HEALS: Health Examination Automatic Logic System

Kuan-Liang Kuo, MD *#
Chiou-Shann Fuh, PhD *

*Family Medicine Department, Taipei City Hospital, Taipei, Taiwan #Department of Computer Science and Information Engineering, National Taiwan University, Taipei, Taiwan

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Introduction

Health Examinations

- Health examinations play important roles in preventive medicine.
- The clinical condition of an individual continuously changes and needs a series of observations and follow-up.
- In the past, in order to meet such requirement, clinical workers have to fetch health examination data from scattered sources, such as medical charts or general-purpose hospital information system.

Health Examinations

• The lack of a health examination information system meant that the availability, efficiency, and quality of further health care management would degrade.

Asymmetry between Rural and Urban Medical Settings

- Scale
- Equipment
- Quality
- Information technology

HEALS: History

- A health care system developed in Taipei City Hospital since 1996 (original Taipei Municipal Jen Ai Hospital)
- Dedicated for health examinations

HEALS: Overview

- Fully web-based application
- Services provided via ubiquitous Internet accessing
- Enormous applications of the database
- Integrate healthcare domain knowledge to provide sophisticated user-defined functions and interfaces
- Built-in decision-support system for automatic report generation including medical data interpretation, automatic summary, and suggestion

HEALS: Overview

- Provides a user-friendly, intelligent, fully-functional application experience to clinical workers in a distributed way
- Rural clinics can seamlessly share the services provided by HEALS via web-browsing
- Customers can also easily derive integrated healthcare information from HEALS under certain security authentication

