# What if a PACS could grow patient referrals by 10% in one year?



## What if a PACS could reduce costs by 50% and increase your service?



## We believe PACS is cloud



Hi, we're DOBCO Medical Systems

## Not your typical PACS vendor

but very proud to be part of the **Dedalus** group







## Tap into the native cloud.



## A proven, sustainable & reliable medical imaging partner

#### 2011 300+ 8 14M+ 500k 18,5M **DICOM studies / year** Founded & countries customers

based in Belgium

logins per month

**DICOM images / DAY** 

- Experts in medical imaging, medical standards & IHE
- Focus only on pure web technology and cloud-based medical imaging solutions
- We define customer service as an attitude







### Business and workflow problems that **PACSonWEB** solves (1)



O Healthcare Portal (Patients and Physicians) and CD Replacement

Image Exchange (XDS and Proprietary)

Emergency workflows (stroke, bleedings...)

Context integration (EMR, e-Health-portals, Portals...)

Homereading/ Emergency Reading

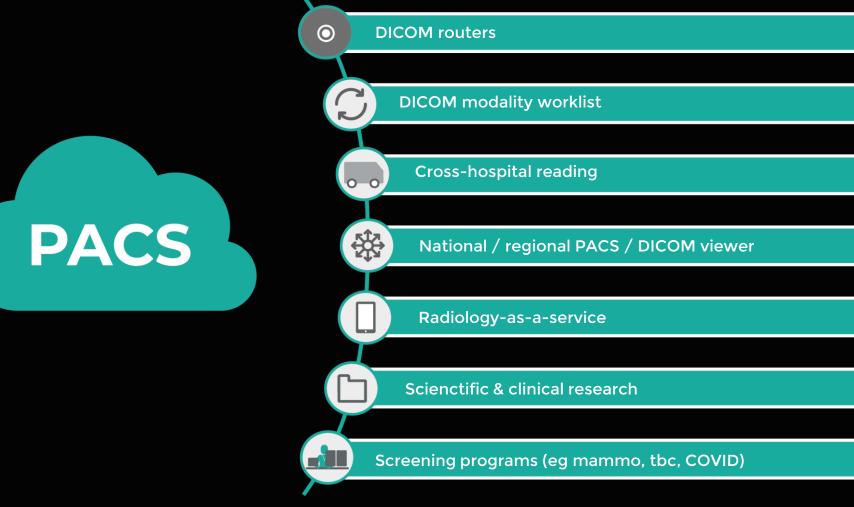
DICOM Archiving

Diagnostic PACS

0 0



## Other functions and edge cases that **PACSonWEB** solves (2)







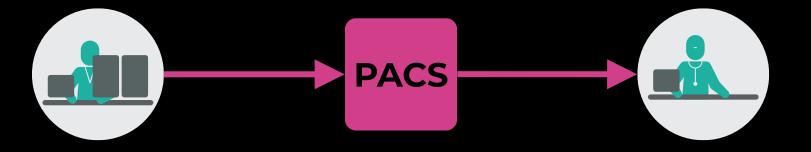
## More patients Lower cost



More patients: because a native cloud-based PACS solution improves the service towards you and your customers.

Managing your medical imaging services

### Delivering your medical imaging services



- Cloud = true ZFP teleworking
- pure web multi-monitor
- Easy integration of AI tools
- Collaboration with other hospitals
- Cross-hospital patient timeline

- Fast & easy access to results for authorised physicians
- Fast & easy access for patients
- 1 helpdesk for ALL endusers
- Secure & compliant
- One system with one viewer



Lower Cost: because a cloud-based solution resolves the limitations of an on-site system and reduces the need for **local IT support** 

### **Dependent on** your local system

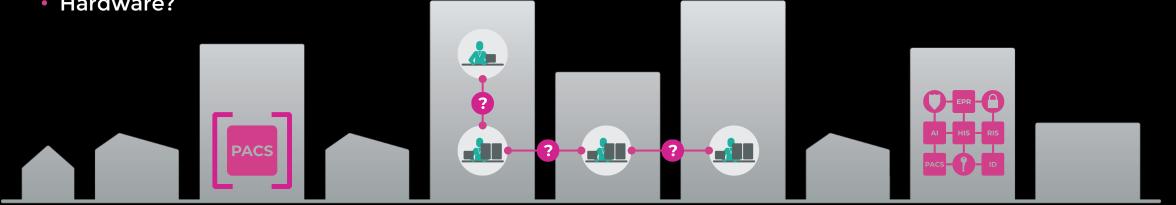
- Installation, administration, and upgrading?
- Scalable?
- Latest version?
- Support?
- Hardware?

### Confined to your silo

- External access?
- Anywhere & anytime?
- External sharing and collaboration?
- Access to any AI?

### Tied to costs & complexity

- Many different processes supported by mix of systems?
- Multiple partners and services?





## Only a true native cloud-based PACS solution is as easy as Google on your smartphone



- Still requires local installation
- Silos remain, in the data centre
- Additional investments for upgrading, upscaling, ...



#### True native cloud: one shared platform

- Everything in the data centre. Just connect to it, no installation.
- Shared resources: functionality, services and data available for any user with the right permissions, inside and outside the organisation.
- Everything built-in: collaboration, authentication, security, privacy compliance, upgrades, ...

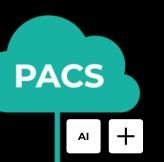


## **PACSonWEB cloud platform offers ultimate simplicity**

 No installation, simply connect and log in.

 ✓ Access to all shared data & functionalities
 − cross-hospital. ✓ Multitenant.

Don't install PACS in the hospital, connect the hospital to it.



