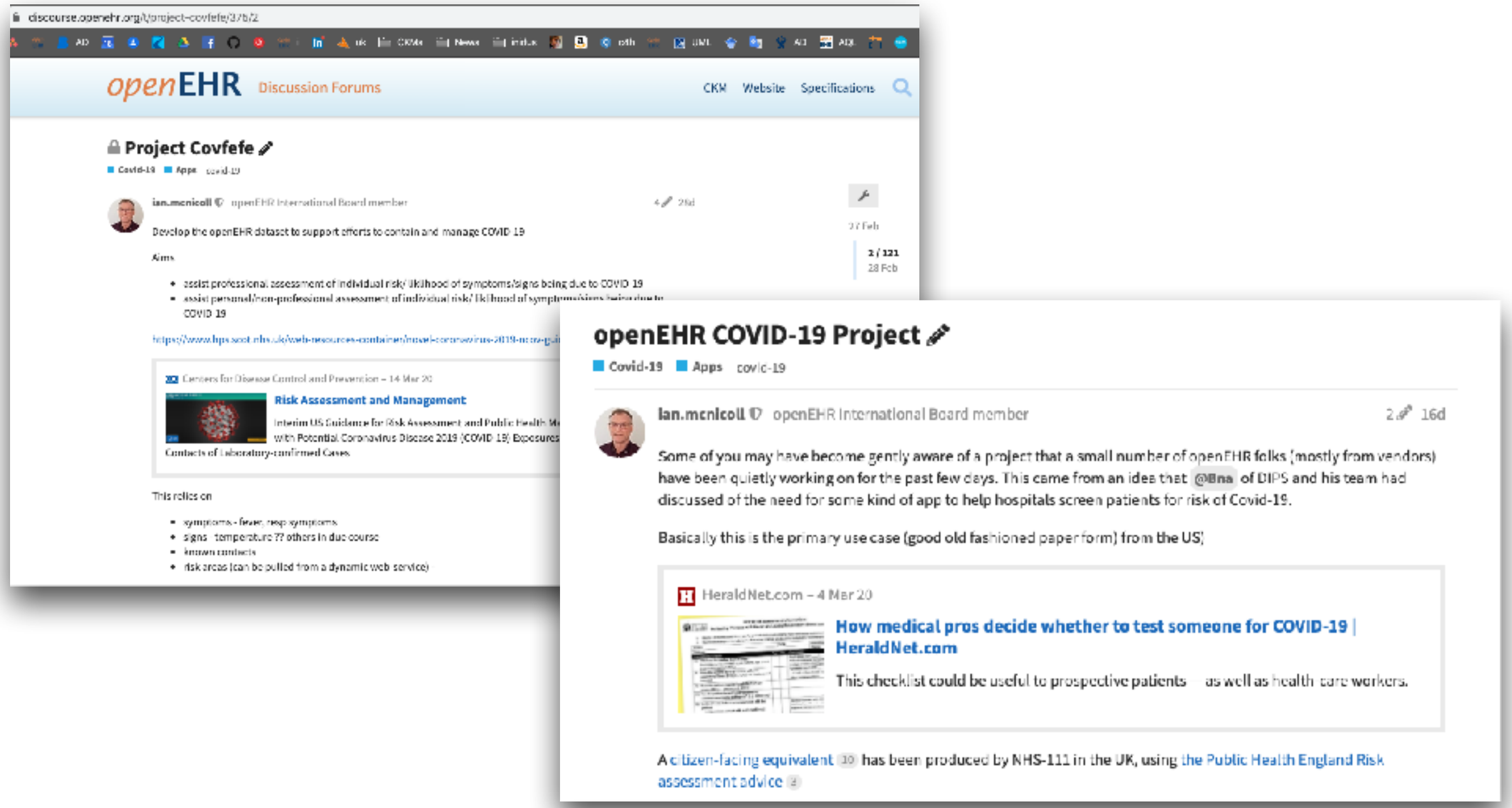
openEHR community: Covid-19 response

openEHR

Project Covfefe



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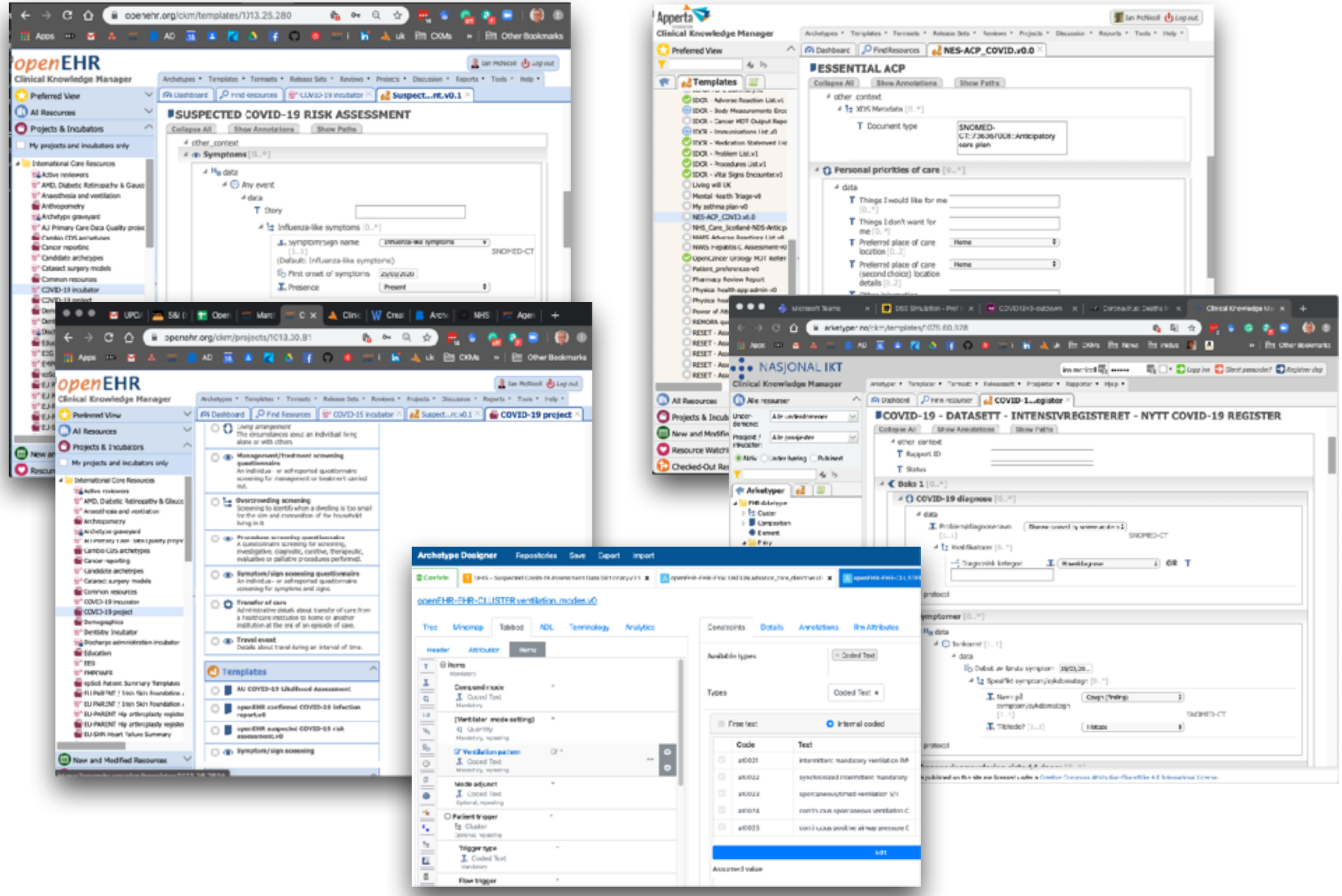
openEHR
Clinical Knowledge Manager
SUSPECTED COVID-19 RISK ASSESSMENT
Apperta
ESSENTIAL ACP
NASJONAL IKT
COVID-19 - DATASETT - INTENSIVREGISTERET - NYTT COVID-19 REGISTER
Archetype Designer