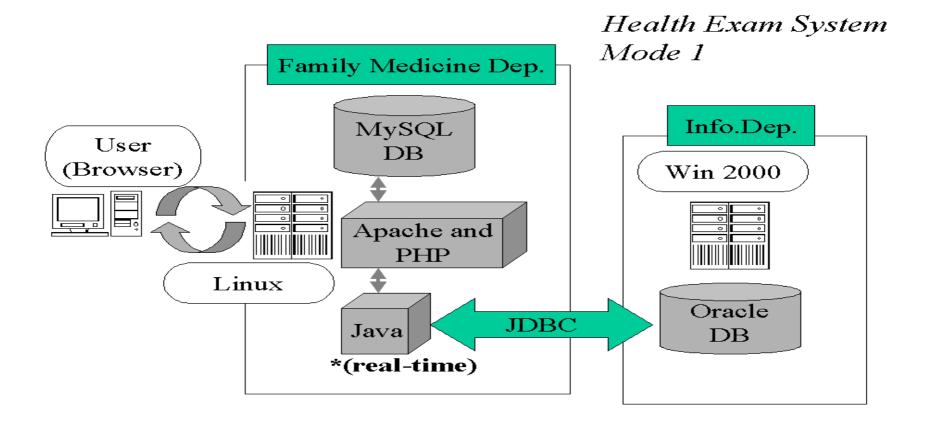
HEALS: Overview

- Web-based:
 - PHP
 - Java
- Database:
 - SQL compliant

PHP: Personal Home Page

SQL: Structured Query Language

HEALS: Integrated into HIS

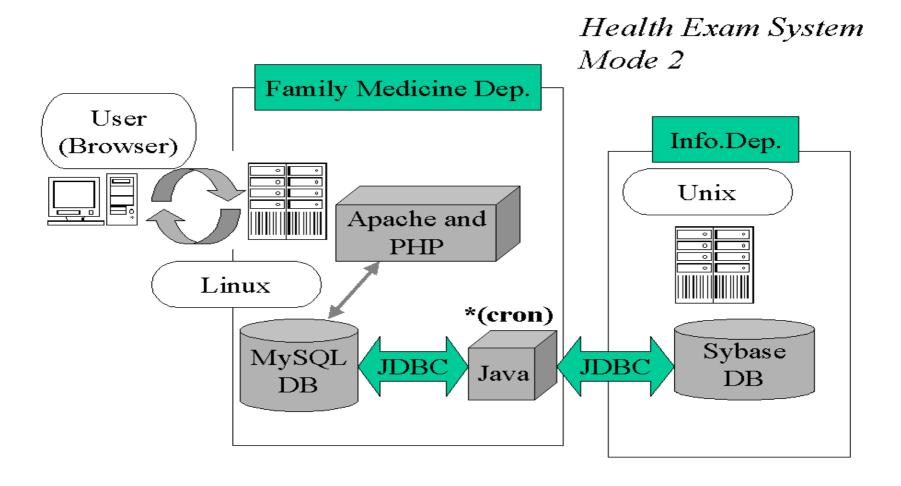


HIS: Health Information System

DB: Data Base

JDBC: Java Data Base Connectivity

HEALS: Integrated into HIS



Screen Shots

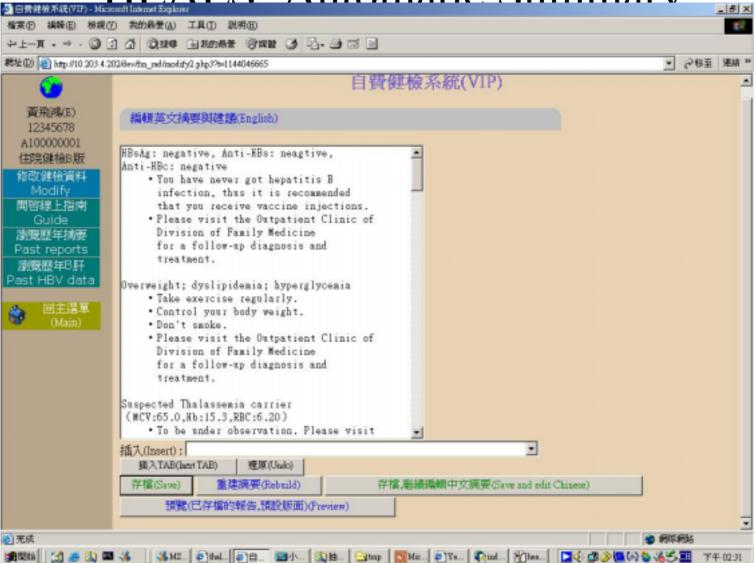
HEALS Portal Page



HEALS · Results Innut

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HEALS: Automatic Summary



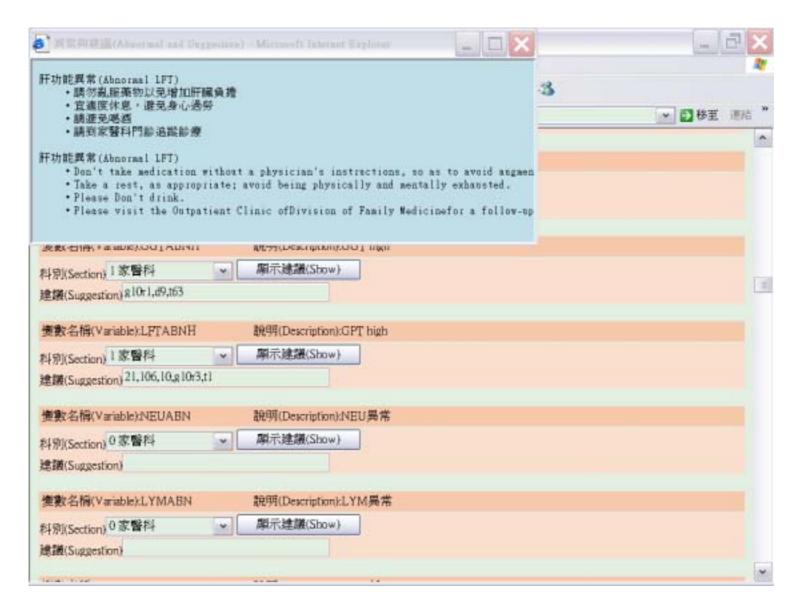
HEALS: Report Preview

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| | | 白血球(WBC) | 7.04 | x10~3/ul | 4.80 - 10.80 | |
| ● 列印 | | 紅血球(RBC) | 4.66 | x10~6/ul | 4.00 - 5.40 | |
| (Print) | | 血小板(Platelet) | 306 | x10~3/ul | 140 - 440 | |