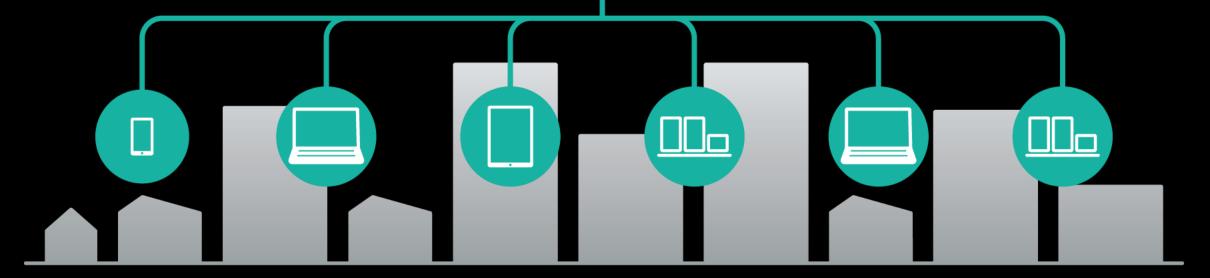
 $\checkmark$  One single system,

one single viewer, all workflows supported.

Always up-to-date
 & highly scalable.

 ✓ Secure & compliant by design.

 Excellent user experience on any device, anywhere & anytime.





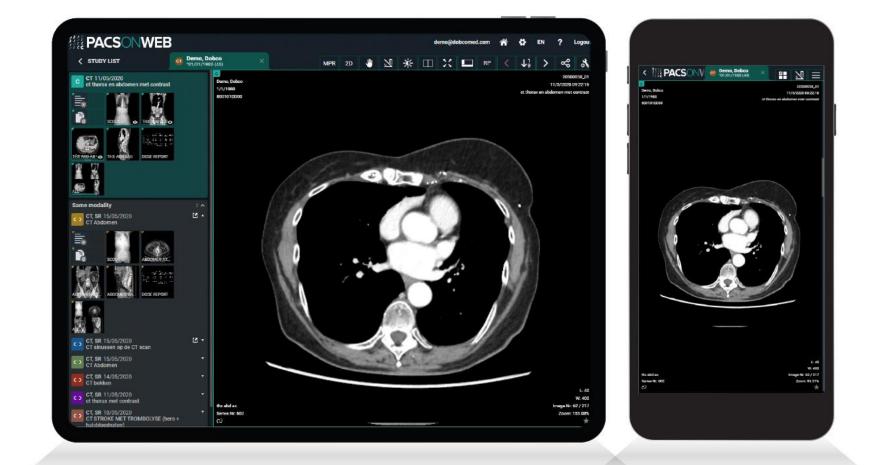
#### ✓ Fully web-based. No installation: simply log in and use our web viewer.

· ·									
167345									
	· ·		lere .	Lines of Longitud Date	NUMBER OF STREET		seasoner (m	Terrar of the Terrar	Name and Address of Concession
				Unexcitation for					
								TO STREET MET THOMSTOPHE	
								a triplety tampatest	
			Alternation						
		Cambrin .						CT bits of treast internation bits	
		Cener;		Unming Financial Date:				Contraction and insufficienting	Reary Documents
		-	Person					CT MAL	
THE R. P.									
			Angele						
			Average and particular sectors, long						
			ALCOHOL ( MURRAL PRIMA					TO OTHER DESIGNATION.	
			ALCONC. (PROPERTY PROPERTY AND					Too and the second	
		-	41.000					Assessment & Longer Longer	
	a a la caracteria de la caractería de la c						😸 réser turner-cé sésés 🛛 🍕	sease servector TT conversion of	WEEK 🗿 THO





## Access to all shared data & functionalities on any device, anywhere, anytime.





#### ✓ All the tools you need – and access to the patient's timeline.

+ 400 KTARY	Contraction of the						
ALTERN .	0	lane .	interate locate line		annual pr	El James	Bally Kenterni
	· been	liefes 1	distancelus Respirato Tata				
	1 mile 1					CONTRACTOR PROVIDENCE	
	000					at lateroods the magazine	
	Imp						
	· webb						
	<ul> <li>met</li> </ul>						
	<ul> <li>tary</li> </ul>						
	· Lanks					ET all unit and a fundamental tell	
	· ing					El rente met beatleannen	
	A market i					-	
and the second second	I LANSE						
848							
NUT NOT	<ul> <li>Looks</li> </ul>						
	<ul> <li>mass</li> </ul>	Annythin					
	<ul> <li>tend</li> </ul>	Antergreen					
	<ul> <li>mass</li> </ul>	Anterioren priller, hereitet, berg					
	a seete						
		A/ (MOD) providence, Tabler/				Never SI, Never, Lever, SJ/100	
		11.0000 (replaced Tester)	Annual Installed State			Description (see 1970)	
	TOURAL-	A1.04	Income in Company Lines			Halaner'S Collectoreng	
	a a 💽 tataata				S mer annan annan a		

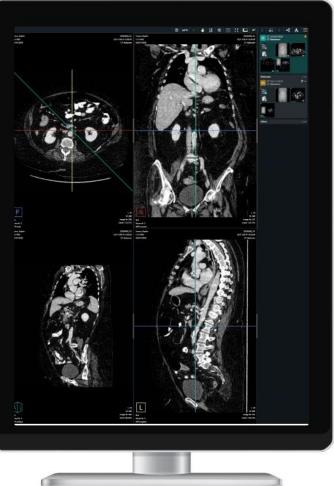




✓ Fast visualisation & effective hanging protocols – native MIP/MPR, with 3D visualisation neatly integrated.

RETURN OF Tributes Lakers Pro- tributes Return Laker Lakers Return Lakers Return Lakers Return Lakers Return Laker		literatur Inna Inna Inna Inna	annen de Franke Des	Concentration National Concentration	Concernance of the second		
All Annual Annua			deriver els treactur Tax		interest and		
tellipse Lakers Manage Verst Verst Verst Verst Verst	Ξ					-1	
Lakerse Raady Et 2 Reg d late	Ξ						
Annany RT 1: Sector Anna dise	Ξ	Daniel .					
teent teen							
						CTERCAPHER PROMOTES	
a full management of the							
Annese areas distance and a							
history ( )	Series.					ET altractioned internation/til EFEETET	
have set a						El restornet institutiones	
Manage Salar							
240							
A REAL PROPERTY AND A REAL		Test					
		Annyme					
		Antegenese					
		Acception patient, however, trap					
1		weet					
1		AL COLO J propheres Tradary				Therapy STL, Transp. Lanar, SUF BEL	
10		al (MCG) proprietion (Feature)	increases managing place	21/07/08/11 10:88 00		Departiti, Testas, Janes, MARE	
	e 💽 Latassetter 🖷					terran Treame	1000 O 1001







 ✓ One single system, one single viewer, cross-hospital patient timeline.