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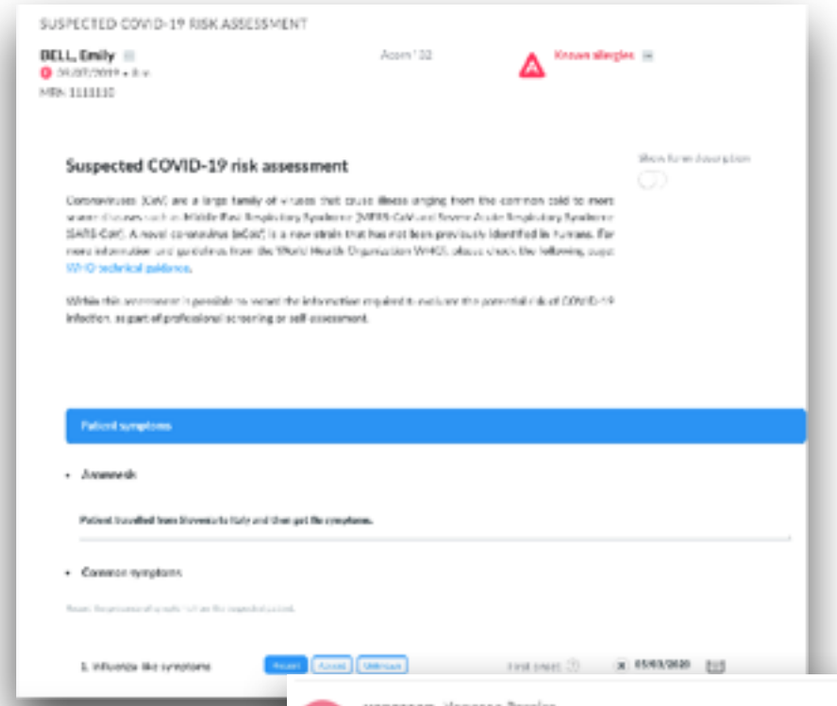