| ◎ 回主選単 (Main) | | 血紅素(Hb) | 14.6 | g/dl | 12.0 - 16.0 | |
| dylaniy | | 血球容積比(HCT) | 42.3 | % | 35.0 - 47.0 | |
| 列印前 | | 平均紅血球容積(MCV) | 90.8 | f1 | 80.0 - 99.0 | |
| 請注意列印設 定 調於[檔案]> | | 平均紅血球血色素濃度 (MCHC) | 34. 5 | % | 33.0 - 37.0 | |
| [版面設定]: | | 平均紅血球血色素(MCH) | 31.4 | pg | 25.0 - 31.0 | |
| - William toler also | | 中性球(Neu.) | 48. 2 | % | 10.0 - 59.0 | |
| [頁首]:空白 [頁節]: | | 嗜伊紅性球(Eosino.) | 2.1 | % | 0.0 - 5.0 | |
| &w &b &p/&P | | 鹼性球(Baso.) | 2.4 | % | 0.0 - 3.0 | |
| (請注意大小寫) | | 淋巴球(Lym.) | 41.1 | % | 10.0 - 30.0 | |
| [邊界]:左:19, | | 單核球(Mono.) | 4.2 | % | 2.0 - 8.0 | |
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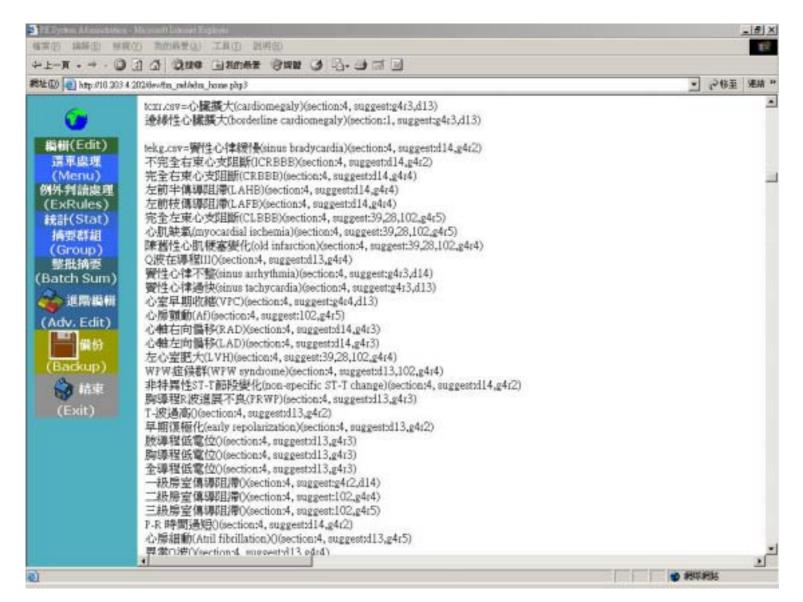
HEALS: Maintenance of Phrases and Inference Information



HEALS: Maintenance of Inference Information



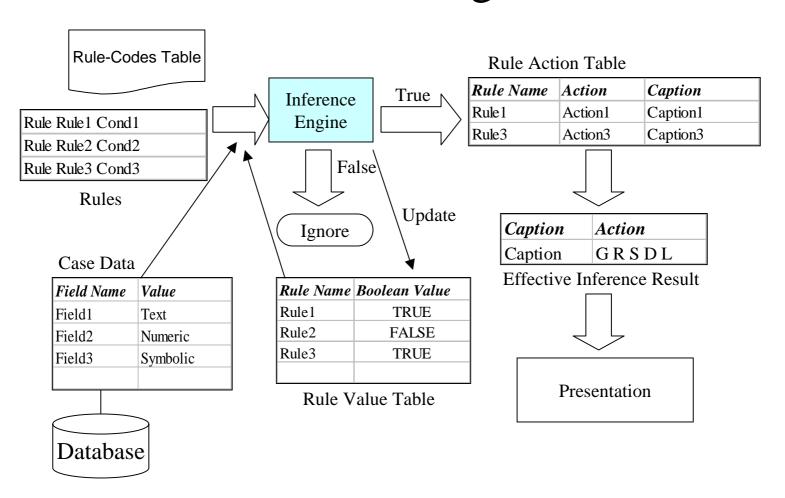
HEALS: Maintenance of Inference Information