## The result: more patients and a lower cost



- One flexible PACS, single shared infrastructure, supporting workflows from A to Z, from the order to the distribution of images and reports, inside and outside the organisation.
- A better & cost-effective service
- Very fast implementation and a very high user adoption rate
- A system that is always up to date with the latest version

#### We deliver support for all end-users

#### RADIOLOGIST

- Full PACS anytime, anywhere, on any device
- Better service to physicians and patients
- Best-of-breed integrated artificial intelligence
- Patient image timeline

#### PHYSICIAN/GP

- One interface for all patients regardless of source
- Ease-of-use
- Images and rich reports

- CIO
- Highly secure & compliant
- Helpdesk for all end-users 24/7
- Pure web
- Highly scalable
- Less internal resources on PACS

- Service quality to and from
- radiology

CEO

- CAPEX -> OPEX
- Collaboration with other hospitals
- Future proof
- Lower cost, up to 50% less TCO

#### PATIENT

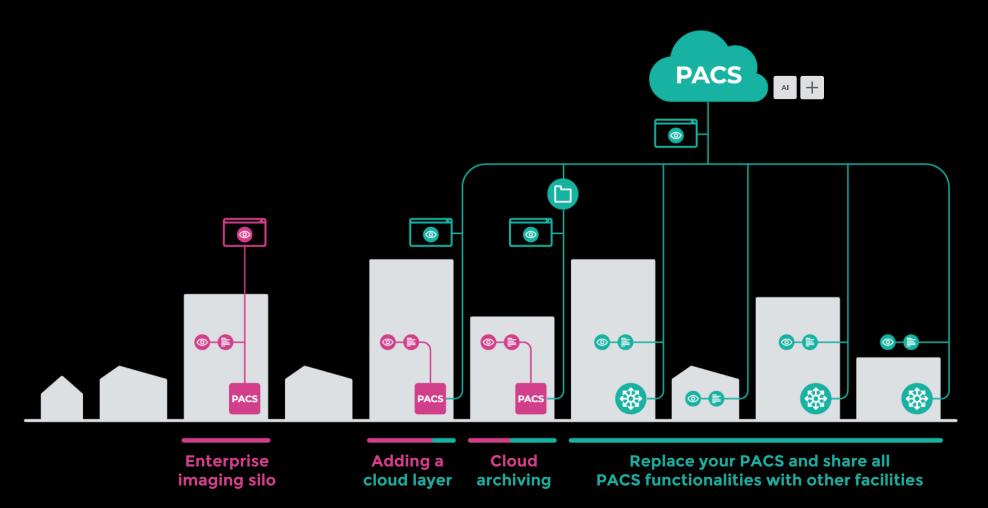
- Easy, user-friendly medical imaging history
- Empowered to share with other caregivers
- Better care delivery







## How? Innovative growth path

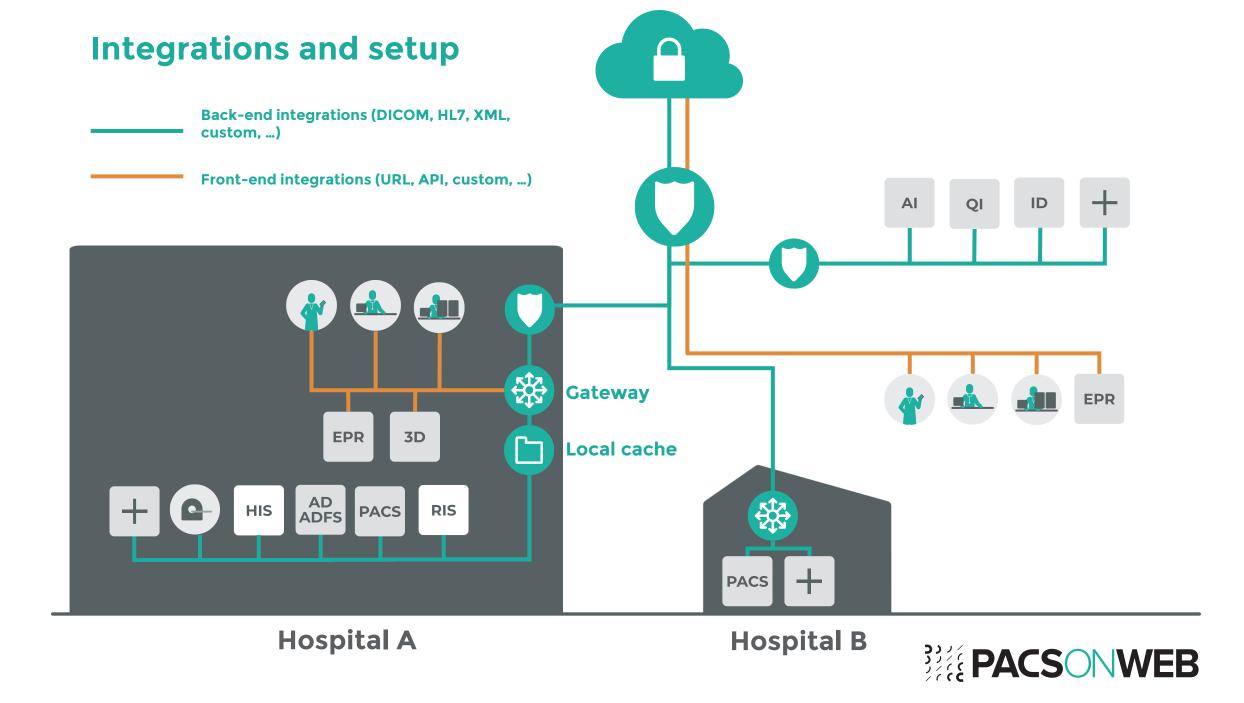






## Deliver any workflow you need





# LIVE DEMO





## Workflows





Have the right information available at the right time with a single viewer

- CD/DVD- and filmless workflow
- Single, consolidated viewer for all medical imaging results
- Increased staffing flexibility
- Automated import and export of studies

