




Regenstrief project assembles health information from different electronic medical records


August 18 2016

iPhone 6s - iPhone 6s / iOS 9.3 (13E230)

Carrier  6:54 PM 

localhost 

Plavix 75 mg Tablet



Take once daily with water






Last prescribed: Sat, April 23, 2016 5:49 pm

Used to: prevent heart attacks and strokes in persons after recent heart attacks, strokes or blood circulation disease. Also used with aspirin to treat new/worsening chest pain.

I am taking this med as prescribed:

Why don't you take this med?

- makes me sick
- old prescription
- too expensive
- other

Mockup of FHIR-enabled app from the Regenstrief Institute's Center for Biomedical Informatics. Credit: Regenstrief Institute and Indiana University

If you are rushed to a hospital in an emergency, is your complete medical record available to those caring for you? Will they know all medications you have been prescribed and whether you are taking them as directed? Does your primary care physician know your complete medical history?

According to clinician-informaticians of the Regenstrief Institute, the answer to these questions is almost always "no." Not having complete [health information](#) available often results in subpar care and can endanger patients. But how can we effectively assemble a patient's medical history, lab test results, medications and other information stored in various [electronic medical records](#) (EMRs) installed at different healthcare organizations?

To help solve this complex problem, the Regenstrief Center for Biomedical Informatics is pilot-testing a new, efficient method for compiling healthcare information electronically. Regenstrief has used this method, known as the Fast Healthcare Interoperability Standard (FHIR for short, pronounced "fire"), to merge data from individual electronic medical records with those stored in the Indiana Network for Patient Care (INPC), Indiana's common framework for [health information exchange](#).

"What we are working on is a first and could have a huge impact on patients whose health information is distributed across multiple electronic systems—probably the vast majority of the people in the

United States," said Titus Schleyer, D.M.D., Ph.D., a Regenstrief Institute investigator and Clem McDonald Professor of Biomedical Informatics at Indiana University School of Medicine. "Using FHIR, we can combine information about a specific patient stored in systems developed by different vendors and installed in different healthcare institutions. This brings us much closer to a 'lingua franca' for health information, so clinicians finally have complete information available about their patients.

"For example, imagine that you as a patient can use an "app" on your smart phone to reconcile the multiple lists of medications maintained by several care providers into one authoritative, current list. And then, you can bring that list to your colonoscopy screening appointment for review by your physician prior to the procedure. That is huge, which is why the federal government is also focusing attention on helping patients do that," emphasized Dr. Schleyer. "FHIR helps us create a secure, complete, accessible, and useful set of health information needed by clinicians and patients."

"FHIR enables an ecosystem of innovative apps, much like the iPhone and Android platforms did," said John Halamka, M.D., chief information officer of Beth Israel Deaconess Medical Center, chairman of the New England Healthcare Exchange Network and professor of medicine at Harvard Medical School. "The difference is that FHIR is truly cross-platform. It doesn't care what EHR or system is underneath it."

Regenstrief's Center for Biomedical Informatics is focused on the mission "better health through informatics." The center develops [health information technology](#) solutions to generate knowledge about health, disease and treatment; help clinicians make optimal decisions; empower patients; and inform healthcare policy. Areas of expertise include clinical applications, computer-based decision support, data mining,

advanced analytics, healthcare information standards and global health.

The center has developed and advanced one of the nation's first electronic medical record systems, one of the country's first computerized provider order entry systems, and a health information exchange which has made Indiana the most health-wired state in the country and a national model for health information exchange. These applications and tools are widely recognized for their roles in improving quality of care, efficiency of healthcare delivery, reducing medical errors, and enhancing patient safety.

Provided by Indiana University

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