

DECEMBER. 2021 • ISSUE NO. 04



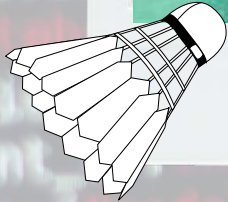
Origin Integrated Studios

THE OFFICIAL NEWSLETTER

Contents

Recent Updates - 02
Partnership with Seca - 03
Upcoming Releases- 04
Article (Healthcare Systems
Integration - Quick Tips) - 05 & 06

Recent Updates



Origin Badminton Club - 1st Session



Origin IT Intern in 2021 - 1st Batch

*Thank you for your
contributions throughout the
internship period with us.
Goodbye and Good luck.*



Confirmation of Process 

seca Asia Pacific SDN BHD
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 No 1, Jalan Pergaulanan U1/51A
 40150 Shah Alam, Selangor,
 Malaysia

Confirmation of Process
 We hereby
 confirm the process
 of integration
 between
 Origin Integrated Studios
 Hospital Information System and
 Electronic Medical Records have been tested and confirmed successful via Igara Integration Engine for the
 parameters below:


- Patient Weight
- Patient Height
- eBCA report (PDF file)


seca Models which are capable of exporting patient parameters successfully are as below via seca 103 interface software.

seca Scale 103	iBCA 814	iBCA 829
seca 205	seca 204	seca 333
seca 634	seca 644	seca 690
seca 690	seca 654	seca 674
seca 676	seca 684	seca 727
seca 707	seca 707	seca 604

Thank you.

Kind regards
 seca griffin & co. kg


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Upcoming Releases

New clinical features are out for your Origin EMR, improving workflow efficiency!

Vaccination Chart and its description



Age Unit	Type Of Vaccination	Due Date	Date Taken & Signature	Lot Number	Action
AT 08TH	D (D) (Diphtheria)	05-06-2021	20-11-2021 13:30 [Signature]	50010	[Status]
AT 08TH	Hepatitis B	05-06-2021	20-11-2021 13:30 [Signature]	50020	[Status]
AT 08TH	Hepatitis B Immunoglobulin (Hyperimmune)	05-06-2021	20-11-2021 13:31 [Signature]	50030	[Status]
AT 08TH	Tetanus Antitoxin (DPT, Diphtheria, Pertussis and Tetanus Toxin)	18-01-2022	[Signature]		[Status]
AT 08TH	Tetanus Toxoid (DPT, Diphtheria, Pertussis and Tetanus Toxin)	18-01-2022	[Signature]		[Status]
AT 08TH	Tetanus Toxoid (DPT, Diphtheria, Pertussis and Tetanus Toxin)	18-01-2022	[Signature]		[Status]
AT 08TH	Tetanus Toxoid (DPT, Diphtheria, Pertussis and Tetanus Toxin)	18-01-2022	[Signature]		[Status]
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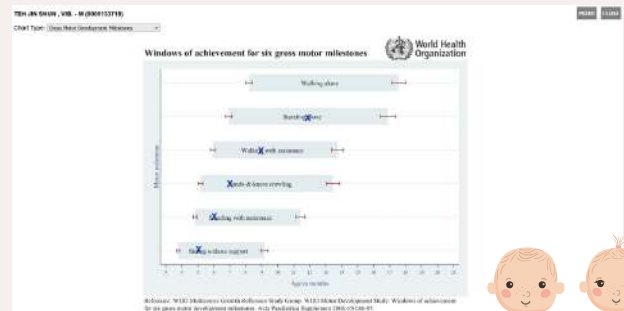
Enable clear records for patients' vaccination schedule, including planning, administering and records of vaccine information e.g. batch number. This will help clinicians check if patients' vaccinations are on track and will ease planning of future upcoming visits. This vaccination chart can also be printed out as a summary for patient and family's safekeeping as a copy. This chart is also flexible and can be customized by users directly to accommodate and updates in vaccinations schedule – the cherry on top of the cake.