## Optimise exchange of studies with other care providers

- Hassle-free import and export of studies
- Fast sharing of results with other care institutions
- Effortless participation in screening programs
- Ensured protection of patient's privacy



## Establish a long-term archiving strategy

- Predictable, effortless, costeffective scale-up of archiving infrastructure
- Streamlined medical archiving services
- Ensured uptime and operations



#### Full PACS functionalities, anywhere, anytime, on any device

- Core PACS functionalities anywhere, anytime, on any device
- Smart hanging protocols for faster reading of relevant priors
- Integrate emerging technologies
- Full patient timeline

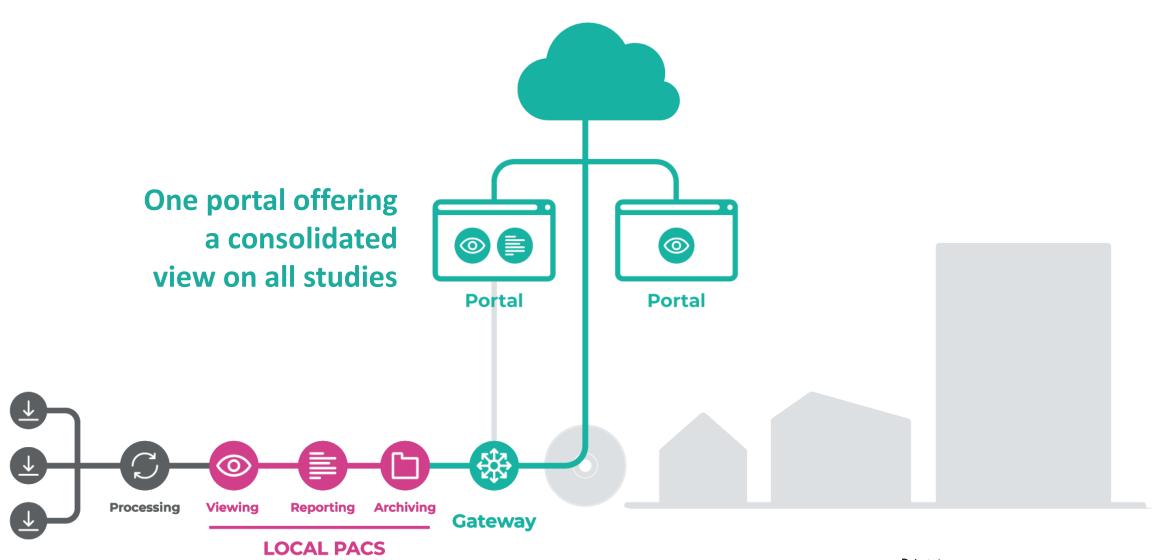
Collaborate in a care network Share studies across all care lines Archive in the cloud **Diagnose** anywhere, anytime, any device



