



## The Problem: How to communicate big data in healthcare?

### Vision of MediPrepare:

1. Empower the patient, make him/her responsible for the presentation of his/her 'case'.
2. Offer direct workflow support for the patient-doctor-team.
3. Make health-chain-wide communication of health possible in a 15 sec format.
4. Help to save time by preparing and presenting data. Help with administration.

Due to time constraints or by communication problems medical data are often lacking during a consultation. **MediPrepare** helps the patient to create a 'professional' medical file with medical context. In 15 seconds, the medical context can be scanned. This can be that fast because we make use of pattern recognition.

This creates an immediate workflow improvement. There is more time for the current complaint and for more eye-to-eye contact with the patient. The patient is better prepared for questions by the doctor. The administration is also already done. The document can be added to the paper file or in the electronic document management system or EHR.

**MediPrepare** is in favor of the new hybrid way of working, paper where smart, digital where smart. \* \* \*

## Explanation some commonly used risk parameters: Effective Way to alert with some key figures for certain medical context

- ASA** ASA ASA 5 1 healthy ----- Mori Bund (ascending from healthy to mori Bund), ASA 6 is brain dead. American Society of Anesthesiology Classification, already in use from 1940. [ASA-link](#)
- **Importance:** ASA class is a simple score, that an independent risk score is for patients who have surgery. [Fast triage in hospital](#)
  - **Important:** is used worldwide and recognized as a fast indicator of the condition of the patient.
- GHQ**
- GHQ 5 'General Health Question', Health is experienced as "very good"
  - GHQ 1 'Very poor' (descending from healthy to bad). For more than 50 years in use.
- ASA & GHQ**
- Significance: GHQ AND ASA together provide a quick impression of the patient's perception of his health and the health assessment by the doctor based on data, which can be verified easily. At 1 & 5 indicates a healthy patient ASA GHQ.

**MediPrepare** makes use of the patient's answers, and internationally known scores. The generated information is not intended as a substitute for services by trained professionals. The patient generates and shares itself. **MediPrepare** has no access to view the answers, nor to the medical record.

<b>nMeds</b>	<p>The number of medications is important for several reasons:</p> <ul style="list-style-type: none"> <li>• 1. The consultation time, for example for an intake interview, can thus be predicted.* Other factors play a role.* Medi prepare strives to provide this type of data in the following versions.</li> <li>• 2. DDI, drug-drug interactions are determined by the number of medications. The patient can almost always quickly.*_*_* When using 6 medications, the risk of DDI 30%, and the chance runs fast with additional medications.</li> </ul>
<b>The METS</b>	<ul style="list-style-type: none"> <li>• 1 - 12 values (ascending from very bad to athlete) <a href="#">link</a></li> <li>• Metabolic Equivalent Score, METs explained, <a href="#">Belang</a></li> <li>• <b>1 Interest:</b> easy to determine with questions, frequently used by cardiologists to assess risk, <b>Mets &lt; 4 means</b> that patient does not stairs and very limited reserve.</li> </ul>
<b>NYHA</b>	<ul style="list-style-type: none"> <li>• NYHA 1 - 4 Very Risky Angina Pectoralis</li> <li>• New York Heart Association Classification, NYHA-link, <a href="#">Link</a></li> </ul>
<b>SmokingPY</b>	<ul style="list-style-type: none"> <li>• Never Smoked (0) -100 (very heavy smoker for long times) Smoking Packs Years, Smoking PY-link, <a href="#">Belang</a></li> <li>• 20 cigarettes per day a year-long corresponds with 1 Smoking-Py</li> <li>• Smoking has a relationship with COPD, infections, lung cancer etc</li> <li>• Important: a quick number that has a lot of expressiveness</li> </ul>
<b>Beeh Score</b>	<ul style="list-style-type: none"> <li>• A score of COPD Asthma (or combination) <a href="#">link</a></li> <li>• Interest 1: Example of a simple clinical score from the general medical practice, which is very broad.</li> </ul>
<b>BMI</b>	<ul style="list-style-type: none"> <li>• BMI (Body Mass Index) ratings WHO, <a href="#">link</a></li> <li>• ABW (adjusted weight), lbw (ideal weight)</li> <li>• WHtR (<a href="#">gewicht lengte ratio</a>), habit indicator (&gt; 0.5 increasing pear-shaped, which for more than 100 years is seen as a risk parameter)</li> </ul>
<b>ΔKG1Y</b>	<ul style="list-style-type: none"> <li>• The change of the weight during the last year. Accidental loss of weight may indicate an underlying malignancy or other chronic disorder. <a href="#">link</a></li> </ul>
<b>BP-mmHg</b>	<ul style="list-style-type: none"> <li>• Blood Pressure or Blood Pressure mmHg, also known as RR. <a href="#">link</a></li> </ul>
<b>HR/min</b>	<ul style="list-style-type: none"> <li>• Heart Rate or heart rate. <a href="#">link</a></li> </ul>
<b>O2Sat%</b>	<ul style="list-style-type: none"> <li>• Oxygen saturation of the blood. <a href="#">link</a></li> </ul>
<b>RespR</b>	<ul style="list-style-type: none"> <li>• Respirations per minute. <a href="#">link</a></li> </ul>
<b>°C</b>	<ul style="list-style-type: none"> <li>• Temperature in degrees Celcius <a href="#">link</a>[HH1] (convert to degrees Fahren <a href="#">link</a>)</li> </ul>