

Use of Agile & Lean methods to develop X-Ray Analytics Application.



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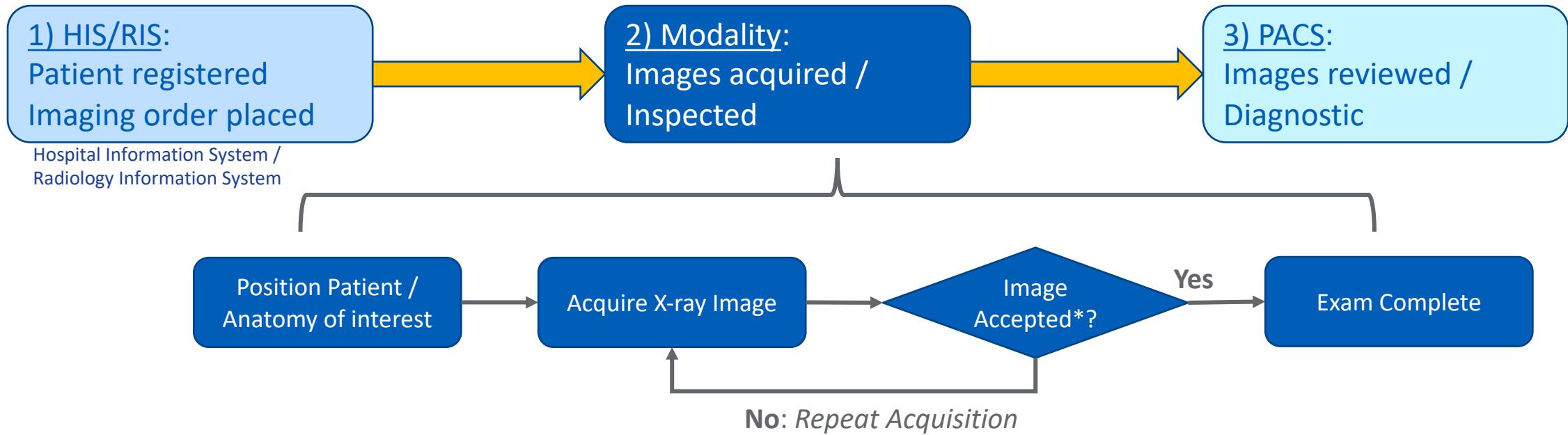


Presentation Outline:

1. Product Introduction: X-ray Quality Application / Repeat-Reject Analytics (RRA)
2. Team structure & Tools
3. Scoping for beta (1st MVP*) & development/release cycle.
4. Beta deployment & Insights Learned
5. From beta insights to 1st product release.
6. Summary & Conclusion.

Product Description: X-Ray Quality App. / RRA

Digital X-ray Imaging Workflow (Simplified):



* Notes:

- *Rejected (non-accepted) images are not sent to PACS (no diagnostic value)*
- *The technologist might avoid a repeat by “re-processing” the image using a different set of processing parameters.*

Product Description: X-Ray Quality App. / RRA

Clinical Problem Statement:

Rejected X-ray images represent:

1. Un-necessary radiation exposure to patients (Re-take).
2. Wasted time and resources, and
3. Risk of non-compliance

ASRT (American Society of Radiologic Technologists) Position:

It is a best practice in digital radiography to implement a comprehensive quality assurance program that involves aspects of quality control and continuous quality improvement, including repeat analyses that are specific to the digital imaging system.

AAPM: The American Association of Physicists in Medicine:

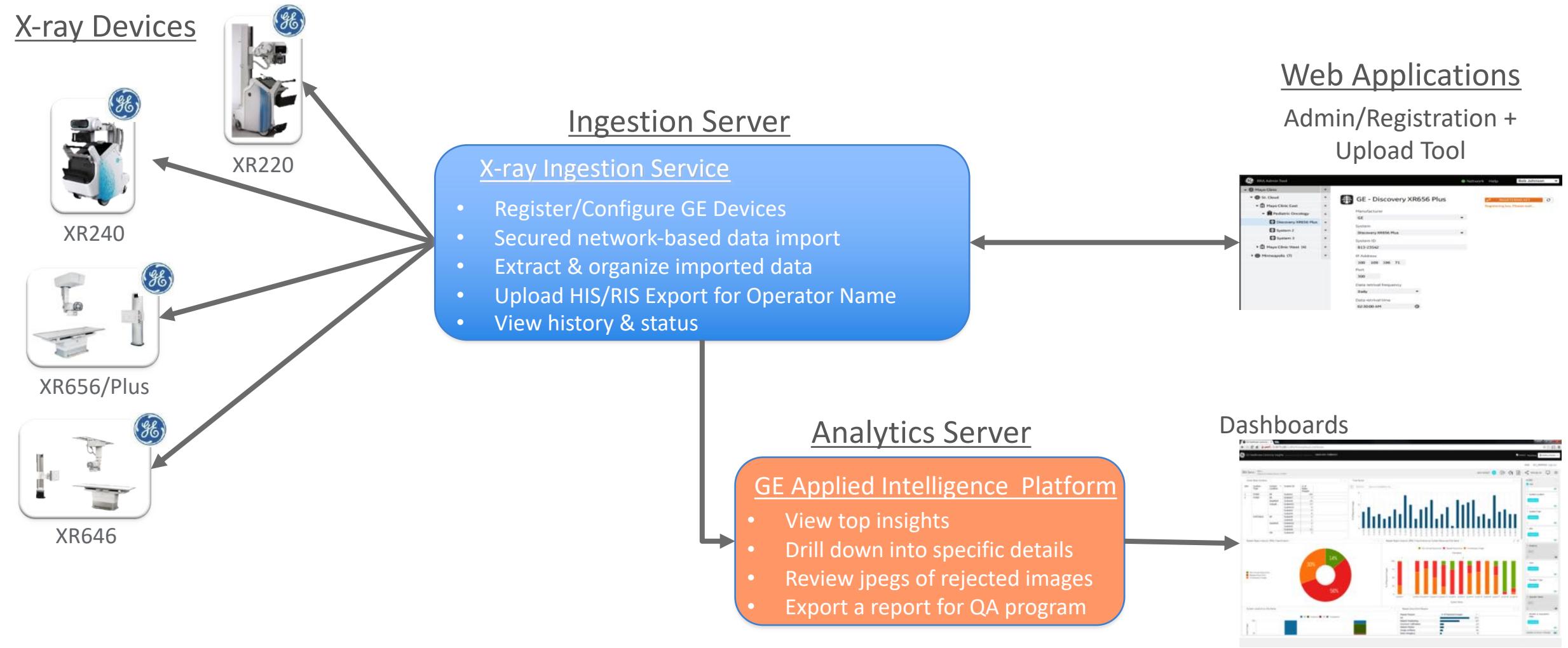
Adults: “this task group recommends that 8% be used as a target for overall rejected image rate, and 10% as a threshold for investigation and possible corrective action.”

X-ray quality App. RRA Position Statement :

For (end-users):	Users of X-ray medical imaging equipments (Lead Tech, QA, Manager, Physicist)
Who (users' needs):	Want to measure and track Repeat-Reject Rate and identify corrective actions to keep it under a target of X %
Product name:	Repeat-Reject Analytics
Product Features:	<ol style="list-style-type: none">1. Facilitates the collection of RRA data from various X-ray imaging equipments2. Aggregates the collected data across multiple equipments / vendors3. Extract data elements that are relevant to Repeat-Reject operations5. Displays the data on user-friendly and user-adjustable dashboards.

Note: RRA was determined not to be a medical device and hence not subject to QSR on Design Controls.

Product Architecture:



2) Team Structure & Tools:

Global development team:

1. Product Manager
2. Lead Systems Designer / Architect
3. Lead SW Designer / Architect
4. SW team (3 engineers)

Requirements Management: DOORs for user and system requirements

Verification & Validation: DOORs for authoring procedures & traceability to design input.