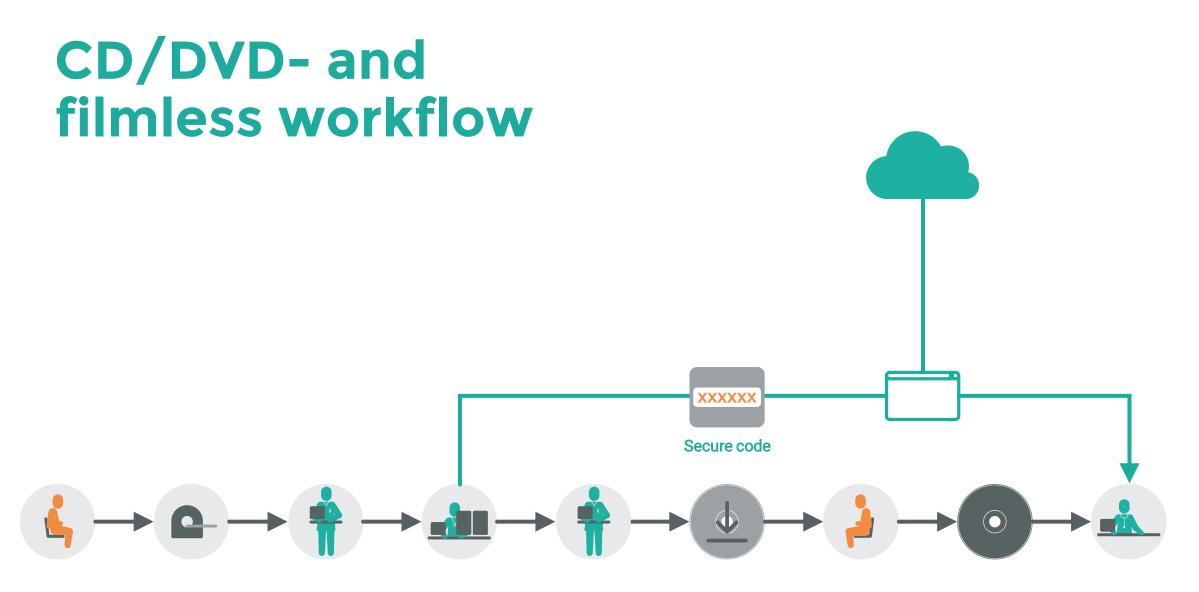


# Have the right information available at the right time

## **PACS WEB**

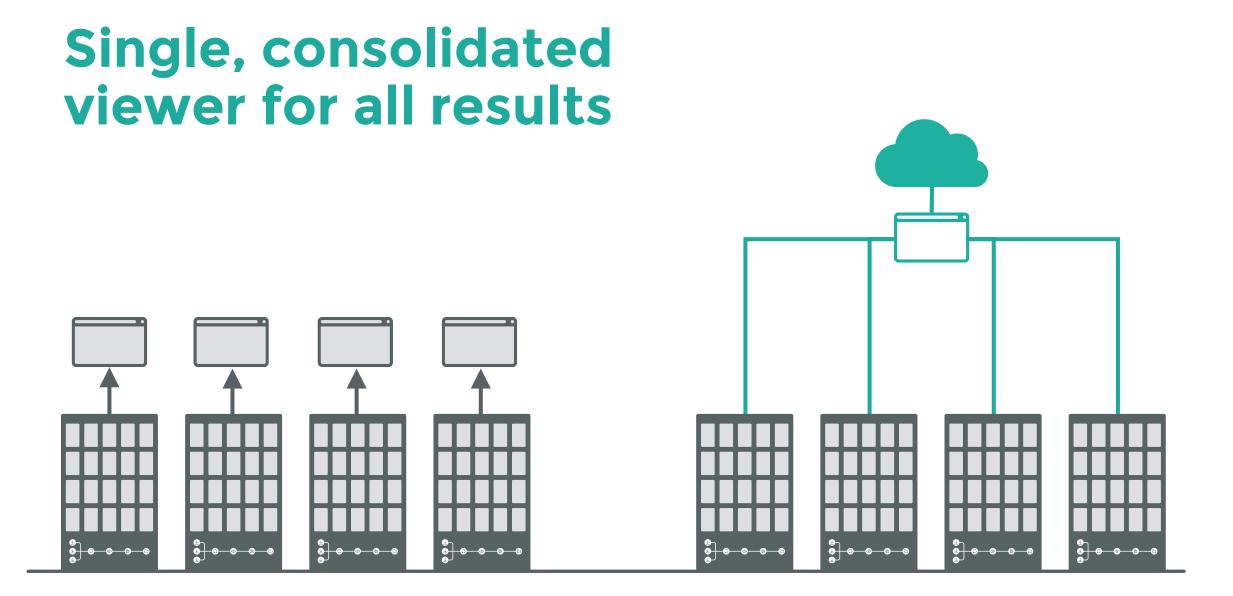






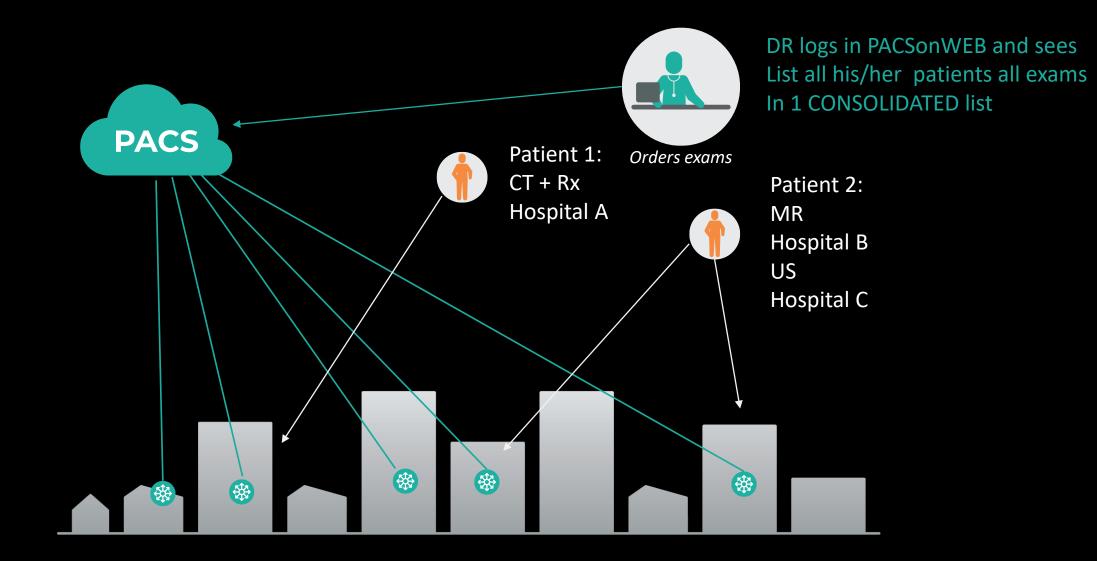
Classic workflow in radiology department







## Multi-tenancy explained: use case referring physician & multiple patients, different exams



# Single, consolidated viewer for all results

- Single login, authentification via eID or bankcard
- Studies consolidated per patient
- Share studies based on patient consent