Implementation of CDSS in HEALS

CDSS: Clinical Decision Support System

Implementation of CDSS in HEALS: Inference Engine



Implementation of CDSS in HEALS:Rules Syntaxes

Syntax:

limitdef <name> <condition>

Example:

limitdef HBSAG_pos HBSAG == "+"

Syntax:

```
rangedef <name> <condition>
```

Example:

```
rangedef HB_mildLow HB [10 12)
```

Description:

```
HB>=10 and HB<12 (HB: hemoglobin)
```

Syntax:

clausedef <name> <condition>

Example:

clausedef RFT_H CR_H || BUN_H

Description:

CR_H: pre-defined rule with the condition of high Creatinine

BUN_H: pre-defined rule with the condition of high BUN

Syntax:

ruledef <name> <condition>

Example:

```
ruledef HBV_nnn HBSAG_neg && HBSAB_neg && HBCAB_neg && !AGE_50
```

Description:

HBSAG_neg: pre-defined rule with the condition of negative HBsAg.

Implementation of CDSS in HEALS: Inference Results

Triggered action:

Section code; Suggestion Codes

Example:

1;D20,G24R2,T82

Description:

1: Division of Family Medicine

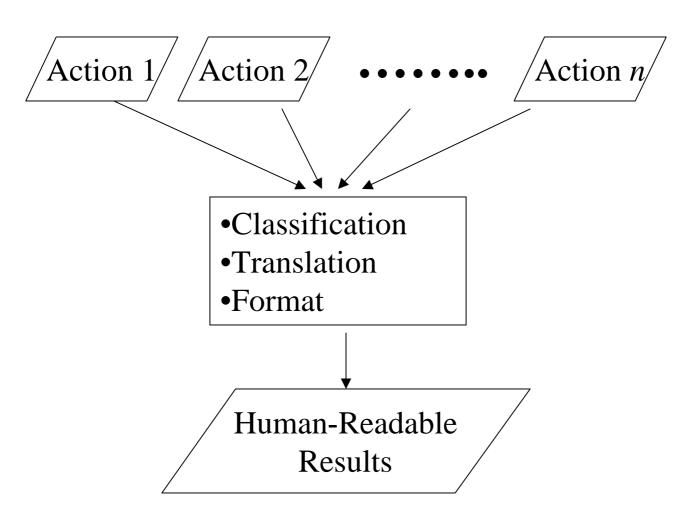
D20: To be under observation. Please visit the Outpatient Clinic of \$\$ for a follow-up diagnosis and treatment, in the event of doubts or discomfort.

G24R2: group 24, rank 2

T82: r/o Thalassemia

Implementation of CDSS in HEALS:

Effective Inference Results



Summary and Conclusion

Advantages of HEALS

- Provide services beyond the territory boundary between rural and urban medical settings
- Improve the quality of health examination information flow.
- Improve the efficiency of health examination information flow.
- Reduce the mundane daily work of clinical workers
- Provide education for junior doctors
- Eliminate common misses in health reports

- Fail to correctly detect problems from multiple examination results
- Fail to give proper suggestions for further medical management or life style modification
- Fail to write a well-edited report
- Fail to meet the deadline for sending reports

Fail to correctly detect problems from multiple examination results

• Anemia:

- RBC (red blood cell count)
- Hb (hemoglobin)
- MCV (mean corpuscle volume)

Fail to correctly detect problems from multiple examination results

• Hepatitis B:

- HBsAg (hepatitis B surface antigen)
- Anti-HBs (hepatitis B surface antibody)
- Anti-HBc (hepatitis B core antibody)
- HBeAg (hepatitis B e antigen)
- Liver enzymes
- Abdominal sonography

Fail to give proper suggestions for further medical management or life style modification

• To give a succinct and complete suggestion at a time is a difficult job.

