



ICU Data

A self-contained module for ICU admissions which calculates the **predicted death rates** according to the following scoring systems: **SAPS II, KES, APACHE II** as well as calculating the **SOFA** score, which can be done daily. Other daily info regarding ventilation, inotropes, TPN, cultures and comments can be recorded.



Performance Review

This module tracks any performance review issues, for example deaths or breaches of protocol. A memo field records comments and post mortem findings.



Hospital Outcome

This section records the hospital discharge date, calculates the **days spent in hospital** and **ICU**, provides a summary of the number of ventilated, inotrope, dialysis days and gives an indication of the patient's condition on discharge. A field is provided for the total amount billed.

REPORTING FUNCTIONS:

The most important part of a computerised database system is what it can produce in terms of **REPORTS**. MediBank is a very powerful tool when it comes to **OUTPUT**. The following list contains some of the numerous reports already built into the program:

- A comprehensive Individual Patient Report
- Incident, Diagnosis, Procedure & Complication Reports (providing a list, or allowing for a search on a specific incident, diagnosis, etc.)
- Death Report (listing patients dying within a selected date range)
- Summary Reports (e.g. average blunt and penetrating ISS scores; actual versus predicted death rates, etc for a specified time period).
- Performance Review reports listing issues discussed.
- Various graph reports.

Customised reports can be written on any of the data points entered into the program. Data fields (including actual diagnosis) can be exported to Excel for further analysis and generation of graphs.

MediBank

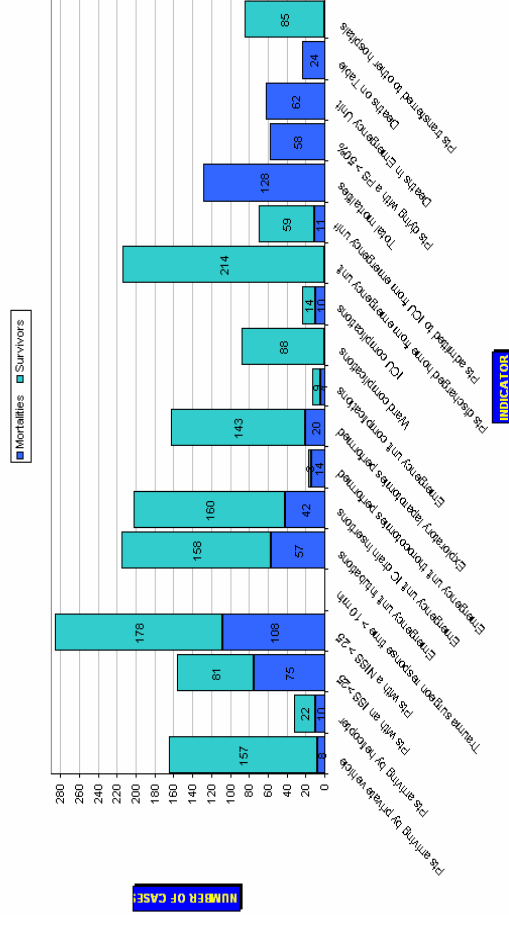
written and maintained by Vertical Apps, backed by Trauma Society



This Patient Registry was developed as an internal management tool to manage information and improve the care of Emergencies in South Africa. The program allows the practitioner and manager alike to keep a finger on the pulse of patient management within the practice or institution.

MediBank is a locally developed program tailored to meet our needs with regards to the capturing, storing and retrieval of vital information.

UNIT STATISTICS DEC 2005 - MAY 2006: 1 107 MAJOR TRAUMA ADMISSIONS



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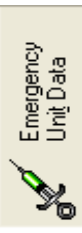
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This brochure contains an overview of some of the main aspects of the program. The main starting screen of **MediBank** shows the patient's demographic details, the incident leading to admission, where the patient went to from the Emergency Unit and the final hospital outcome. The buttons below the demographics list access the various modules linked to each patient. A **TRIAGE** tool is built into the program which calculates the patient's priority, takes you through the relevant discriminator list and allows the display of an active waiting list screen.