Agile development & issues tracking: Rally

3) Scoping for 1st Minimum Viable Product (MVP):

Developed a set of user and system level requirements to drive design and development activities:

User Requirements:

1. Access controls & users management.
2. X-ray Devices Registration: GE only
3. Analytics Dashboard: Visualization & Insights

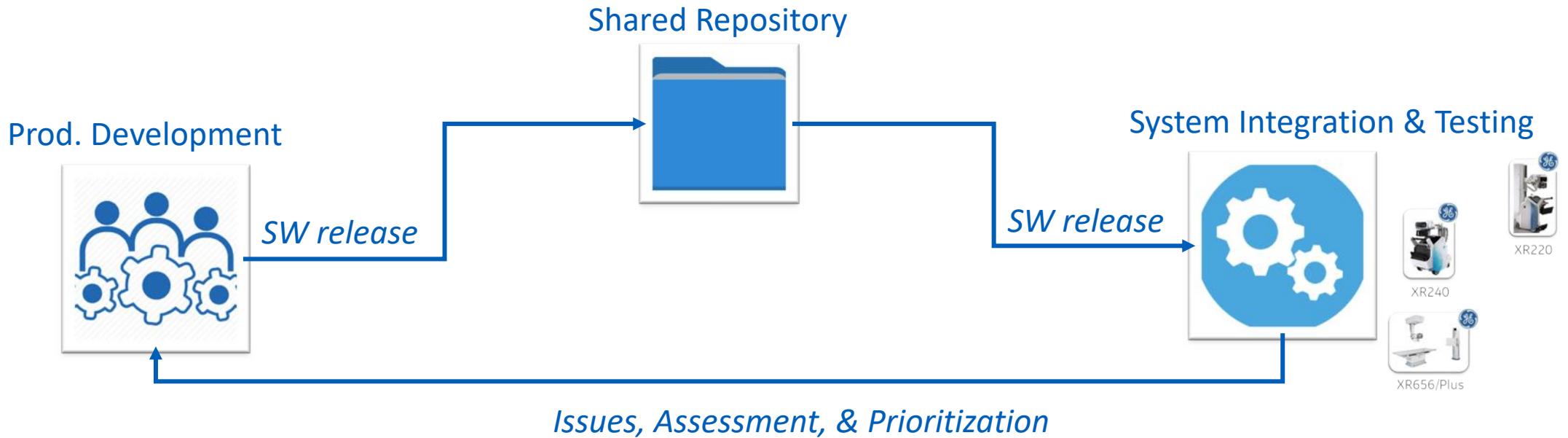
System Requirements:

Elicitation and translation of user requirements to product requirements.

SW requirements:

System requirements were further decomposed into Rally.

RRA Beta development & release cycle



Main Highlights:

1. SW release frequency: Daily / every other day
2. Emails to share test outcomes & issues observed
3. Leveraged global structure: Integration testing (daytime) / SW development & issues resolution (nighttime) and so on...
4. ~10 SW releases in the 2 weeks period leading to beta

4) Beta Deployment: Radiology department at a US academic institution

Participants:

GE: Product manager, Lead system designer, Lead SW designer, Platform service lead.

Clinical Site: Lead X-ray technologist, IT staff members

1. Deployment of SW modules:
 - a. Ingestion: No issues
 - b. Dashboard: No issues
2. Registration of X-ray devices:
 - a. Fixed X-ray systems (wired): Firewalls configuration update required* (inside Radiology network).
 - b. Mobile X-ray systems (wireless): Unsuccessful** during deployment (fixed later)

* A firewall exception is needed to allow the ingestion server to connect to fixed X-ray systems. Radiology IT created the exception during deployment.

** A similar exception was needed for the wireless network. However, that network was managed at the enterprise level thus requiring a more complex workflow & different approvers. Upon completion of workflow, Mobile devices were successfully registered & their data ingested.

Beta 1st Deployment: Cont'd

- ✓ Per agreement with site staff, we limited the scope of deployment to fixed X-ray (wired) devices pending completion of wireless configuration change.
- ✓ No change in functional scope for Ingestion & Dashboard Modules.
- ✓ Beta up and running: Data ingested from devices and displayed in dashboards.
- ✓ Established a mechanism to collect customer feedback and comments.

1st immediate insight: Check network configuration and ownership as “deployment prerequisite”.