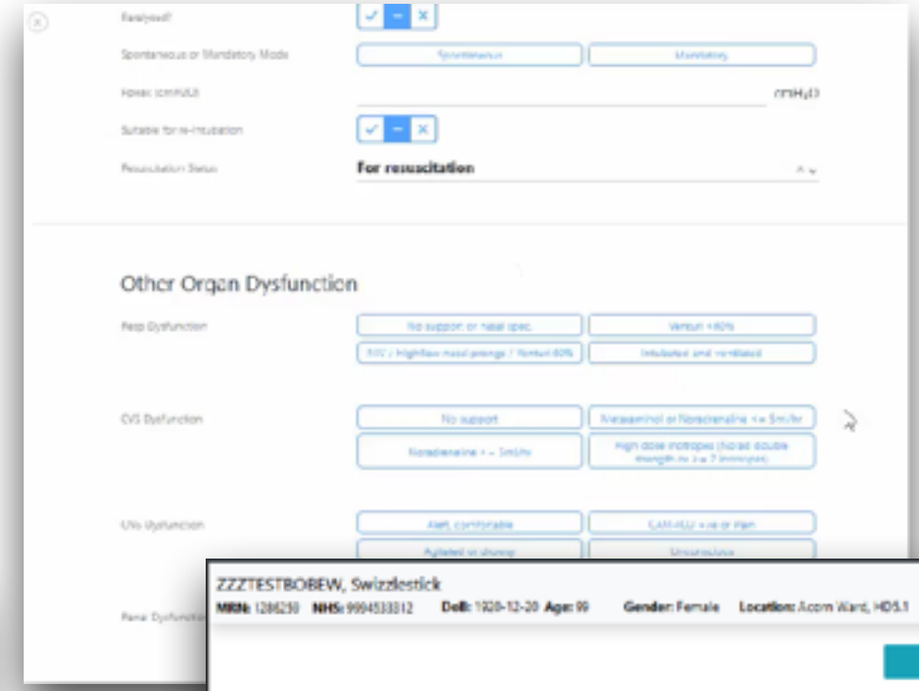
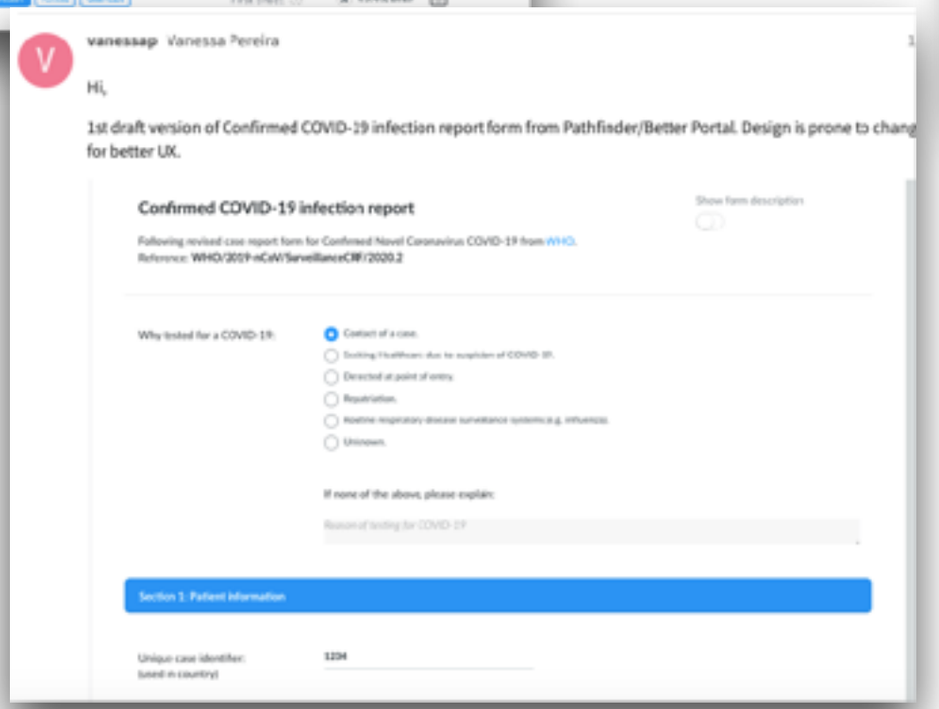
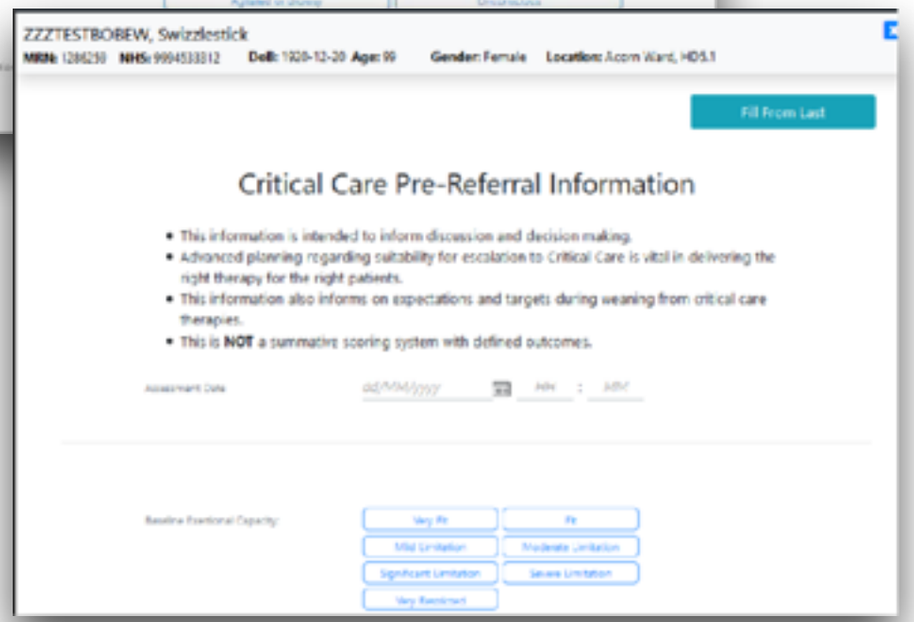