Fail to write a well-edited report

- Different quality by different doctors
- Different quality by a doctor at different time

Common Misses in Health Reports:

Fail to meet the deadline for sending reports

- Regular workload of a doctor in the health examination center
 - 20 reports/day
- Per report's conclusion time requirement:
 - With CDSS: in seconds
 - Without CDSS: 10 minutes to half an hour

CDSS: Clinical Decision Support System

Possible Disadvantages of CDSS

- Changing relation between patient and the physician
- Limiting professionals' possibilities for independent problem solving
- Legal implications with whom does the onus of responsibility lie?

Evaluation Results

- HEALS has served in Taipei City Hospital for more than 40000 cases.
- Time of editing a report markedly decreased from 20 minutes to 5 minutes per case
- The ratio of customer complaints about the health reports was decreased to nearly zero

Perspective of HEALS

- To be one of the references of health examination information systems
- Future improvement of the CDSS in HEALS
 - Analyze the database to extract stochastic or domain-specific methods to improve healthcare quality and efficacy

References

- S. Russell and P. Norvig, *Artificial Intelligence: A Modern Approach*, 2nd Ed., Prentice Hall, New York, 2002.
- E. Bernstern, "Decision Support and Computers in Education," HI5300: Introduction to Health Informatics, School of Health Information Sciences and Department of Internal Medicine, University of Texas Houston, 2004.
- HL7 Working Group, "Standards in Clinical Decision Support: Using Arden Syntax," http://cslxinfmtcs.csmc.edu/hl7/arden/, 2003.
- P. Caleb-Solly, "Clinical Decision Support Systems," Seminar for the Health Informatics, 2001.

The Decision Support System Used in HEALS (Health Examination Automatic Logic System)

Chiou-Shann Fuh, PhD #
Kuan-Liang Kuo, MD * #

*Family Medicine Department, Taipei City Hospital, Taipei, Taiwan

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Clinical Diagnosis

- Infer a disease state that is not directly observable
- Forms of a physician's knowledge:
 - Rule
 - Pattern

Knowledge-Based Agents

Knowledge base

- The center component
- A set of sentences (rules)
 - Knowledge representation language

• Inference

Reasoning engine

Define the Task Environment of an Intelligent Agent

• PEAS

- Performance measure
- Environment
- Actuators
- Sensors

Define the Task Environment

- Performance Measure

- Minimizing error
- Minimizing operating time
- Maximizing quality
- Maximizing reports output
 - Over 6000 reports per year now

Define the Task Environment - Environment

Known examination items

- Physical examinations
- Laboratory tests
- Others

Known examination types

- Laboratory
 - Numerical (glucose, liver function, ...)
 - Symbolic (hepatitis markers, ...)
- Others
 - Text (gastroenteroscopy, ...)

Define the Task Environment - Actuators

- Output the diagnoses
 - Possible diseases
- Output the suggestions
 - Life style modification
 - Medical suggestion