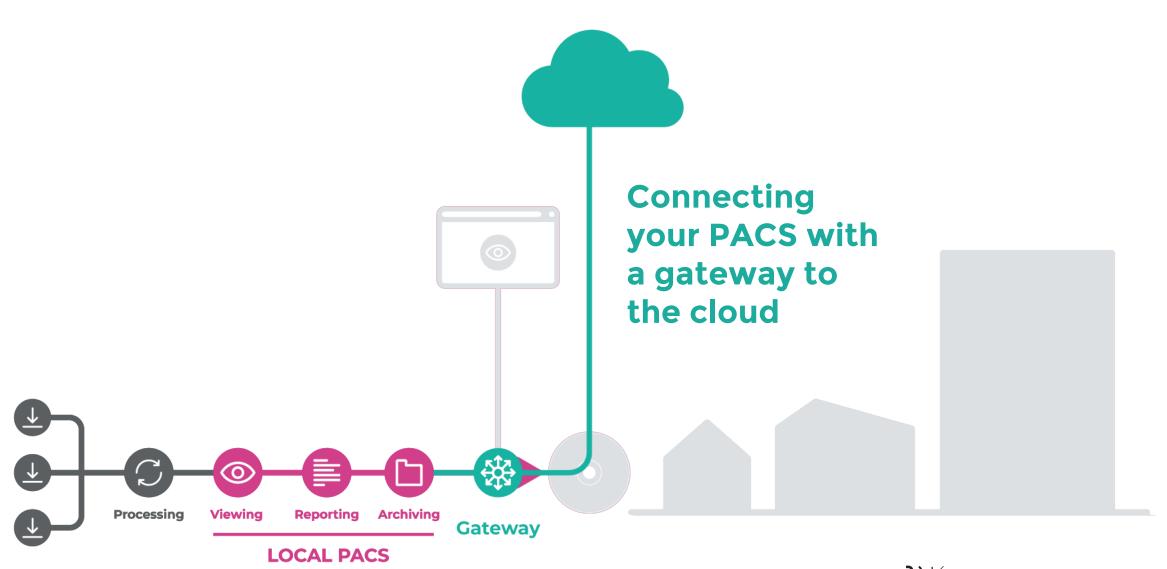




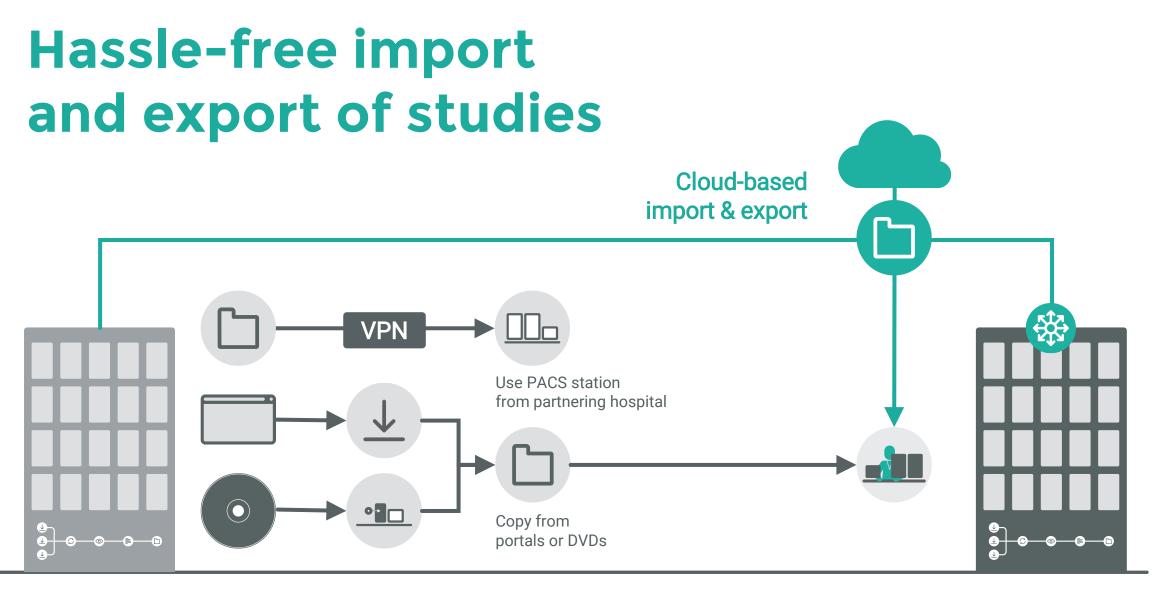


# Optimise exchange of studies with other care providers







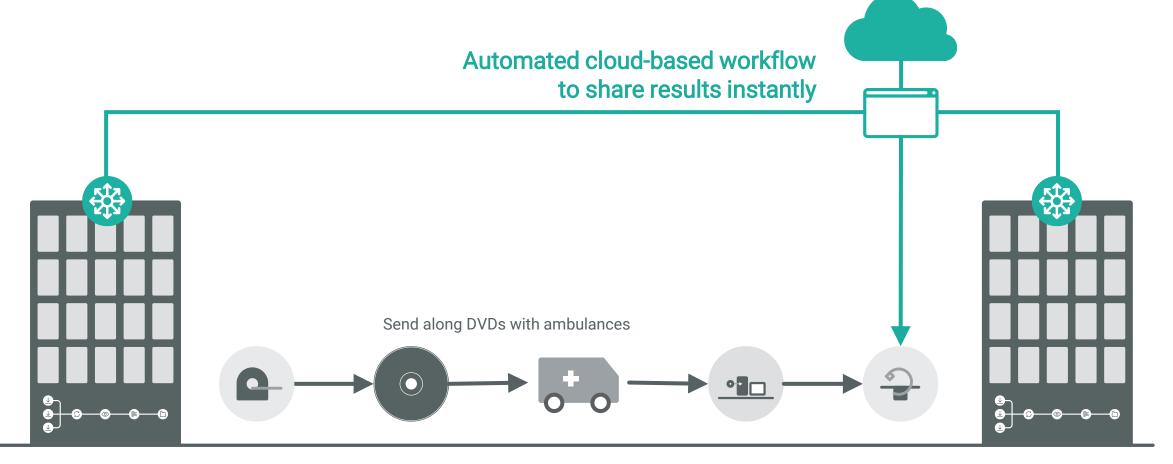


How to easily access medical history of a referred patient

Ad-hoc and manual import



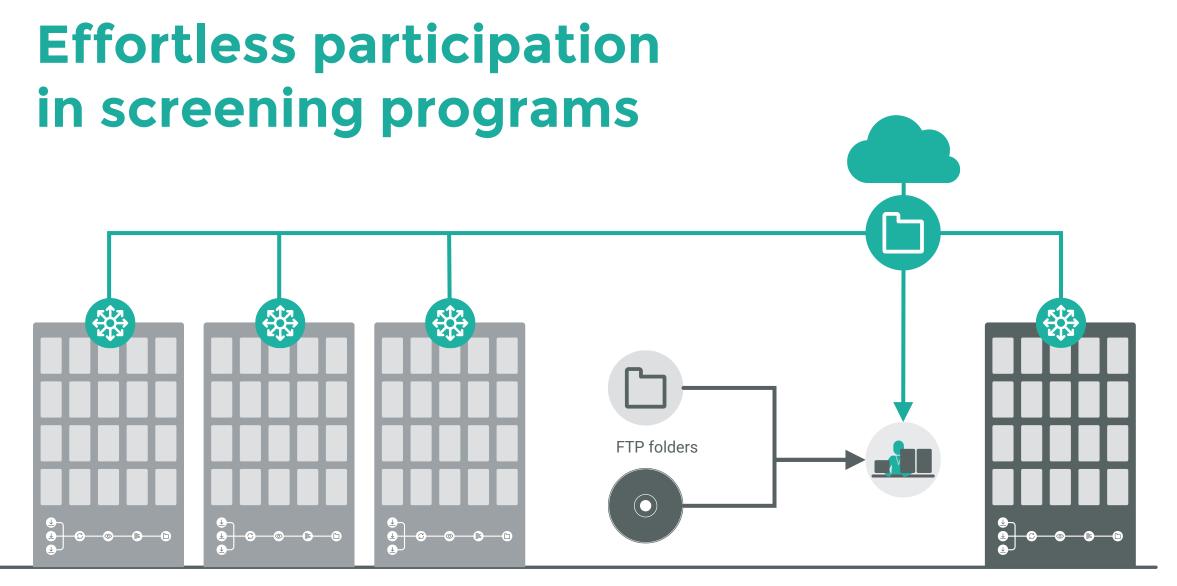
# **Fast sharing of results**



Fast sharing of medical imaging results in case of emergency

**Risks and delays** 





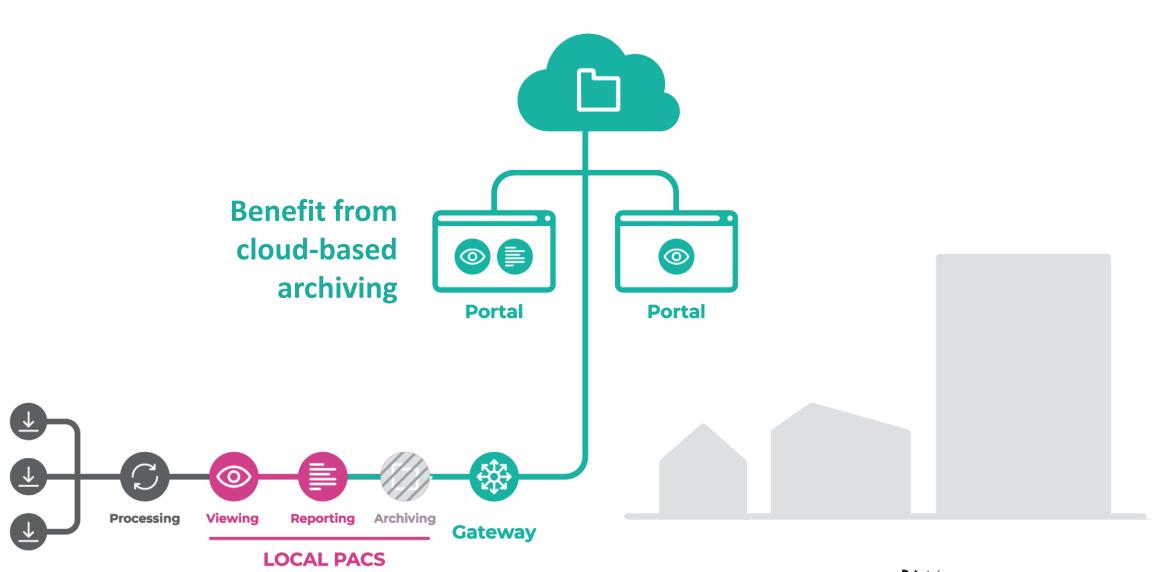
How to organise a screening program ?

Manual work and security?



# Establish a long-term archiving strategy







#### Predictable cost at a lower TCO





Hidden operational costs