Code	Description	Batch No.	Expiry Date	Quantity	UOM	Remarks	Status
PK000101	SILVERING BP	DN0123	2025-01-31	5	ML	Not Available Yet	Warning
PK000102	POTASSIUM CHLORIDE BP - FOR ORAL SOLN	DN0123	2025-01-31	5	GRAM	Not Available Yet	Warning



Transfer Acknowledgement :- To ensure better inventory tracking and accountability, we have newly developed the Transfer Acknowledgement module to complement existing material management modules. Regardless of clinical or non-clinical units, if there are stock transfers performed via all material management modules, users will be able to acknowledge this transaction be it either the requesting or receiving end. This has enhanced our existing inventory workflow and it is now complete from end to end.



Growth Milestones :- the WHO Gross Development Motor milestones which are used by paediatricians worldwide are now incorporated into the patient EMR, allowing paediatricians to clearly annotate date and time of milestone achievement. With a visual graph and patient's achieved milestones plotted directly on top, this feature can also assist in prompting parents on health education so they take note and inform the doctor of any subnormal development speed.



Healthcare Systems Integration – Quick Tips !

When we have conversations about high standards of quality achievable in healthcare. There are always two areas that must transpire to achieve this vision-connected health and interoperability. The best-case scenario in a digitized hospital and the ideal means of achieving this is surely end-to-end integration wherever possible.

Think HIS – EMR – RIS/PACS – LIS – POC devices – Document Management solutions (scanning and printing) – Medical Devices – Telehealth applications, with all information centralized and shared, a dream workplace for every healthcare personnel!

In my past years, during almost every pre-sales engagement, i will hear this enquiry “Can you integrate with XYZ?”

and during business requirement studies, users frequently ask questions along the lines of “I have this system, can the information flow into your solution?”. Besides optimizing clinical and operational workflow, we also know it makes sense in terms of data analytics.

Nevertheless, how should one plan for acquisition of a system / device which can be integrated?

Here are a few pointers: -

- **Define intended outcome** – as per all workflow improvement practices, users should clearly define the **to-be environment**. What do you want to see happening? What is the expected tangible end result that is achieved as a result of end-to-end integration? Ideally, what can be achieved? On that note, **Think big!** We are at an age now where things can happen almost like magic. Who would think that purely putting a piece of paper into a scanner will automatically push it into the corresponding patient’s EMR?

- **Spread the word** – tell the market that you are searching for the intended solution and trust me, vendors will automatically get in touch with you! There are more than what we know available now in the market. There are even Alzheimer’s Patient Assessment applications nowadays to assist in monitoring geriatrics! We all know remote patient monitoring is the future. On top of that, digital healthcare solutions are new, and companies are more than willing to partner up by offering an attractive price points in order to gain entry and build relationships with care providers. Keep a look out, and you will find many clinically viable and evidence-based solutions.
- **Reiterate needs** – whenever engaging with system vendors or device suppliers be sure to:
 - a. Tell them your Wishlist
 - b. Ensure (again) compatibility and intended outcome
 - c. Ask for hidden license options and interface services requirements (so proper budgeting or negotiation can be done)
 - d. Make sure the intended system is interface ready (with appropriate hardware and ports)

- **Ask for proof** – A point to note, I have also seen companies offer the moon and stars to hospitals but eventually, was a letdown. Ask for interface partnership letters, proof of concepts, visit install-bases, look for articles on LinkedIn or newsletters. Ultimately seeing is believing (as per the article in the last newsletter)

To end this article, I would like to reinforce that user involvement is key to successful integration. Users define the to-be state and verifies outcome, IT dictates the overall technical feasibility in the whole hospital’s IT environment whereas vendors will be the best go-to in terms of solution offering or models and options. Working hand in hand is not just a saying so to all, lets walk the talk! 😊

P.S. If anyone is interested in any solutions mentioned above, I no kid you they exist! Talk to us to find out more.

For further exchanges and intellectual sparring, reach out to Erin at:



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