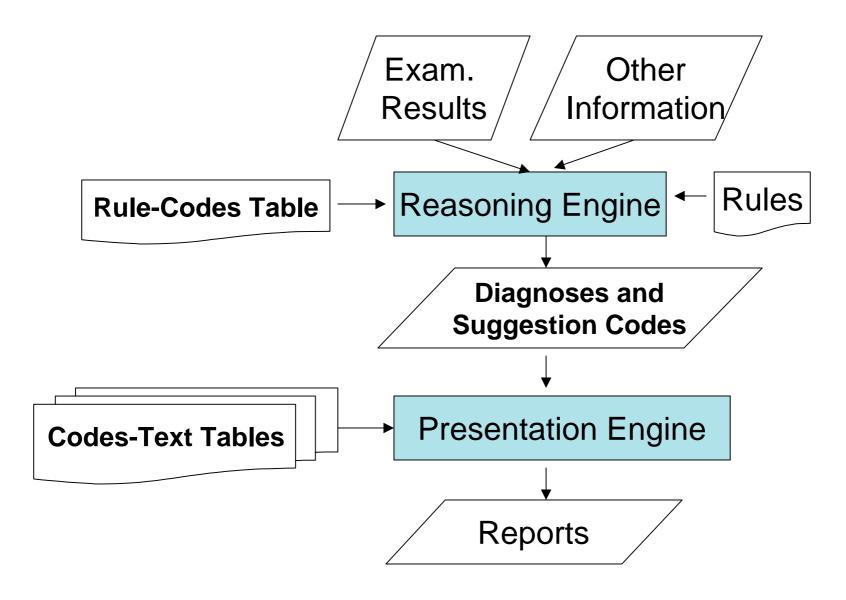
Define the Task Environment - Sensors

- Examination results
 - From database system
- Personal Health History

CDSS of HEALS

CDSS: Clinical Decision Support System

Algorithm



Rule-Codes Table

| | | Section | |
|-----------|---|---------|----------------------|
| Rule Name | Description | Code | Suggestion codes |
| MCVLHBN1 | Low MCV, normal HB, MCV/RBC>13 | 1 | d20,602,g24r1,t84 |
| MCVLHBN2 | (r/o Thalassemia) Low MCV, normal HB | 1 | d20,G24R2,t82 |
| MCVLHBL1 | (Microcytic anemia) low MCV, low HB, MCV/RBC>13 | 1 | G24R2,t83 |
| MCVLHBL2 | (r/oThalassemia) low MCV, low HB, MCV/RBC<13 | 1 | d20,G24R2,t81 |
| MCVNHBL1 | Normal MCV, HB10-12 | 1 | t10,d50,40,403,g24r1 |
| MCVNHBL2 | Normal MCV, HB<10 | 1 | t11,d50,40,403,g24r1 |

Code-Text Table: Diagnoses

| Code | Diagnosis |
|------|-------------------|
| 81 | r/o Thalassemia |
| 82 | r/o Thalassemia |
| 83 | Microcytic anemia |
| 84 | Low MCV |

Code-Text Table: Suggestion

| 601 | 目前不需治療 | |
|------|--|--|
| 601e | No medical treatment required at the moment. | |
| 602 | 疑帶有地中海型貧血基因 | |
| 602e | It is suspected that you have a thalassemia gene. | |
| 603 | 因無明顯分類異常或伴隨其他血球變化,可觀察 | |
| | No marked classification abnormality is found | |
| | concurrently with any other pathological change in blood | |
| | cells, thus no medical treatment is required at the | |
| 603e | moment. | |
| 604 | 疑因過敏體質所致, | |
| | No medical treatment is required, as the disorder is | |
| 604e | caused by an irritable body. | |
| 605 | 正值發育期間的小孩及青少年,其值常見偏高, | |
| | The value is usually relatively high among kids and | |
| 605e | teenagers who grow rapidly. | |

BNF Grammar of Rules

BNF: Backus-Naur Form

Full text on:

http://www.csie.ntu.edu.tw/~d93009/AMIA2006/

BNF Grammar of Rules (cont.)

```
limit_declaration ::= limitdef
 limit name limit
range declaration ::= rangedef
 range_name range
clause declaration ::=
 clausedef clause name clauses
rule_declaration ::= ruledef
 rule name rules
```

Examples of Rules

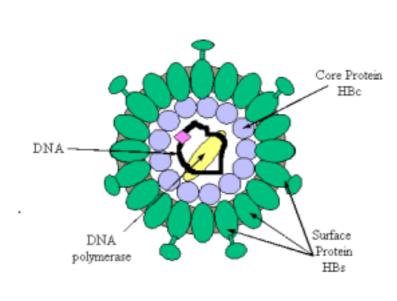
limitdef UWBC2 20 **UWBC** 20] rangedef UWBC1 UWBC (5 clausedef UWBC2 UWBC6 UWBC4 ruledef UWBCABNH UWBC1 &&

URBCN && !URBC4

Reasoning Engine

- Forward chaining reasoning
 - Data-driven reasoning
- Procedural approach part of this implementation
 - Initiation of variables used in rules
- Processing rules
- Generating result codes