Beta deployment, 2nd insight: Operator Name Prioritization

The beta SW used a pre-defined prioritization schema such that each X-ray imaging exam is assigned **ONE** operator name. The operator name can originate from:

1. X-ray acquisition system: Technologist enters her/his name at the start of an exam.
2. HIS/RIS*: Technologist enters her/his name at exam closure time on the HIS/RIS.
3. Reject Operator (*for rejected images only*): Technologist enters her/his name at the time of image rejection (UI of the X-ray acquisition system).

However, we learned that different sites can have different “preferences” about how to prioritize assignment of operator name to imaging exams.

Without a configurable prioritization schema, the application can't account for observed workflow variations and preferences.

Beta deployment, 3rd insight: Operator Name Standardization

With operator names coming from three district sources, we observed variations in operator names based on where they come from.

For example, John Doe can be:

1. John D. coming from the X-ray acquisition system.
2. Doe, John coming from HIS/RIS.
3. J. Doe coming from the reject UI (*for rejected images only*)

Without standardization (consolidation), the three varied forms will show as three different operators on the dashboards.

Beta deployment, 4th insight: Need more “specialized” dashboards

The beta SW provided a single dashboard for all registered devices, all technologists, for all reject classifications.

Customer insight: This is OK but can you provide:

- Technologists dashboard: Where the lead tech can display and filter reject data on a per technologist basis.
- Reprocess reject dashboard: Where the lead tech can display and filter reject data based on “reject classification” to account for the imaging workflow where a rejected X-ray image can be classified as:
 - Repeat: Indicating a X-ray retake by the technologist
 - Re-Process: Indicating that the rejected image was obtained by an image re-processing operation and hence no need to perform a re-take.

5) From beta to 1st product release: Configurable Op. Name Prioritization

Designed & implemented a UI feature that allows lead X-ray technologists to configure the prioritization schema based on their site's workflow:

Site A

Technologist Name Priority

Priority #1	Reject Technologist Name from Acquisition System
Priority #2	Technologist Name from HIS/RIS
Priority #3	Exam Technologist Name from Acquisition System

Save Changes

Site B

Technologist Name Priority

Priority #1	Technologist Name from HIS/RIS
Priority #2	Reject Technologist Name from Acquisition System
Priority #3	Exam Technologist Name from Acquisition System

Save Changes

From beta to 1st product release: Op. Name Standardization

Designed & implemented a UI feature that allows lead X-ray technologists to consolidate “variations” of technologists names (alternates) into a single standard operator name.

The screenshot shows a user interface for 'Technologist Name Standardization'. On the left, under 'Technologist Name Priority', there is a table with four rows. Each row has a 'PRIMARY NAME' and an 'ALTERNATE NAME 1' field. The first row contains 'First1 Last1' in both fields. The second row contains 'First2 Last2' in the primary name and a 'Select Names' button in the alternate name. The third row contains 'First3 Last3' in the primary name and a 'Select Names' button in the alternate name. The fourth row contains 'First4 Last4' in the primary name and a 'Select Names' button in the alternate name. On the right, under 'Technologist Name Standardization', there is a table with three rows. Each row has an 'ALTERNATE NAME 2' field and a 'Select Names' button. The first row contains 'First1 Last1' in the alternate name and a 'Select Names' button. The second row contains 'First2 Last2' in the alternate name and a 'Select Names' button. The third row contains 'First3 Last3' in the alternate name and a 'Select Names' button. To the right of this table is a vertical list of 'Unassigned Names' with eight entries: 'First1 Last1', 'Last1, First1', 'First2 Last 2', 'Last2, First2', 'First M3 Lasrt3', 'First3 Last3', 'Last4, First4', and 'Last4, First4 M4'. Orange arrows point from the 'ALTERNATE NAME 1' fields to the 'Select Names' buttons in the 'ALTERNATE NAME 2' row. Blue arrows point from the 'Select Names' buttons in the 'ALTERNATE NAME 1' row to the 'Select Names' buttons in the 'ALTERNATE NAME 2' row. A large orange arrow points from the 'Add Primary name' button at the top right to the 'Unassigned Names' list.

