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Friday, August 09, 2019 (Room 7)

16:30 - 17:25 WS #49: Global Perspective on Disruptive Innovation in Healthcare

17:35 - 18:30 WS #59: Global Perspective on Disruptive Innovation in Healthcare (Repeated)

Global Trends for Disruptive Innovations in Healthcare

Presented by
Dr Jason Hwang, Global Medical Advisor
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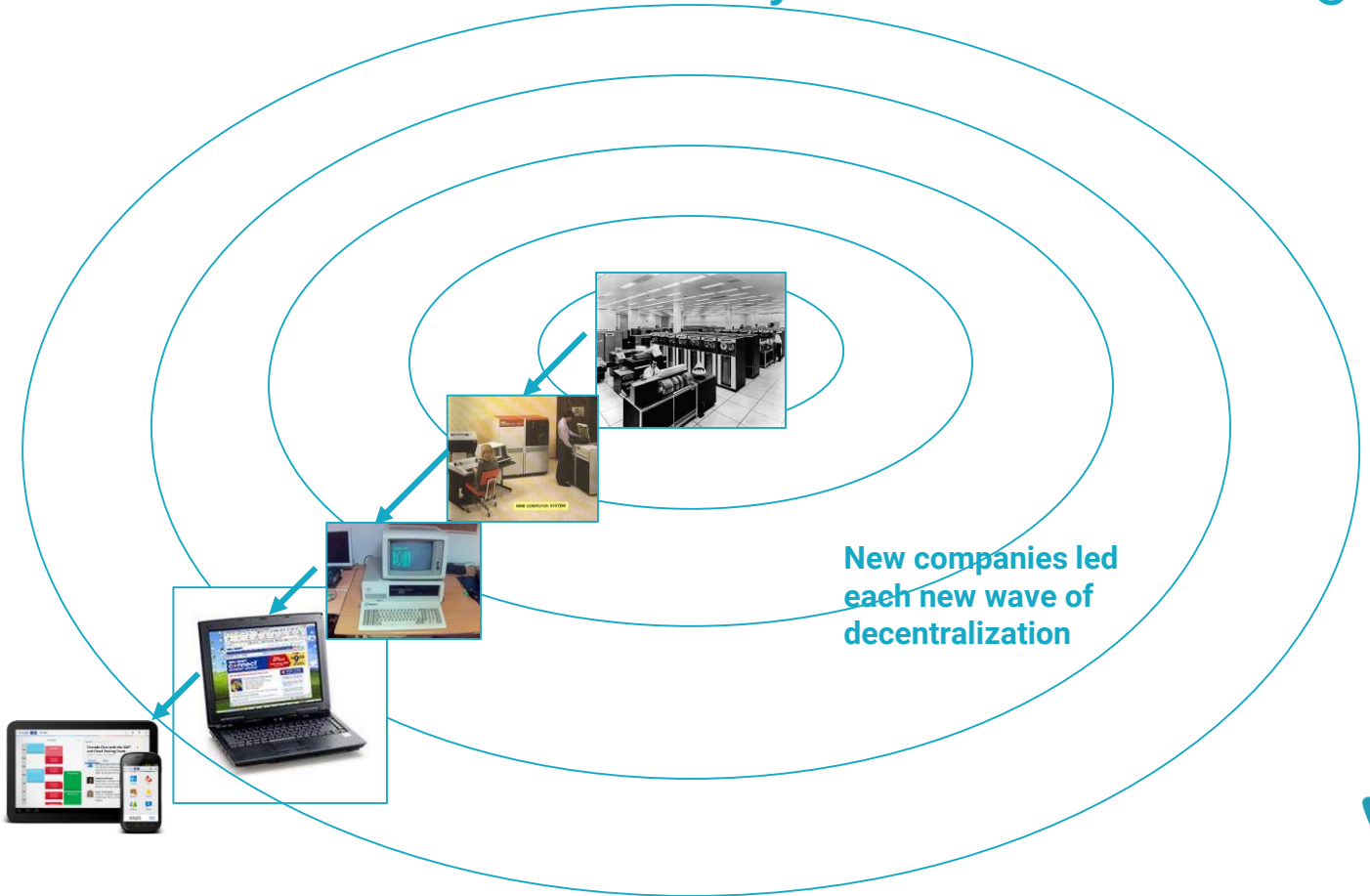
Versa