Examples of Encoding Domain Knowledge into Rules



- Some Hepatitis B Markers
 - Hepatitis B surface antigen (HBsAg)
 - Outer surface coat
 - Hepatitis B surface antibody (HBsAb)
 - Antibody to HBsAg
 - Hepatitis B core antibody (HBcAb)
 - Antibody to inner nucleocapsid core

```
limitdef
                                     " + "
            HBSAG_pos
                        HBSAG
** HBsAg is positive
limitdef
                                     II __ W
            HBSAG neg
                        HBSAG
** HBsAq is negative
limitdef
                                     " + "
            HBSAB pos
                        HBSAB
** HBsAb is positive
limitdef
                                     II __ W
            HBSAB neg
                        HBSAB
** HBsAb is negative
```

```
limitdef HBCAB_pos HBCAB == "+"

** HBcAb is positive

limitdef HBCAB_neg HBCAB == "-"

** HBcAb is negative
```

```
limitdef OLD_HBSAG_pos OLD_HBSAG == "+"

** any of the previous HBsAg tests is positive

limitdef OLD_HBSAG_neg OLD_HBSAG == "-"

** all of the previous HBsAg tests are negative

limitdef OLD_HBSAB_pos OLD_HBSAB == "+"

** any of the previous HBsAb tests is positive

limitdef OLD_HBSAB_neg OLD_HBSAB == "-"

** all of the previous HBsAb tests are negative
```

```
limitdef OLD_HBCAB_pos OLD_HBCAB
== "+"
```

** any of the previous HBcAb tests is positive

```
limitdef OLD_HBCAB_neg OLD_HBCAB
== "-"
```

** all of the previous HBcAb tests are negative

```
ruledef HBSAG_nil !HBSAG_pos && !HBSAG_neg
** If HBsAq is not tested
ruledef HBSAB nil !HBSAB pos && !HBSAB neg
** If HBsAb is not tested
ruledef HBCAB_nil !HBCAB_pos && !HBCAB_neg
** If HBcAb is not tested
ruledef HBCAB_diff HBCAB_neg && OLD_HBCAB_pos
** If HBcAb is negative now and any of the
  previous HBcAb tests is positive
```

```
ruledef HBV_nnn HBSAG_neg && HBSAB_neg &&
HBCAB_neg && !AGE_50
```

** If HBsAg is negative, HBsAb is negative, HBcAb is negative, and age is less than 50

HBsAg: negative; Anti-HBs: negative; Anti-HBc: negative

- You have never got hepatitis B infection, thus it is recommended that you receive vaccine injections.
- Please visit the Outpatient Clinic of Family Medicine Division for a follow-up diagnosis and treatment.

```
ruledef HBV_pnp HBSAG_pos && HBSAB_neg && HBCAB_pos
```

** If HBsAg is positive, HBsAb is negative, and HBcAb is positive

```
ruledef HBV_pnp HBSAG_pos && HBSAB_neg && HBCAB_pos
```

HBsAg: positive; Anti-HBs: negative; Anti-HBc: positive

- Don't take medication without a physician's instructions, so as to avoid augmenting the workload of liver.
- Take a rest, as appropriate; avoid being physically and mentally exhausted.
- You are a hepatitis B carrier. Please have a follow-up consultation in the Outpatient Clinic every half a year.

```
ruledef HBV_nn HBSAG_neg && HBSAB_neg && HBCAB_nil && !AGE_50
```

** If HBsAg is negative, HBsAb is negative, HBcAb is not tested, and age is less than 50

HBsAg: negative; Anti-HBs: negative
Your antibody test is negative.
It is recommended that you go to the
OPD and pay for a test for core antibody.
If the subsequent test is negative again,
you may consider receiving vaccine injections.
Please visit the Outpatient Clinic of
Family Medicine Division for a follow-up
diagnosis and treatment.

```
ruledef HBV_nnp1 HBSAG_neg && HBSAB_neg && HBCAB_pos && OLD_HBSAG_pos
```

** If HBsAg is negative, HBsAb is negative, HBcAb is negative, and any of the previous HBsAb tests is positive

```
ruledef HBV_nnp1 HBSAG_neg && HBSAB_neg && HBCAB_pos && OLD_HBSAG_pos
```

HBsAg: negative; Anti-HBs: negative; Anti-HBc: positive; Previous HBsAg: positive

- Do not take medication without physician's instructions, to avoid augmenting the workload of liver.
- Take a rest, as appropriate; avoid being physically and mentally exhausted.
- You are a hepatitis B carrier. Please have a follow-up consultation in the Outpatient Clinic every half a year.