No.U	Hospital Number	Arrival Date	First Name	Surname	Gender	Race	Age	Residential Status	Incident	Cause/Disposition	Outcome
24	7616430	5/02/2005	Unknown Male	Unknown Male	Male	Black	30	Hillcrest	Gunshot	ICU (Neurology)	Home
24	9834453	5/02/2005	Unknown Male	Whitby	Male	White	34	Johnsbrough	Armed	Highcare	Home
22	7944532	5/02/2005	Unknown Male	Unknown Male	Male	Coloured	57	Not known	MVA	ICU (Neurology)	Home
20	7185098	5/02/2005	Unknown Male	Sims	Male	Black	28	Not known	Stab	Ward	Mortality
19	5344512	4/02/2005	Unknown Female	Quebec	Female	Black	24	Discharged	Fall	Ward	Home
18	3978095	3/02/2005	Unknown Male	Dice	Male	Black	32	Discharged	Wrist	Discharged	Home
16	3978095	3/02/2005	Unknown Male	Dice	Male	Black	32	Discharged	Disrupt	Discharged	Home
14	2314466	3/02/2005	Unknown Male	Nicola	Male	Black	24	Yeyocole	Fall	ICU (Neurology)	Home
12	4485742	2/02/2005	Unknown Male	Kita	Male	Black	23	Not known	Gunshot	Highcare	Home
10	7762690	2/02/2005	Unknown Male	Hodol	Male	Black	23	Not known	Gunshot	Highcare	Home
8	7426214	2/02/2005	Unknown Male	Hodol	Male	Black	23	Not known	Gunshot	Highcare	Home
7	6976399	1/02/2005	Unknown Female	Fonol	Female	Black	55	Regent Park	MVA	ICU (Ward)	Home
5	5432788	1/02/2005	Unknown Female	Della	Female	Black	30	Hillcrest	Armed	Highcare	Home
4	2348678	1/02/2005	Unknown Male	Brown	Male	Black	35	Hillcrest	Not known	Highcare	Home
2	1244987	1/02/2005	Unknown Male	Alpha	Male	Black	36	Midland	Gunshot	Discharged	Home



How the patient arrived (level of pre hospital care), calculation of the **primary and secondary survey and resus times as well as the total time spent in the Emergency Unit**. Time taken in radiography can also be documented. This is also a record of the members of the Team involved with the patient's care along with their calculated **response times**.



This section records initial Emergency Unit vitals, calculates the arrival **RTS**, tracks management, IV fluids, blood and drugs administered as well as what diagnostic procedures were performed and whether there were abnormal findings.



Any surgical interventions are recorded here, including names of the members of the surgical team, times, blood administered and a list of procedures with their **South African Procedural Billing** codes from which to make your selections.



A record of where, when and what complications occur with a memo field for comments.

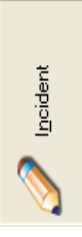


A list containing over 3 000 trauma diagnoses, with their relevant **AIS90 scores** and **ICD10 codes** from which multiple injuries can be selected. The software calculates the **ISS** and **NISS** scores and the **probability of survival** relevant to each score both at the *Prehospital* and *Emergency Unit arrival* stages.



A comprehensive list of all non-trauma diagnoses with their relevant **ICD10** codes, thus not limiting this to a trauma only database.

SUMMARY OF EACH MODULE:



Details concerning the date and time of the incident, calculation of 'injury to hospital arrival' time and epidemiology / mechanism of injury are recorded here according to **World Health Organization** guidelines.



Prehospital vitals, intervention and times are recorded, the software calculates the prehospital **RTS** as well as **scene** and **transport times**.



Details regarding whether or not the patient was transferred from another facility, vitals and a memo field for any relevant info.