Decentralization is driven by disruptive innovations that offer greater access and affordability to new market segments



New companies led each new wave of decentralization

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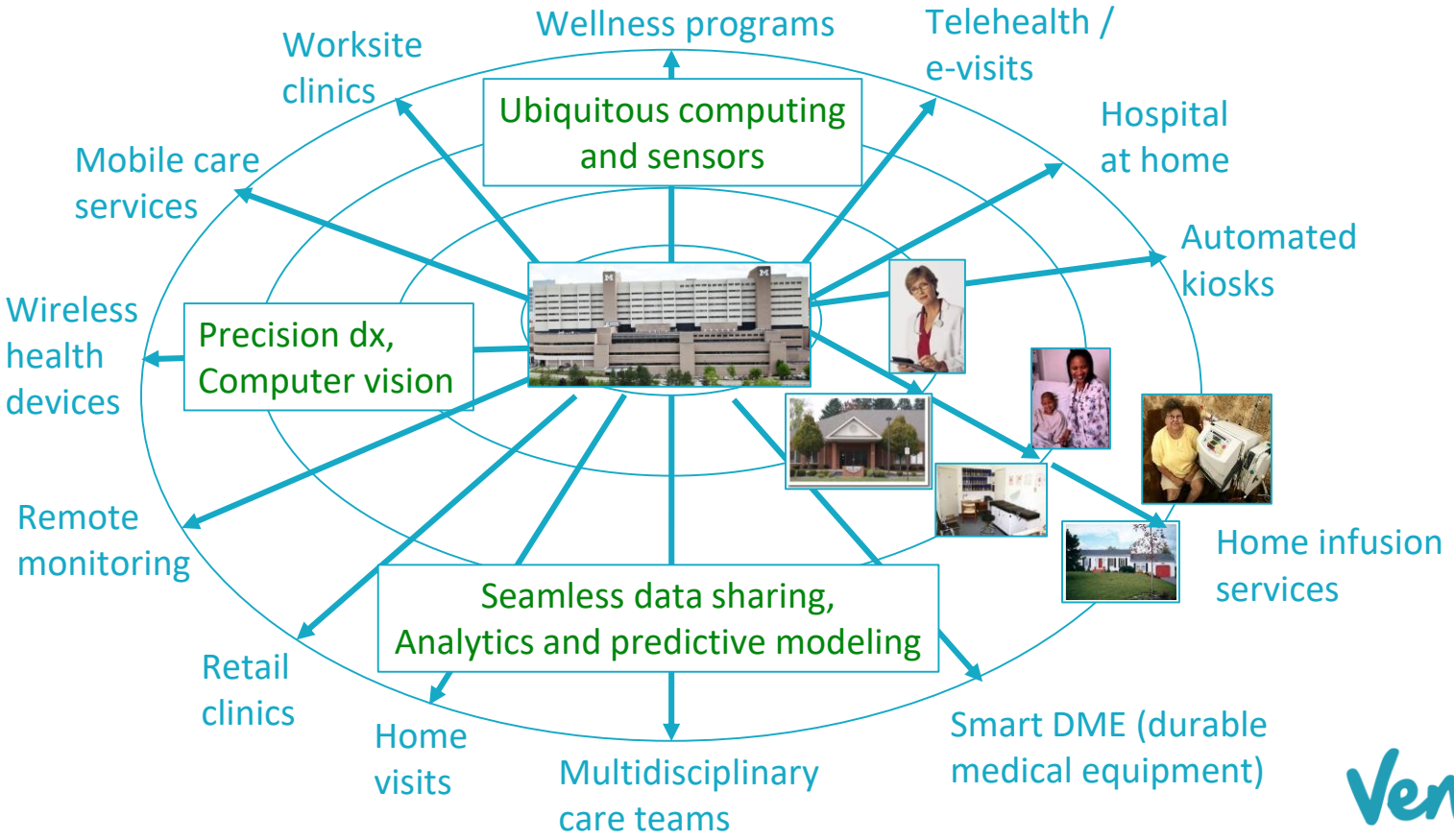
Disruption in business models has been the dominant historical mechanism for making things more affordable and accessible, and for generating corporate and economic growth