SUSPECTED COVID-19 RISK ASSESSMENT
BELL, Emily
MRN: 1111111
Known allergies
Suspected COVID-19 risk assessment
Patient symptoms
Assessment
Presenting symptoms


Paralysed?
Spontaneous or Mandatory Mode
Suitable for re-intubation
Resuscitation Status
For resuscitation
Other Organ Dysfunction
Resp Dysfunction
CVS Dysfunction
Renal Dysfunction


vanessap Vanessa Pereira
Hi,
1st draft version of Confirmed COVID-19 infection report form from Pathfinder/Better Portal. Design is prone to chang
for better UX.
Confirmed COVID-19 infection report
Following revised case report form for Confirmed Novel Coronavirus COVID-19 from WHO.
Reference: WHO/2019-nCoV/SurveillanceCRF/2020.2
Why tested for a COVID-19:
Contact of a case.
Returnee.
Unknown.
If none of the above, please explain:
Section 1. Patient information
Unique case identifier:
(used in country)
1234


ZZZTESTBOBEW, Swizzlestick
MRN: 1286250 NHS: 9994533312 DoB: 1920-12-20 Age: 99 Gender: Female Location: Acorn Ward, HDS.1
Fill From Last
Critical Care Pre-Referral Information
This information is intended to inform discussion and decision making.
Advanced planning regarding suitability for escalation to Critical Care is vital in delivering the right therapy for the right patients.
This information also informs on expectations and targets during weaning from critical care therapies.
This is NOT a summative scoring system with defined outcomes.
Assessment Date
dd/MM/yyyy
Baseline Functional Capacity
Very Fit
Fit
Mild Limitation
Moderate Limitation
Significant Limitation
Severe Limitation
Very Restricted

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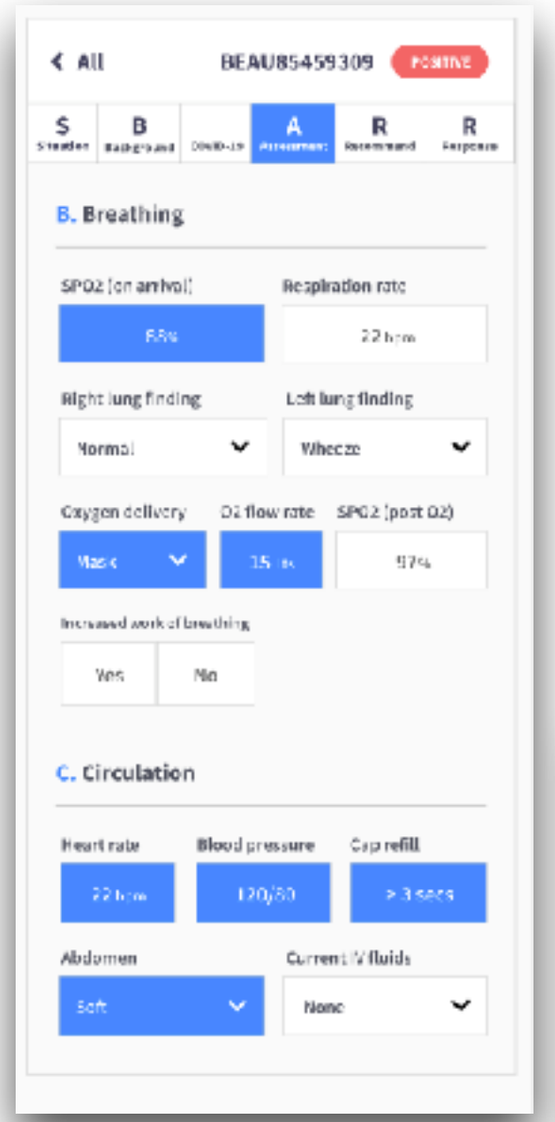
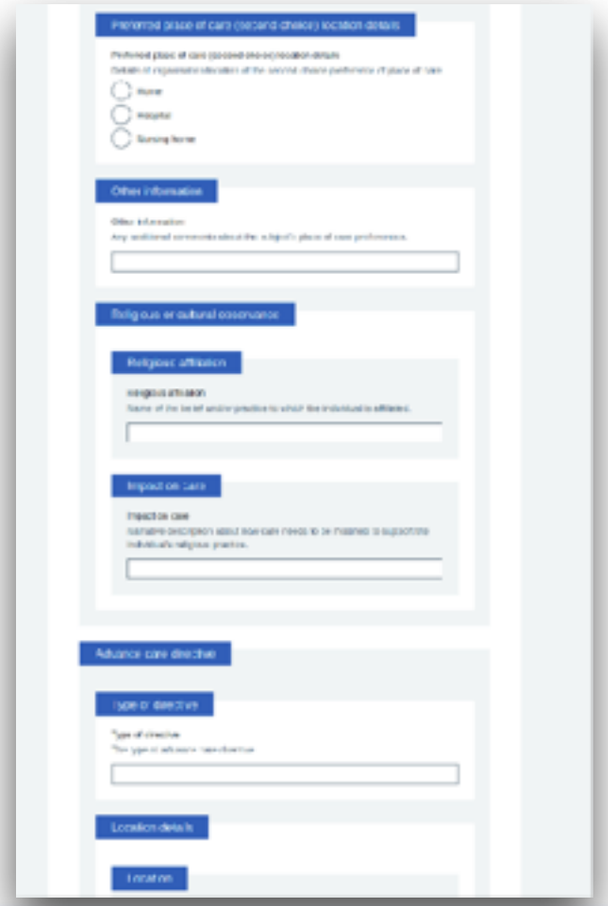