# Ensure uptime and operations

#### More than storage - a medical archive

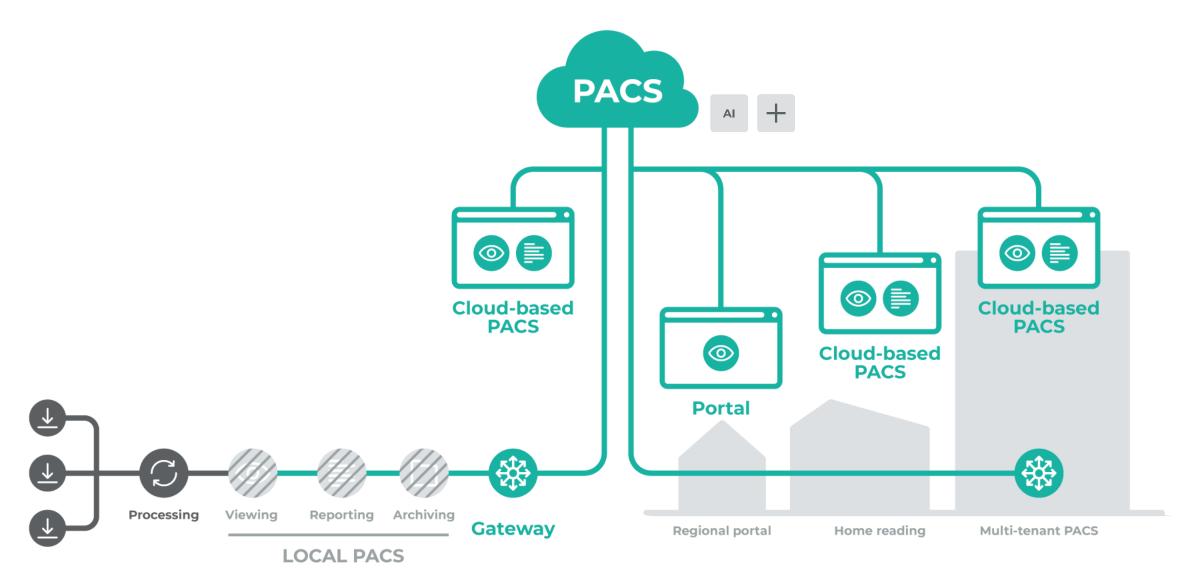




## Full PACS functionalities, anywhere, anytime, on any device

PACS







## Fast and smart tools for radiologists



- Smart hanging protocols
- Self-learning relevance between studies
- AI tools store
- MIP/MPR and better 3D integration
- Mammo reading





# **Enter the true cloud**



Healthcare Portal Image Exchange **Emergency Workflows Context Integration** Home & Emergency reading **DICOM** Archiving **Diagnostics PACS DICOM** routers DICOM Modality Worklist Cross-hospital reading National / regional PACS / Dicom viewer Radiology as a service Scientific & clinical research Screening programs



