Sessions 0 & 1
Conclusions & Recommendations

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Standardization in E-health

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Presentations in Session 0

- Tutorial: What is Telemedicine/E-Health?; Mr. L. Androuchko, ITU-D SG 2

- ISO: Overview of the TC 215 WG2 activity in the telemedicine-related area; Mr. M. Reynolds, ISO TC215

- IEC: IT-Standardisation in Healthcare - Coordination of international Activities; Mr. H. Siebold, IEC TC 62

- European standardization of Health Informatics; Mr. G. Klein, Chairman of CEN/TC 251

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Presentations in Session 1

- Telemedicine standardization within NATO; Mr. D. Lam, U.S. Army, TATRC

- Mr. K. Kurokawa, President, APT (Second Opinion Centre), presented by Mr. I. Nakajima, Tokai University

- E-Health experience in Copenhagen University Hospital; Mr. O. Bergsten, Denmark

- European telemedicine standard on medical training and remote diagnosis of patients; Ms A. Helgesson; Care Service Administration, Sweden

Standardization in E-health

Overview of issues User Comments & requirements (1)

- A common understanding that the situation with standardization in e-Health is NOT meeting already existing needs of users.

- There are many organizations developing different standards at a national, regional and even international level. Nevertheless, there is NO SRATEGIC VISION, which developed together and agreed upon and there are already too many COMPEETING standards.

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Overview of issues User Comments & requirements (2)

- Taking teleradiology as an example that is much more advanced compare with other telemedicine applications/services, it is necessary to note that DICOM is NOT an international standard so far.

- The International Telecommunication Union as a leading standard developing organization is the field of telecommunication and representing the interests of 189 member states is not seriously involved in the process of developing or at least supporting the development of Standards/Recommendations for e-Health.

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Overview of issues User Comments & requirements (3)

- The interest on telemedicine and its applications is not the same in developed and developing countries.
  - ◆ developed countries can continue lengthy discussion on cost-effectiveness of telemedicine, BUT
  - ◆ developing countries NEED telemedicine today in order to improve the use of existing limited medical resources by introduction, for example, of teleconsultation and distance medical training.
- Developing countries cannot wait the final international version of EMR (electronic medical record). In each country is doing its own version of EMR by simply converting into electronic form the existing rules and procedures.

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A proposal from the Chair

Standardization in E-health

Proposal

- Set up Standardization Coordination Group on Standardization for e-Health in the framework of ITU-T Study Group 16.

- Possible fields for cooperation:

  - Video coding

  - Security

  - Quality of Service

  - Interoperability of Multimedia systems

  - Mobile technologies in e-Health applications

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Proposal

- All international and regional standard development organizations and different forums active in standardization for e-Health will be invited. Each participating organization will nominate a liaison person to work in SCG. ITU-T will provide secretariat support.

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Proposal

The SCG would:

- Make an inventory of the current situation with regard to international standardization in e-Health

- Identify gaps based on user requirements

- Propose priority areas

- Identify common components for different telemedicine standards (e.g. security) in order to avoid duplication of work in different organizations

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Conclusions

- There is an urgent need for international standards for coding of medical information (text, audio and video) and better dissemination of the existing ones.

- For the industry, there is a need for international standards for acquisition of medical information for telemedicine applications.

- There is a lack of standards for data exchange between Hospital Information System and specific applications used in technical medicine (radiology, laboratory, echocardiology, etc.).

- There is a lack of easy and secure identification method for telemedicine applications.

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