All
BEAU85459309
POSITIVE
S
B
A
R
R
B. Breathing
SPO2 [on arrival]
Respiration rate
Right lung finding
Left lung finding
Normal
Wheeze
Oxygen delivery
O2 flow rate
SPO2 [post O2]
Mask
97%
Increased work of breathing
Yes
No
C. Circulation
Heart rate
Blood pressure
Cap refill
120/80
> 3 secs
Abdomen
Current IV fluids
Soft
None

github.com/AcpertaFoundation/COVID-19-screening-interface
COVID-19-screening-interface
Covid-19 Screening Interface using Covid-19 OpenEHR Clinical Models
Developed in the Open
Summary
This repository contains software which enables an organisation to rapidly deploy a Covid-19 screening programme. Data collected will be stored in the local openEHR database and reports to the WHO standard made available.
Being Open Source, the application can be implemented within an organisation using existing systems therefore reducing privacy and information governance challenges associated with cloud systems.
Being modular, the application can be connected to an existing openEHR repository or operated with a stand-alone repository.

PatientSky
FIGHT COVID-19
Kampen mot COVID -19: Registrer symptomer og hjelp andre
FIGHT COVID-19
Kampen mot COVID -19: Registrer symptomer og hjelp andre



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discourse.openehr.org/t/covid-19-diagnosis-and-treatment-decision-support-openehr-templates-and-rules/516

open EHR Discussion Forums

COVID-19 Diagnosis and Treatment Decision Support: openEHR Temp

Covid-19 Appx

Shan Shan Nan 2d

Dear Colleagues,

On behalf of all the members of Xudong's @Wood team, I'm pleased to share our GDL rules and related archetypes regarding the Chinese COVID-19 Guideline. The files are now available on GitHub (https://github.com/ZJU-BME-VICO/openEHR-COVID-19). Everyone is encouraged to test, use, fork, and feedback on the rules and archetypes freely.

In China, COVID-19 broke out in December 2019 and has been under control for a couple of weeks. Of all the 81093 patients, 72703 are already fully recovered and reunion with their families. This achievement is significant, and the experiences leading to it are worth sharing with the world. Some researchers are already working on translating the Chinese guidelines to English and Persian (probably other languages as well) to facilitate the sharing among countries. We, as informaticists, believe taking advantage of the open standard (i.e., openEHR) and a formal guideline language (GDL2 in this case) would not only accelerate the sharing process globally but also reduce the ambiguity in the narrative texts.

Since our primary goal is supporting the diagnosis and treatment, the archetypes and GDL rules are adopted from the diagnosis and treatment part of the Chinese guideline. The data elements and rules in the rest parts of the guideline are out of our scope. The GDL rules are authored and validated by the GDL2 Editor. Detailed instructions are available in GitHub.