# Enter the true cloud



Usecase 1 PACSonWEB

# **Cross-hospital reading**

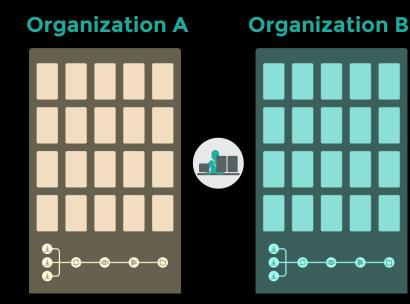


#### The challenge:

In general: There is a need to report studies cross-hospital (different RIS, different PACS)

**Examples:** 

- One organized/group of radiologists that are working in different institutions
- Private initiatives or organizations that are collaborating with radiologists that are working in a hospital
- Teleradiology
- Organisations that share a modality (such as MR of CT )



#### A few challenges...

- Privacy should be covered
- Different internal information systems / PACS systems
- More then image or report sharing
- Workflow is needed cross-hospital (order, worklists, ...
- Including speech recognition
- The report must be snt back to the organization that acquired the images
- Patient history should be combined



# Solutions today...

Solution 1: Just put a second PACS workstation in the other organization!



Physical PACS workstation 1 (Organization A)

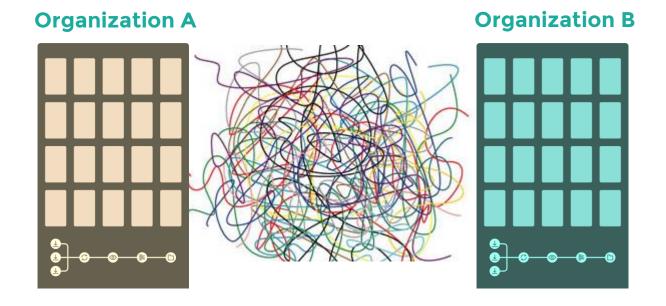
Physical PACS workstation 2 (Organization B)

- **2** x workstation / speechmike / monitors
- **O** Difficult to manage and to make the nece
- **O** Most of the time client VPN security risk
- **8** No combined patient timeline
- **O** If one workstation: software conflicts
- **Opgrades?**



# Solutions today...

Solution 2: We will exchange images/orders/history, make reporting work in the other PACS and send the report back, etcetera, etcetera



Integrations between different PACS / RIS / EPD vendors

- Difficult because not only image or report exchange
- **O** Workflow / Patient / Study conflicts
- **O** Conflicts in concurrency (locking studies)
- Solution Too expensive for relatively a small number of studies



#### **PACSonWEB Cross hospital reading**

- Fully web-based.
   No installation: simply log in and use our web viewer.
- ✓ Cross hospital worklists
- $\checkmark\,$  Combine patient timeline if needed
- ✓ Hospitals keep existing PACS / RIS / Infrastructure



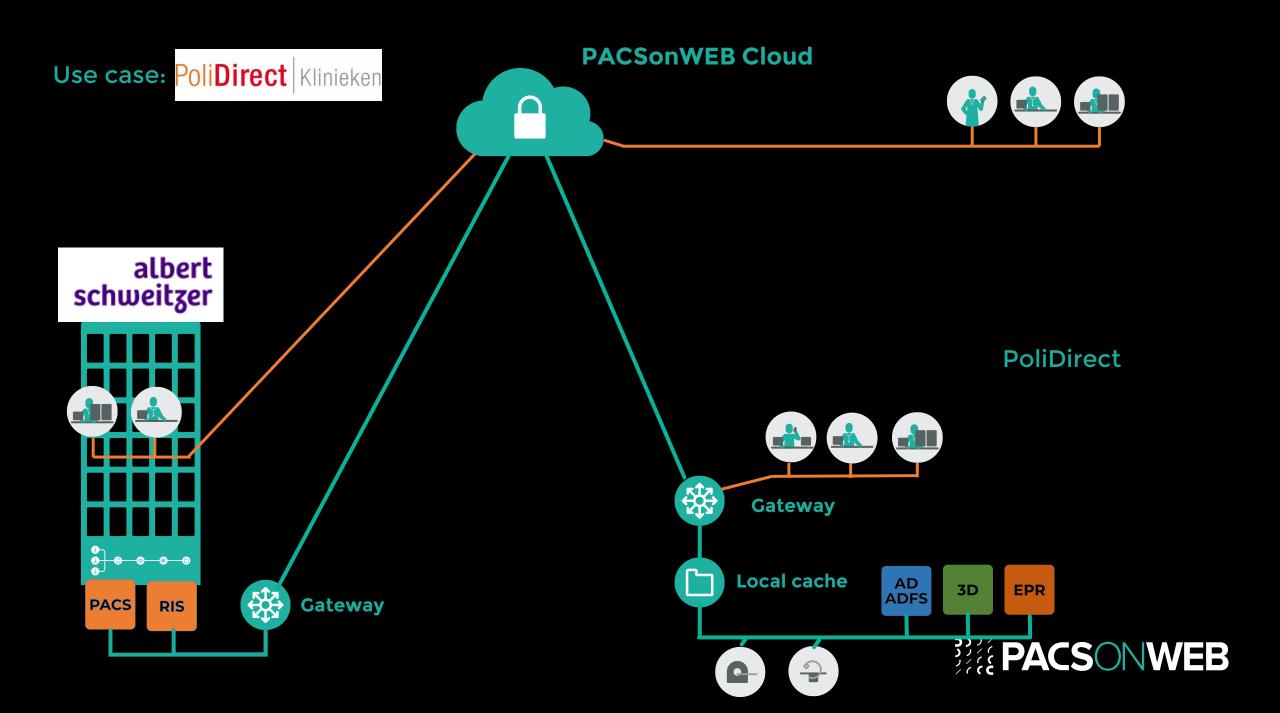




#### Usecase 2 Polidirect / HDC & Albert Sweitzer

# 1ste & 2<sup>nd</sup> line reading





Usecase DC Klinieken

# **Radiology As A Service**



