Mission Statement: *The American Society for Radiology Oncology (ASTRO) has formed a multi-society Task Force to undertake an initiative to promote the Integration of the Healthcare Enterprise (IHE) – Radiation Oncology (RO), fostering seamless connectivity and integration of radiotherapy equipment and the patient health information systems.   The Task Force will include members from ASTRO, RSNA, American Association of Physicists in Medicine (AAPM), the American College of Radiology (ACR) and the Medical Imaging and Technology Alliance (MITA). In addition, members of the International community have also been invited to participate in IHE-RO. The IHE-RO Task Force, in close collaboration with radiotherapy product manufacturers, will develop appropriate integration profiles for radiation therapy and setup a demonstration of seamless communication among the full array of radiotherapy products.*

IHE-RO HIS Subcommittee	
In Attendance	
Rishabh Kapoor	Neil Aitken
Antonio Correia	
Ulrich Busch	
Rickard Holmberg	
ASTRO Staff: Crystal Carter	

If you were on the call and not mentioned above please email Crystal Carter (crystal.carter@astro.org) to be added to the list.

I.   Introductions
   a. Rishabh Kapoor, VA Hospitals, would like PT demographics, treatment data,
   b. Ulrich Busch, Varian Medical Systems, IHE-RO member and DICOM Chairman, Radiotherapy side, Interfacing is not my specialty but feels it's important
   c. <I didn't catch the name>, Varian Medical Systems, Product manager, Works with products HIS system, Integration with HIS systems and EMR systems
   d. Antonio Correia, Varian Medical System, Senior architect, Operability requirements, Treatment summary integration between systems and EMR
   e. Crystal Carter, ASTRO, IHE-RO Secretariat, Crystal.Carter@astro.org or 703-839-7378
II.   Review the use case on the IHE-RO wiki page:
   a. http://wiki.ihe.net/index.php?title=Radiation_Oncology_Workflow_Exchange_with_HIS
      i. Description which Sam Brain put together and Rishabh has refined
      ii. Looking for 3 types of interfaces
         1. Patient Registration
         2. Demographic
         3. Billing information

         4. Scheduling and treatment summary
- iii. How it should work
    1. Lots of gaps and not sure what to do when discussed years ago
    2. Can we have a standard structure?
    3. Any views on how this use case is applicable or not applicable and what would we need
        a. We need a clear definition of the workflow. Things such as:
            i. Where are the charges coming from
            ii. Roll the Rx in this area
            iii. Treatment information
        b. After the work flow we can look at what would be the technical framework that would support this workflow
        c. <mark>ACTION (Crystal):</mark> Would like to have 1 volunteer from planning committee.
            i. Need suggestions and real world scenarios
            ii. How has it been working in the "real world"
            iii. Questions and basic workflows
                1. Appointments and scheduling and demographics
        d. <mark>ACTION for Subcommittee:</mark> Come up with our questions, sample workflows, what we include or don't include. Then this information could be shared with the PC members.
        e. www.Ihe-ro.org
            i. Wiki available with more information regarding our profiles.
            ii. <mark>ACTION:</mark> Set up google document
        f. Information listed in red, http://wiki.ihe.net/index.php?title=Radiation_Oncology_Workflow_Exchange_with_HIS, are questions that have already been asked.
- b. http://wiki.ihe.net/images/9/94/ROWE_Summary.pdf
    - i. Scope of Use Case
        1. Lots of systems with data that are exchanging data
        2. Copying data is error prone
        3. Goal for HIS interface with TPS and TDS
            a. Needs more details
        4. Benefits
            a. Charge capture more accurate

        b. Patient contact information more accurate

        c. Fewer errors and discussions

III.   Do we have all the stakeholders start development of this profile?

        a. We only have 2 vendor representations on this call.

            i. Elekta will be joining on the next call

        b. Do we need representation from the hospital information system vendor's?

        c. We need from the community for such interfaces, but we are not standardized yet. However, we need more information in regard to what information we would exchange, and who is responsible for what before we request other companies to join in.

            i. Make an informal meeting to invite vendors to see if they are interested in this profile, would be nice to have some specifications laid out prior to inviting them.

           ii. Agreed we need more information before inviting other parties. What are the requirements?

          iii. Skeleton document in which we can start to work on, is the structure a good document?

IV.   Any previous work in IHE (Radiology or other) that can be reused for this use case?

        a. Is there a use case that may be applicable to RO?

            i. Are there work flows that are already set up that we would re-use

           ii. IT Domain

          iii. Anyone on the call who knows these profiles in a little more detail?

                1. MMPS was implemented by a subcommittee members

                    a. Scheduled workflow

                    b. SIS Interaction of it is what we would want

                        i. Where are the patients at for the treatment? Patient tracking, how many fractions, how many appointments does the patient have remaining

                    c. <mark>Action:</mark> Give a brief overview from the Radiology workflow and how it can be used in RO domain

V.   Next call schedule? Frequency?

        a. Would propose a bi-weekly call to start

            i. Thursdays are not good, usually

           ii. Time frame is important for members outside of US, earlier is better

        b. Monday at 10:00am, have a monthly call until January and then move to bi-weekly based on work

            i. December 7 at 10:00am