COVID-19 Diagnosis and Treatment CDSS

PatientID: 12345678 **NAME:** Sam **Gender:** Male **Age:** 35yr

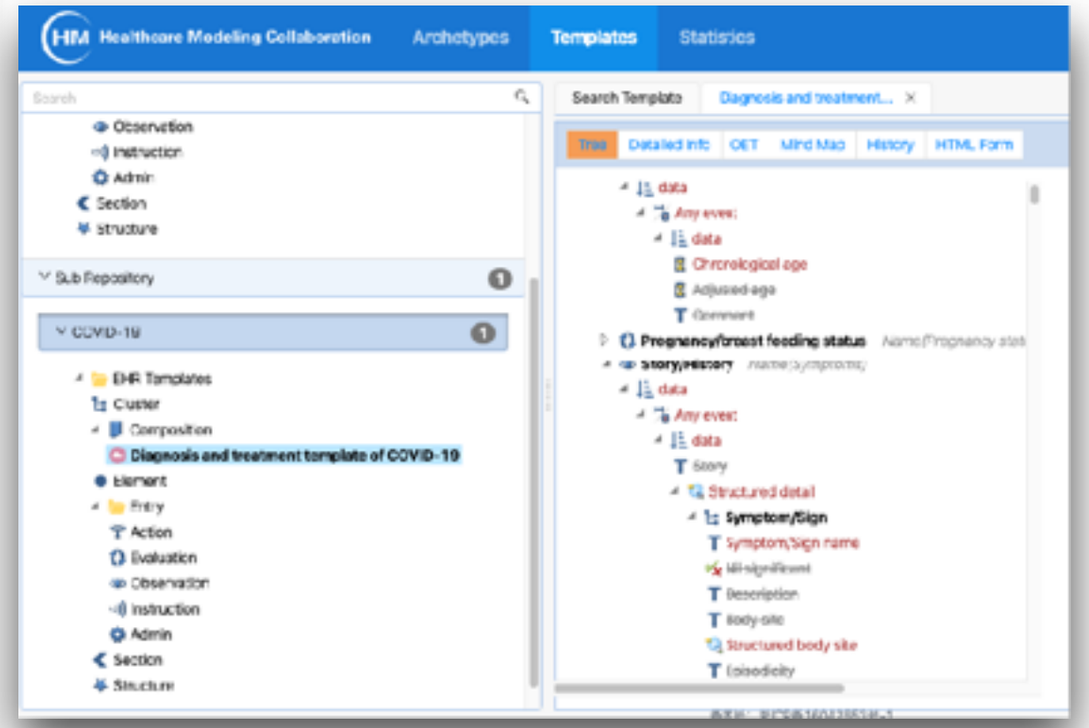
Diagnosis

Reference Diagnosis: COVID-19 Critical

Epidemiological History	History of travel to Wuhan and its surrounding areas within 14 days prior to the onset of the disease
Co-morbidities	Respiratory failure
Observations	rRT-PCR: positive, Temperature: 39.4°C, SaO2: 90%, No BP records.WBC: 3.5, Lymphocyte count: 1.4; Dry cough, Fatigue, Diarrhea, Slight clinical symptoms, Fever.

Treatment Suggestions

- Procedures
  - Admitted to hospital



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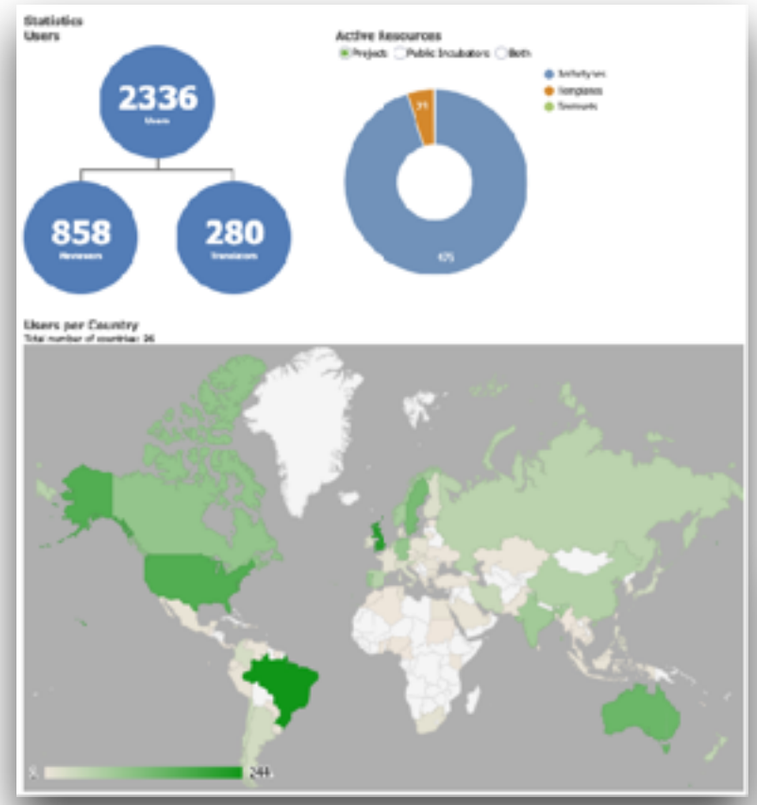
Community



nedap

Ocean HEALTH SYSTEMS
Smart Data. Smart Care.

DIPS

Cambio Healthcare Systems

OPUSVL

code24

better

inpeco

digia

tieto

CORECONSULTING

PatientSky

vitagroup

inidus

Medicalchain