Yesterday	Today	Tomorrow
• Ford	• Toyota	• Chery, Tata
• Dept. Stores	• Wal-Mart, Target	• Internet retail
• Digital Eqpt.	• Dell	• Smartphones
• Delta	• Southwest, RyanAir	• Air taxis
• JP Morgan	• Fidelity	• ETFs
• Xerox	• Canon	• Zink
• IBM	• Microsoft	• Linux
• Cullinet	• Oracle	• Salesforce
• AT&T	• Cingular	• VOIP
• Sony DiskMan	• Apple iPod	• Mobile phones
• Japan	• Korea, Taiwan, HK	• China, India

A new ecosystem of disruptive business models will arise



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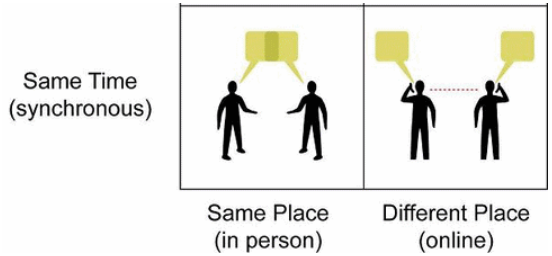
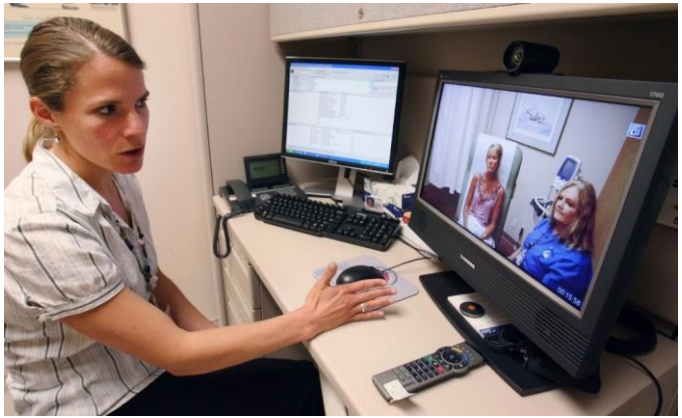
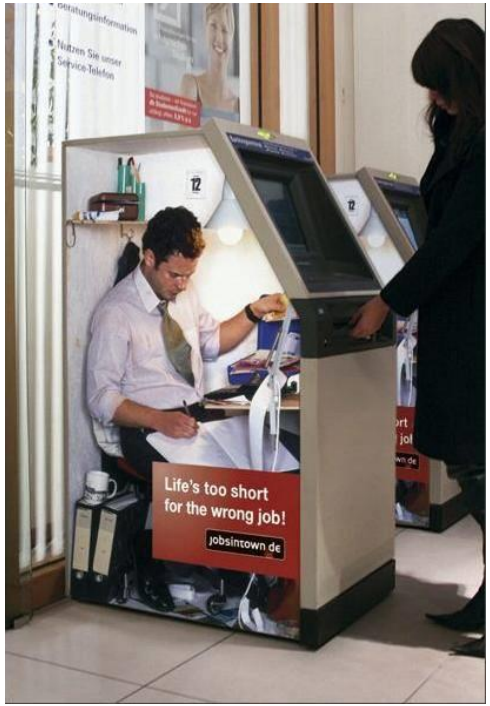
“Telemedicine 1.0”







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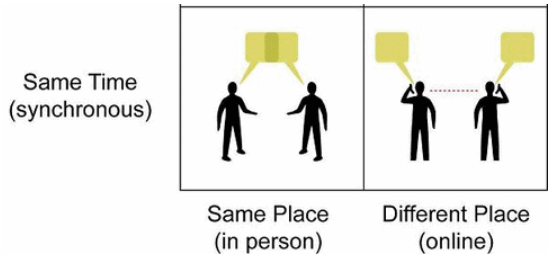

