

IHE[®] | EXPERIENCE
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eMedication in Switzerland

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1

Starting a medication

What is the name of this medication and what is it for?



2

Taking my medication

When should I take this medication and how much should I take each time?



3

Adding a medication

Can this medication interact with my other medications?



4

Reviewing my medications

Does a health professional check my medications regularly?



5

Stopping my medications

When should I stop each medication?



How can we support Patients and Healthcare Professionals?

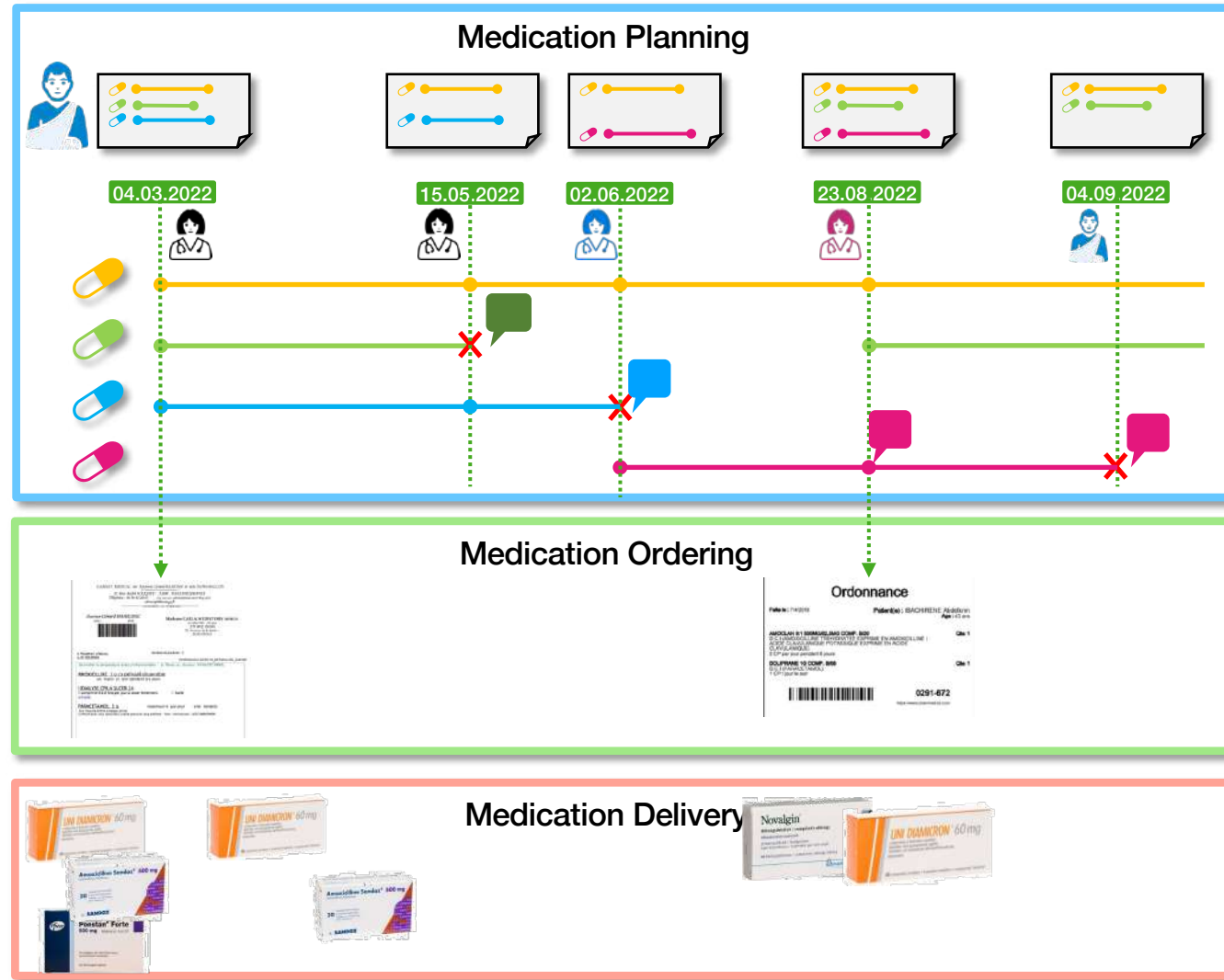
Planning and
Medication
Reconciliation



Prescription



Dispense

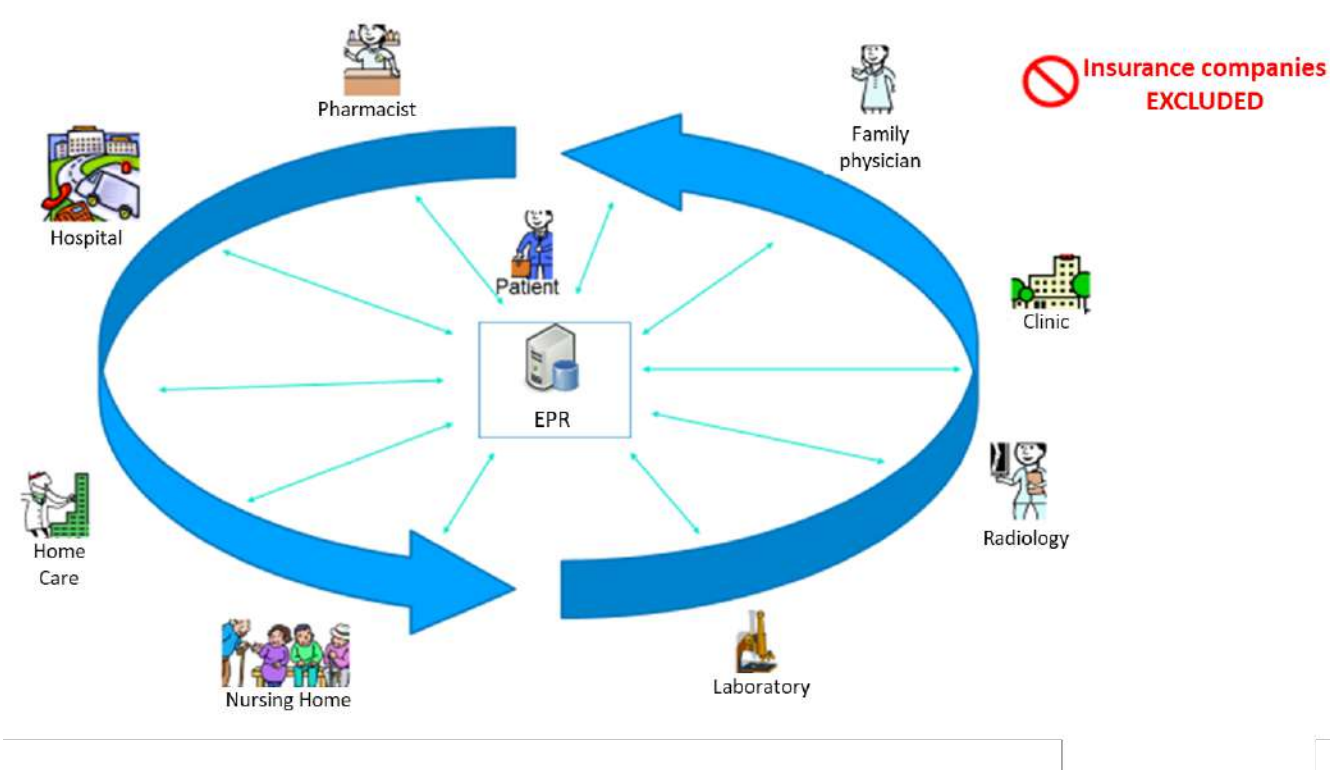


Clinical View

Logistical View

Key Objectives

- *Clinical* view of the medication the patient is taking
 - History of the medication
 - Logistic support (prescriptions, dispenses)
 - Documentation of administration when known
- *Aggregation* of multiple sources of information
- Input from contributing healthcare providers *AND* patient
 - Key information for medication anamnesis



- Patient-centric
- Multiple interconnected communities (affinity domains)
- Fostering strong integration of primary systems

Nation-wide

- Multiple Affinity Domains

Interoperability & Integrability

- Based on agreed international standards