PRIMARY NAME	ALTERNATE NAME 1
First1 Last1	First1 Last1
First2 Last2	Select Names
First3 Last3	Select Names
First4 Last4	Select Names

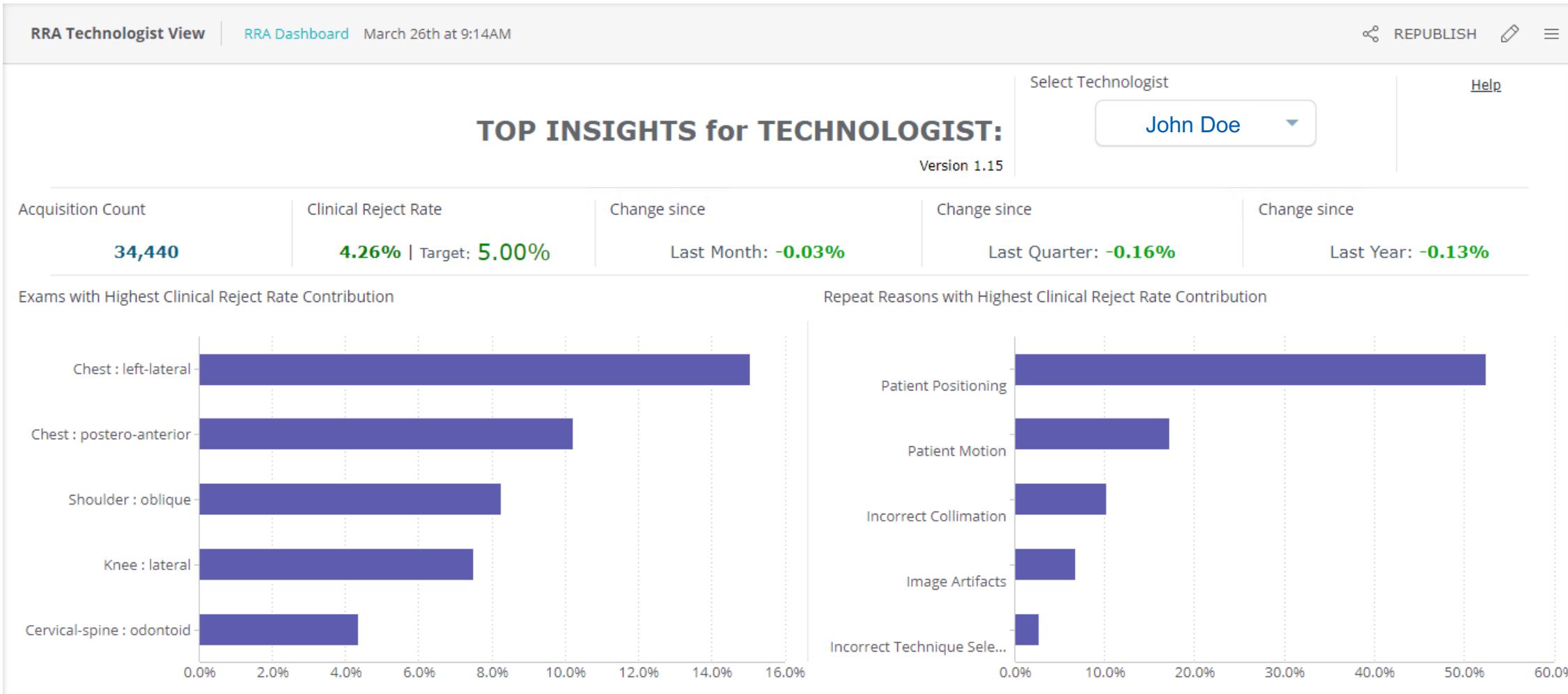
ALTERNATE NAME 2	Select Names
First1 Last1	Select Names
First2 Last2	Select Names
First3 Last3	Select Names
First4 Last4	Select Names

Unassigned Names
First1 Last1
Last1, First1
First2 Last 2
Last2, First2
First M3 Lasrt3
First3 Last3
Last4, First4
Last4, First4 M4