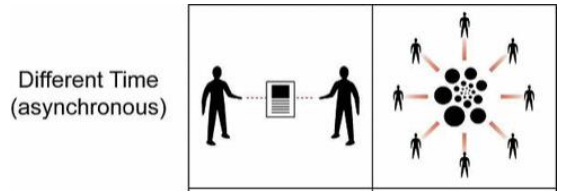

KHANACADEMY

"Any Time, Any Place, Any Way, Any Pace"

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Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use

Condition	Sub-Condition	CHC		POP		Injection		Implant		LNG-IUD		Cu-IUD	
		I	C	I	C	I	C	I	C	I	C	I	C
Age		Menarche to <40=**1** ≥40=**2**		Menarche to <18=**1** 18-45=**1** >45=**1**		Menarche to <18=**2** 18-45=**1** >45=**2**		Menarche to <18=**1** 18-45=**1** >45=**1**		Menarche to <20=**2** ≥20=**1**		Menarche to <20=**2** ≥20=**1**	
Anatomic abnormalities	a) Distorted uterine cavity									4		4	
	b) Other abnormalities									2		2	
Anemias	a) Thalassemia	1		1		1		1		1		2	
	b) Sickle cell disease†	2		1		1		1		1		2	
	c) Iron-deficiency anemia	1		1		1		1		1		2	
Benign ovarian tumors	(*including cysts*)	1		1		1		1		1		1	
Breast disease	a) Undiagnosed mass	2*		2*		2*		2*		2		1	
	b) Benign breast disease	1		1		1		1		1		1	
	c) Family history of cancer	1		1		1		1		1		1	
	d) Breast cancer‡												
	i) current	4		4		4		4		4		1	
	ii) past and no evidence of current disease for 5 years	3		3		3		3		3		1	
Breastfeeding (*see also Postpartum*)	a) <1 month postpartum	3*		2*		2*		2*					
	b) 1 month or more postpartum	2*		1*		1*		1*					
Cervical cancer	Awaiting treatment	2		1		2		2		4	2	4	2
Cervical ectropion		1		1		1		1		1		1	
Cervical intraepithelial neoplasia		2		1		2		2		2		1	
Cirrhosis	a) Mild (*compensated*)	1		1		1		1		1		1	
	b) Severe‡ (*decompensated*)	4		3		3		3		3		1	
Deep venous thrombosis (DVT)/Pulmonary embolism (PE)	a) History of DVT/PE, not on anticoagulant therapy												
	i) higher risk for recurrent DVT/PE	4		2		2		2		2		1	
	ii) lower risk for recurrent DVT/PE	3		2		2		2		2		1	
	b) Acute DVT/PE	4		2		2		2		2		2	
	c) DVT/PE and established on anticoagulant therapy for at least 3 months												
	i) higher risk for recurrent DVT/PE	4*		2		2		2		2		2	
	ii) lower risk for recurrent DVT/PE	3*		2		2		2		2		2	
	d) Family history (*first-degree relatives*)	2		1		1		1		1		1	
	e) Major surgery												
	i) with prolonged immobilization	4		2		2		2		2		1	
	ii) without prolonged immobilization	2		1		1		1		1		1	
	f) Minor surgery without immobilization	1		1		1		1		1		1	
Depressive disorders		1*		1*		1*		1*		1*		1*	
Diabetes mellitus (DM)	a) History of gestational DM only	1		1		1		1		1		1	
	b) Non-vascular disease												
	i) non-insulin dependent	2		2		2		2		2		1	
	ii) insulin dependent‡	2		2		2		2		2		1	
	c) Nephropathy/retinopathy/neuropathy‡	3/4*		2		3		2		2		1	
	d) Other vascular disease or diabetes of >20 years' duration‡	3/4*		2		3		2		2		1	