 - As close as possible to EPR architecture
 - Compatibility with existing interfaces while looking at the future
 - Deep integration into primary systems
-
- One integrated solution for the stakeholders
 - Based on established and new generation interoperability profiles



Swiss EPR is XDS-Based

- XDS & PHARM (XDS-based) transactions for searching, retrieving and submitting documents

Move towards RESTful interfaces

- Equivalent MHD transactions for document access
- IHE PHARM CMPD profile extension to support MHD

IHE Pharmacy for content structuring

- Additional profile – Medication Treatment Plan
- Extensions (change proposals) to support common use cases

Swiss EPR is Document based

- IHE PHARM CDA based content profiles (CDA-CH-EMED)

Future in moving towards FHIR

- HL-7 FHIR-based resources embedded into documents (CH-EMED) – work in progress



eMedication Primary Aggregator

- Access: SOAP (XDS) and RESTful (MHD) transactions
- Content: CDA (CDA-CH-EMED) and FHIR (CH-EMED)

3rd Party supporting tools

- FHIR/CDA converter: MatchBox
- Integration toolkit: HUSKY - Health Usability Key



IHE Profiles & Methodology was a strong support

- For designing an interoperable solution
- For supporting additional use cases by extending profiles

Different technologies are not exclusive

- SOAP and RESTful for communication
- CDA and FHIR for the content

Questions?