From beta to 1st product release: Additional dashboards

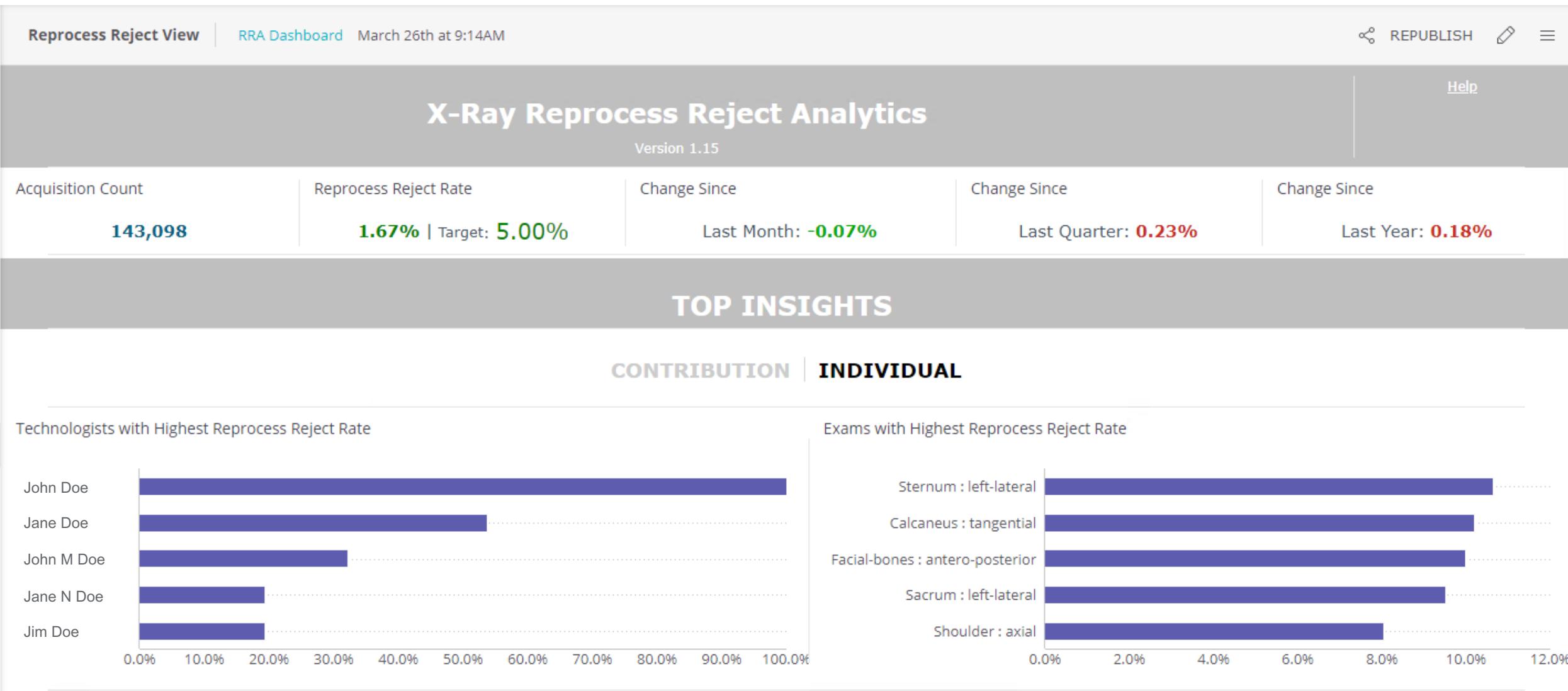
Designed & implemented a per-technologist & a reprocess reject dashboard to address customers requests.

Technologist Dashboard:



From beta to 1st product release: Additional dashboards – Cont'd

Reprocess Reject Dashboard:



6) Summary & Conclusion:

- Real life product development experience using agile & fast-works.
- Lean processes for design & development: requirements, integration testing, defects tracking
- Beta deployment experience & clinical insights learned: Get an MVP (Minimum Viable Product) in customer hands ASAP, the ROI is extremely valuable.
- From beta to 1st product release: transformation of customer insights -> product features to address end-user needs and pain points.