Condition	Sub-Condition	CHC		POP		Injection		Implant		LNG-IUD		Cu-IUD	
		I	C	I	C	I	C	I	C	I	C	I	C
Endometrial cancer‡		1		1		1		1		4	2	4	2
Endometrial hyperplasia		1		1		1		1		1		1	
Endometriosis		1		1		1		1		1		2	
Epilepsy§	(*see also Drug Interactions*)	1*		1*		1*		1*		1		1	
Gallbladder disease	a) Symptomatic												
	i) treated by cholecystectomy	2		2		2		2		2		1	
	ii) medically treated	3		2		2		2		2		1	
	iii) current	3		2		2		2		2		1	
	b) Asymptomatic	2		2		2		2		2		1	
Gestational trophoblastic disease	a) Decreasing or undetectable ß-hCG levels	1		1		1		1		3		3	
	b) Persistently elevated ß-hCG levels or malignant disease‡	1		1		1		1		4		4	
Headaches	a) Non-migrainous	1*	2*	1*	1*	1*	1*	1*	1*	1*	1*	1*	
	b) Migraine												
	i) without aura, age <35	2*	3*	1*	2*	2*	2*	2*	2*	2*	2*	1*	
	ii) without aura, age ≥35	3*	4*	1*	2*	2*	2*	2*	2*	2*	2*	1*	
	iii) with aura, any age	4*	4*	2*	3*	2*	3*	2*	3*	2*	3*	1*	
History of bariatric surgery‡	a) Restrictive procedures	1		1		1		1		1		1	
	b) Malabsorptive procedures	COCs: 3 P/R: 1		3		1		1		1		1	
History of cholestasis	a) Pregnancy-related	2		1		1		1		1		1	
	b) Past COC-related	3		2		2		2		2		1	
History of high blood pressure during pregnancy		2		1		1		1		1		1	
History of pelvic surgery		1		1		1		1		1		1	
Human immunodeficiency virus (HIV)	High risk	1		1		1*		1		2	2	2	2
	HIV infected (*see also Drug Interactions*)‡	1*		1*		1*		1*		2	2	2	2
	AIDS (*see also Drug Interactions*)‡	1*		1*		1*		1*		3	2*	3	2*
	Clinically well on therapy	*If on treatment, see Drug Interactions*								2	2	2	2
Hyperlipidemias		2/3*		2*		2*		2*		2*		1*	
Hypertension	a) Adequately controlled hypertension	3*		1*		2*		1*		1		1	
	b) Elevated blood pressure levels (*properly taken measurements*)												
	i) systolic 140-159 or diastolic 90-99	3		1		2		1		1		1	
	ii) systolic ≥160 or diastolic ≥100‡	4		2		3		2		2		1	
	c) Vascular disease	4		2		3		2		2		1	
Inflammatory bowel disease	(*Ulcerative colitis, Crohn's disease*)	2/3*		2		2		1		1		1	

Abbreviations: C=continuation of contraceptive method; CHC=combined hormonal contraceptive (pill, patch, and ring); COC=combined oral contraceptive; Cu-IUD=copper-containing intrauterine device; I=initiation of contraceptive method; LNG-IUD=levonorgestrel-releasing intrauterine device; NA=not applicable; POP=progestin-only pill; P/R=patch/ring.

Legend:

1	No restriction (*method can be used*)	3	Theoretical or proven risks usually outweigh the advantages
2	Advantages generally outweigh theoretical or proven risks	4	Unacceptable health risk (*method not to be used*)

Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion

Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use

Condition	Sub-Condition	CHC		POP		Injection		Implant		LNG-IUD		Cu-IUD	
		I	C	I	C	I	C	I	C	I	C	I	C
Ischemic heart disease‡	Current and history of	4		2	3	3		2	3	2	3	1	
Liver tumors	a) Benign												
	i) Focal nodular hyperplasia	2		2		2		2		2		1	
	ii) Hepatocellular adenoma†	4		3		3		3		3		1	
	b) Malignant‡	4		3		3		3		3		1	
Malaria		1		1		1		1		1		1	
Multiple risk factors for arterial cardiovascular disease	(*such as older age, smoking, diabetes and hypertension*)	3/4*		2*		3*		2*		2		1	
Obesity	a) ≥30 kg/m² body mass index (BMI)	2		1		1		1		1		1	
	b) Menarche to <18 years and ≥30 kg/m² BMI	2		1		2		1		1		1	
Ovarian cancer‡		1		1		1		1		1		1	
Parity	a) Nulliparous	1		1		1		1		2		2	
	b) Parous	1		1		1		1		1		1	
Past ectopic pregnancy		1		2		1		1		1		1	
Pelvic inflammatory disease	a) Past, (*assuming no current risk factors of sexually transmitted infections [STIs]*)												
	i) with subsequent pregnancy	1		1		1		1		1	1	1	1
	ii) without subsequent pregnancy	1		1		1		1		2	2	2	2
	b) Current	1		1		1		1		4	2*	4	2*
Peripartum cardiomyopathy‡	a) Normal or mildly impaired cardiac function												
	i) <6 months	4		1		1		1		2		2	
	ii) ≥6 months	3		1		1		1		2		2	
	b) Moderately or severely impaired cardiac function	4		2		2		2		2		2	
Postabortion	a) First trimester	1*		1*		1*		1*		1*		1*	
	b) Second trimester	1*		1*		1*		1*		2		2	
	c) Immediately post-septic abortion	1*		1*		1*		1*		4		4	
Postpartum (*see also Breastfeeding*)	a) <21 days	4		1		1		1					
	b) 21 days to 42 days												
	i) with other risk factors for venous thromboembolism (VTE)	3*		1		1		1					
	ii) without other risk factors for VTE	2		1		1		1					
	c) >42 days	1		1		1		1					
Postpartum (*in breastfeeding or non-breastfeeding women, including post-cesarean section*)	a) <10 minutes after delivery of the placenta									2		1	
	b) 10 minutes after delivery of the placenta to <4 weeks									2		2	
	c) ≥4 weeks									1		1	
	d) Puerperal sepsis									4		4	
Pregnancy		NA*		NA*		NA*		NA*		4*		4*	
Rheumatoid arthritis	a) On immunosuppressive therapy	2		1		2/3*		1		2	1	2	1
	b) Not on immunosuppressive therapy	2		1		2		1		1		1	
Schistosomiasis	a) Uncomplicated	1		1		1		1		1		1	
	b) Fibrosis of the liver†	1		1		1		1		1		1	
Severe dysmenorrhea		1		1		1		1		1		2	

Condition	Sub-Condition	CHC		POP		Injection		Implant		LNG-IUD		Cu-IUD	
		I	C	I	C	I	C	I	C	I	C	I	C
Sexually Transmitted Infections (STI)	a) Current purulent cervicitis or chlamydial infection or gonorrhea	1		1		1		1		4	2*	4	2*
	b) Other STIs (*excluding HIV and hepatitis*)	1		1		1		1		2	2	2	2
	c) Vaginitis (*including trichomonas vaginalis and bacterial vaginosis*)	1		1		1		1		2	2	2	2
	d) Increased risk of STIs	1		1		1		1		2/3*	2	2/3*	2
Smoking	a) Age <35	2		1		1		1		1		1	
	b) Age ≥35, <15 cigarettes/day	3		1		1		1		1		1	
	c) Age ≥35, ≥15 cigarettes/day	4		1		1		1		1		1	
Solid organ transplantation‡	a) Complicated	4		2		2		2		3	2	3	2
	b) Uncomplicated	2*		2		2		2		2		2	
Stroke†	History of cerebrovascular accident	4		2	3	3		2	3	2		1	
Superficial venous thrombosis	a) Varicose veins	1		1		1		1		1		1	
	b) Superficial thrombophlebitis	2		1		1		1		1		1	
Systemic lupus erythematosus‡	a) Positive (*or unknown*) antiphospholipid antibodies	4		3		3	3	3		3		1	1
	b) Severe thrombocytopenia	2		2		3	2	2		2*		3*	2*
	c) Immunosuppressive treatment	2		2		2	2	2		2		2	1
	d) None of the above	2		2		2	2	2		2		1	1
Thrombogenic mutations†		4*		2*		2*		2*		2*		1*	
Thyroid disorders	Simple goiter/hyperthyroid/hypothyroid	1		1		1		1		1		1	
Tuberculosis† (*see also Drug Interactions*)	a) Non-pelvic	1*		1*		1*		1*		1		1	
	b) Pelvic	1*		1*		1*		1*		4	3	4	3
Unexplained vaginal bleeding	(*suspicious for serious condition*) before evaluation	2*		2*		3*		3*		4*	2*	4*	2*
Uterine fibroids		1		1		1		1		2		2	
Valvular heart disease	a) Uncomplicated	2		1		1		1		1		1	
	b) Complicated‡	4		1		1		1		1		1	
Vaginal bleeding patterns	a) Irregular pattern without heavy bleeding	1		2		2		2		1	1	1	
	b) Heavy or prolonged bleeding	1*		2*		2*		2*		1*	2*	2*	
Viral hepatitis	a) Acute or flare	3/4*	2	1		1		1		1		1	
	b) Carrier/Chronic	1	1	1		1		1		1		1	
Drug Interactions													
Antiretroviral therapy	a) Nucleoside reverse transcriptase inhibitors	1*		1		1		1		2/3*	2*	2/3*	2*
	b) Non-nucleoside reverse transcriptase inhibitors	2*		2*		1		2*		2/3*	2*	2/3*	2*
	c) Ritonavir-boosted protease inhibitors	3*		3*		1		2*		2/3*	2*	2/3*	2*
Anticonvulsant therapy	a) Certain anticonvulsants (*phenytoin, carbamazepine, barbiturates, primidone, topiramate, oxcarbazepine*)	3*		3*		1		2*		1		1	
	b) Lamotrigine	3*		1		1		1		1		1	
Antimicrobial therapy	a) Broad spectrum antibiotics	1		1		1		1		1		1	
	b) Antifungals	1		1		1		1		1		1	
	c) Antiparasitics	1		1		1		1		1		1	
	d) Rifampicin or rifabutin therapy	3*		3*		1		2*		1		1	

