

## St. Joseph Health System eCW to Allscripts EHR Migration

### Overview

Conversion Project:

- Internal Medicine Practice
- eCW Source System
- 33GB MySQL Source DB

### Background

We recently navigated one of our clients—a large multi-specialty integrated delivery network (IDN)—through a conversion from eCW to Allscripts Enterprise EHR to support the acquisition of an internal medicine practice. We worked under an aggressive timeline to help convert large volumes and complex clinical. Following Galen's best practice conversion process and leveraging the Galen Clinical Conversion Toolkit suite, we gathered requirements, performed the translations and mapping, and executed testing and validation.

### Lessons Learned

#### Global Challenges

- Data stored at encounter level instead of patient level
- Duplicate data at each encounter instead of reference at the patient level for each encounter
- Free text allowed for virtually every type of entry rather than dictionary lookup
  - Very little usage of dictionaries or standardization with codification
  - As a result, user cannot leverage intelligent mapper
  - As a result, de-duplication/listing distinct is a large task

#### Patient Demographics

- Lack of one-to-one mapping from legacy MRN to target EHR MRN
- When matching using name – issues with mis-spellings, last-name changes due to marriage, etc.

### Conversion Statistics

Data Type	Volume	Complexity
Providers	3	N/A
Years of Data	6	N/A
Patients	9,500	Medium
Medications	66,566	High
Immunizations	6,320	Low
Problems	157,284	High
Allergies	3,175	Medium
Results	43,173	Medium
Vitals	569,050	Medium
Documents	183,438	High
Images	256,244 (113 GB)	Medium

Galen Healthcare has proven themselves as true partners for the conversion processes. They put forth an extraordinary amount of effort to extract critical medication list information that seemed impossible to get. Their skilled technicians committed themselves and developed the incredibly complex process that yielded the information we needed. This saved our clinical customers hundreds of hours in manual data entry work.

ROBERTO ODUCAO, Director, Electronic Health Records, St. Joseph Health System

## Lessons Learned (continued)

### Medications

- Difficulty in distinguishing past meds versus active meds
- Dosage and formulation stored as separate data elements instead of being encapsulated in medication name

### Problems

- Past Medical History
  - Stored as a single delimited string at each encounter
- Social History
  - Recorded as a question and answer within the note
- Standard issues with problems – ICD9 to Medicine (one to many)
- Difficulty in converting discretely

### Document/Note

- Notes stored as XML and need to be converted to RTF
- HTML converted to an RTF using an XSL style sheet
- The XML of the note not locked until the providers lock the encounter

### Allergies

- Replicated at each visit
- Reactions recorded as unstructured data

### Results

- Separate extracts could be required for in-house and interfaced results – may need to handle differently when importing into target EHR

### Images

- Free-text, custom names permitted for document types

### Vitals

- Can be entered as free-text without constraints

We recently worked with Galen on a conversion of a three provider practice with six years of discrete data. Our biggest concern was the discrete data that this practice had gathered over the years was similar to our organization's discrete data as 70% of the patients who saw this practice also visited some of our physicians from time to time. Galen wasted no time creating and executing a series of tools/scripts to narrow down the results that matched the existing Enterprise EHR dictionary entries; this created an improved cross mapping experience for our customers and undoubtedly sped up the conversion process. Galen also wrote specific scripts to restrict any duplicate data from being filed into our Enterprise EHR environment; at the end of the conversion we had accurate, and usable discrete data for all our physicians to use in Enterprise EHR.

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