiveX) is required. A high speed Internet connection is also required.

Once the setup is complete, on-call Neurosurgeons can login with their personal user account and details provided by CritiCall Ontario prior to consultation.

ENITS – Frequently Asked Questions

As of May 7, 2010

10. Will the ENITS Shared PACS support both MAC and PC users?

Yes. A MAC user is launched into a Windows terminal server session. Due to the nature of the software, performance on MAC will be considerably slower than on a PC.

11. Can I access the ENITS Shared PACS system from a connected mobile device, such as an iPhone or Blackberry?

No. These devices do not meet the specifications.

12. Can this system be used to share images outside of the CitiCall Ontario referral process?

No. To maintain the security of personal health information, the password for image retrieval is changed daily and only available through CitiCall Ontario.

13. Can CT Scans of C, T, or L-Spine images be pushed to the ENITS Shared PACS for remote consultation? What about MRI's?

The current scope of ENITS is limited to CT scans of the brain and only CT scanners are being connected to ENITS. The project does not include orthopaedic consults; however, if C, T or L-Spine images are necessary for the neurosurgeon consultation, it is possible to push these images upon request.

14. Can hospitals push images from their Advanced Workstation (AW's) rather than the CT's?

Yes. Where an AW is present, it may also be connected so hospitals have the option to push from either machine.

15. What speed of Internet connection is required to access the system remotely?

The system will require a high speed broadband Internet connection. Dial-up Internet connections are not supported.

16. Will there be instructions to upload all previous scans for comparison? For example, if a patient has been at a referring hospital for a period of time before being referred through CitiCall Ontario, will all of the scans taken at the hospital since the patient's admittance be pushed into the ENITS system?

Additional images could be pushed upon request as long as the images exist on the CT or AW.

17. Will all images be pushed? There is a concern that a scan may be taken, but a referral not requested until several hours later after the CT Technologist has left for the day.

It is recommended that all head CTs ordered by the Emergency Department be pushed into the system.

18. Will images be pushed from the ENITS system to the local PACs system at the destination hospital when a patient is transferred?

ENITS is an interim solution and this is not part of the current scope. PACS to PACS connection is being accomplished through the regional DI-r projects.

19. Can the login timeout be eliminated or made substantially longer so that images do not timeout?

The inactive session timeout has been set to 4 hours. A session may be left open and inactive for up to 4 hours, after which it will be automatically closed. If a patient is transferred to another hospital, a disk with images will be sent with the patient unless the neurosurgeon has access to the transferring hospital's PAC system.

ENITS – Frequently Asked Questions

As of May 7, 2010

20. A patient is being transferred from another Emergency Department for a head CT in an ENITS site. How will the DI Department know to push that image to ENITS?

It is likely that hospitals without CT services or with limited CT services will send patients to ENITS equipped sites so their patients have access to this standard of care. It is recommended that DI Departments push all head CT's originating from any Emergency Department.

21. Will the Neuroradiologist have access to ENITS?

At this time, providing Neuroradiologists with access to ENITS is beyond the scope of the project.

22. Will the Neurosurgery residents have access to ENITS?

Providing residents with access to ENITS is also beyond the scope of the project at this time. In cases where the neurosurgeon cannot be directly involved in the consultation, the workflow should continue outside of ENITS.

23. What images should be included in the CT scan?

Neurosurgeons like to see the entire study and most centres carry out a standard series of axial images of the head.

24. Is it possible to export images from ENITS?

While the ENITS Shared PACS system offers this feature, under no circumstances should images or data be exported to any other system from the user interface.

25. Who provides end user support of the ENITS system?

Neurosurgeons

Access to ENITS is restricted to on-call Neurosurgeons who are responding to a consult request from CritiCall Ontario. As such, any Neurosurgeon who is experiencing difficulty using ENITS may receive basic support (login instructions) from the CritiCall call agent facilitating the consult. For any issues beyond simple login difficulties, support can be obtained from the London Health Sciences Corp. IT helpdesk.

DI Dept

For DI departments that are experiencing problems pushing exams to ENITS, the London Health Sciences Corp. IT Helpdesk will provide support and escalation as required to resolve the problem.

LHSC Helpdesk Contact Info

The LHSC IT Helpdesk can be contacted via toll free support line at 1-877-465-7167 or locally at 519-685-8335.

Once connected to the support line, please:

Press 1 for current system status.

- If there are no system issues, press 0 to connect to the Helpdesk and state the following:

- You are calling about ENITS
- Your name
- Your location
- Description of the problem

ENITS – Frequently Asked Questions

As of May 7, 2010

26. What happens if the CT technologists have the wrong patient demographics on an exam?

If the CT technologist is not aware of the mistake, the images will not be available when the CritiCall call agent attempts to verify the image is on the system. The consult would continue without the image.

If the CT technologist is aware of the mistake, the CT technologist should resend the image with correct information so it can be retrieved.

27. How does the system update John Doe patients from the emergency departments?

In the case of John Doe patients, the MRN becomes the most important identifier. The MRN should be cross-referenced with the John Doe name to accurately retrieve images. If at some point the patient's real name becomes available, the new name and existing MRN should be connected and any new images that need to be pushed to ENITS should be identified using the MRN and patient name as per the usual process.

What ENITS is NOT

- A long term repository for images (images drop off the system regularly)
- A Diagnostic tool (it is used for CONSULT purposes ONLY)
- A long-term solution (it is an interim solution until the Provincial DI-r Project is complete)