First PACS installed in Midi-Pyrénées regional project: feedback from the CHIVA site

The Centre Hospitalier Intercommunal du Val d’Ariège (CHIVA), first-hand member of the Groupement de Coopération Sanitaire (GCS) Télésanté Midi Pyrénées, is the first site to be equipped with Carestream Vue PACS, selected within the framework of the project of shared PACS and exchange and sharing of medical images for the region’s 57 healthcare organizations. We have asked Dr Dubois, Radiologist and Head of Medical Technology, and Aurélien Caumette, Head of Information Systems at the hospital about their experience with the new system.

Could you briefly describe your hospital centre?

*Dr Dubois:* The Centre Intercommunal du Val d’Ariège (CHIVA) is an amalgamation of two hospitals and is located south of Toulouse, 10 km from Foix. It has 570 beds, 330 of which are short stay and includes an Emergency department totalling 34,000 admissions per year and a Radiology department equipped with a CT scanner and MR imaging facility performing in total more than 70,000 exams a year.

What were the important steps of this project?

*Mr Caumette:* Back in 2008, Dr Dubois told me of this intention to build a PACS for CHIVA but at the time we didn’t have the financial resources for investing in such a project. On the other hand, GCS Télésanté Midi-Pyrénées wanted to set up a regional shared PACS project, so naturally we joined the group and were active participants in the follow-up committee. Furthermore, the proposed economic model suits us perfectly as it operates on a pay-as-you-go formula, which limits initial investment and removes any obsolescence, archiving or regulation compliance issues. With this formula, we are paying a reasonable price.

*Dr Dubois:* Our initial project was to archive and distribute our images internally; with the GCS project there was the added possibility of exchanging and sharing medical images with the other project participants in the region, particularly the CHU Toulouse.

How did the installation go?

*Mr Caumette:* The system was installed and up and running in no time at all. We worked very well with the Carestream teams and, within three weeks, the installation, connections and user training were complete. After a month, the PACS was operating routinely.

What were your impressions after a few months of operation?

*Dr Dubois:* The diagnostic workstations are very user friendly and were quickly adopted by radiologists. Now 80% to 90% of examination findings are interpreted on PACS workstations. It was extremely important to us to get clinicians on board quickly, most of whom were not familiar with PACS. They very quickly mastered the Vue Motion distribution portal, which allows rapid access to examination findings and provides the relevant tools. As testament to this excellent collaboration, we ceased producing films two months after installation.

*Mr Caumette:* We’re now over 6 months down the road with more than 500 workstations connected and the system works perfectly without any downtime. The dual safety feature provided by local two-year storage and cloud archiving leaves us feeling safe in the knowledge that our records are backed-up and that standards are adhered to. One other advantage that we had underestimated was the ability of the network to link the system with patient records, enabling us to strengthen our monitoring of patient identities.

What are your next projects?

*Dr Dubois:* I have now completed the test phase of the night and weekend medical call duty project, which is part of the continuity of care. Even though the quality of connection at my home is rather poor, the test was wholly positive. Equipped with a laptop PC and a radiology display, I can able to interpret emergency exams performed at CHIVA with a satisfactory time to display thanks to streaming technology. The project is now in the formalization phase and should be rapidly deployed across the hospital and also private practices in the coming months. We are now expecting the development of the system at the regional level with the possibility of exchanging and sharing medical images with the other participants, both public and private, including the CHU and university consultants, but also private practitioners and patients.