Examples of Encoding Domain Knowledge into Rules

- Anemia
 - RBC (Red Blood Cell)
 - MCV (Mean Corpuscle Volume)
 - Hb (Hemoglobin)



| rangedef | MCV_Low78 | MCV | [78 | 80) |
|----------|--------------|-----|------|-----|
| rangedef | MCV_Low | MCV | (0 | 80) |
| rangedef | HB_N | HB | [12 | 19] |
| rangedef | HB_Low | HB | (0 | 12) |
| rangedef | HB_mildLow | HB | [10 | 12) |
| rangedef | HB_severeLow | HB | (0 | 10) |
| limitdef | HB_High | HB | > 19 | |
| limitdef | RBC_High | RBC | > 7 | |
| limitdef | RBC_mildHigh | RBC | > 5 | |

```
rangedef MCV_DIV_RBC_Low MCV_DIV_RBC (0 13)

** MCV/RBC > 0, and < 13

limitdef AGE_YOUNG AGE < 21

** age less than 21

ruledef MCVABNL21 AGE_YOUNG && MCV_Low78 && HB_N

** If age less than 21, MCV>=78 and <80, and Hb is normal</pre>
```

** If MCVABNL21 is false, MCV<80, Hb is normal, and MCV/RBC<13 (r/o Thalassemia carrier)

RBC: $6.00*10^6/\text{ul}$, Hb: 12.8g/dL, MCV: 63fl

r/o Thalassemia carrier

To be under observation. Please visit the Outpatient Clinic of Family Medicine Division for a follow-up diagnosis and treatment, in the event of doubts or discomfort.

```
ruledef MCVLHBL1 !MCVABNL21 && MCV_Low && HB_Low && !MCV_DIV_RBC_Low
```

RBC: $3.00*10^6/\text{ul}$, Hb: 8.0g/dL, MCV: 70fl

Microcytic anemia

Please visit the Outpatient Clinic of Division of Family Medicine for a follow-up diagnosis and treatment.

** If MCVABNL21 is false, MCV<80, Hb<12, and MCV/RBC<13 (Thalassemia)

RBC: $6.00*10^6/\text{ul}$, Hb: 10.0g/dL, MCV: 62fl

r/o Thalassemia

Please visit the Outpatient Clinic of Division of Family Medicine for a follow-up diagnosis and treatment.

ruledef MCVNHBL2 !MCV_Low && HB_severeLow
** If MCV>=80 and Hb<10</pre>

ruledef MCVNHBL2 !MCV_Low && HB_severeLow

RBC: $3.00*10^6/\text{ul}$, Hb: 8.0g/dL, MCV: 82fl

Anemia

Have a balanced diet, taking in all sorts of nutrients, avoid partiality for a particular kind of food; take sufficient amount of vitamins.

Refrain from blood donation.

Please visit the Outpatient Clinic of Division of Family Medicine for follow-up diagnoses and treatments.

Summary and Conclusion

HEALS: Advantages

- Provide services beyond the territory boundary between rural and urban medical settings
- Improve the quality of health examination information flow.
- Improve the efficiency of health examination information flow.
- Reduce the mundane daily work of clinical workers
- Provide education for junior doctors
- Eliminate common misses in health reports

CDSS of HEALS: Advantages

- A way of using clinical guidelines in medical practices.
- Simple and clear rule syntax
- Efficient reasoning algorithm
- To ensure the state-of-the-art of the knowledge base, the rules can be readily updated by domain experts easily

Evaluation Results

- HEALS has served in Taipei City Hospital for more than 40000 cases.
- Time of editing a report markedly decreased from 20 minutes to 5 minutes per case
- The ratio of customer complaints about the health reports was decreased to nearly zero

HEALS: Next

- To be one of the references of health examination information systems
- Future improvement of the CDSS in HEALS
 - Analyze the database to extract stochastic or domain-specific methods to improve healthcare quality and efficacy

References

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