*Please see the complete guidance for a clarification to this classification. †Condition that exposes a woman to increased risk as a result of unintended pregnancy. Updated June 2012.

This summary sheet only contains a subset of the recommendations from the *U.S. Medical Eligibility Criteria for Contraceptive Use*, 2010. For complete guidance, see: http://www.cdc.gov/reproductivehealth/unintendedpregnancy/USMEC.htm

CS248124

altavera	chateal	gianvi	larin fe 1-20	microgestin 1.5-30	nordette	pirmella 1-35	tri-legest fe
alyacan 7-7-7	cryselle	gildagia	leena	microgestin 1-20	nor-dq	pirmella 7-7-7	tri-linyah
alyacen 1-35	cyclafem 1-35	gildess 1.5-30	lessina	microgestin fe 1.5-30	norethindrone	portia	trinessa
amethia	cyclafem 7-7-7	gildess 1-20	levonest	microgestin fe 1-20	norinyl 1+50	previfem	tri-norinyl
amethia lo	cyclessa	gildess fe 1.5-30	levora	micronor	norinyl 135	quartette	triprevifem
amethyst	dasetta 1-35	gildess fe 1-20	lo loestrin fe	minastrin 24 fe	nortel 1-35	quasense	trivora
apri	dasetta 7-7-7	heather	lo minastrin fe	mircette	nortrel 0.5/35	reclipsen	velivet
aranelle	daysee	introvale	lo ovral	modicon	nortrel 7-7-7	safyral	vestura
aubra	deblitane	jencycla	loestrin	mono-linyah	ocella	seasonale	viorele
aviane	delyla	jolessa	loestrin 1.5-30	mononessa	ogestrel	seasonique	vyfemla
azurette	desogen	jolivette	loestrin 1-20	myzilra	orsythia	sharobel	wera 0.5/35
balziva	elinest	junel 1.5-30	loestrin fe 1.5-30	natazia	ortho cyclen	solia	wymzya fe
beyaz	emoquette	junel 1-20	loestrin fe 1-20	necon 0.5/35	ortho tri cyclen	sprintec	yasmin
brevicon	enpresse	junel fe 1.5-30	lomedia 24 fe	necon 1/50	ortho tri cyclen lo	sronyx	yaz
briellyn	enskyce	junel fe 1-20	loryna	necon 1+35	ortho-cept	syeda	zarah
camila	estarylla	kariva	loseasonique	necon 10/11 21	ortho-novum 1-35	tarina fe 1/20	zenchent
camrese	estrostep fe	kelnor	low-ogestrel	necon 10/11 28	ortho-novum 7-7-7	tilia fe	zenchent fe
camrese lo	falmina	kurvelo	lutera	necon 7-7-7	ovcon 35	tri sprintec	zeosa
caziant	femcon fe	larin 1-20	lyza	nikki	philith	tri-estarylla	zovia 1-35
cesia	generess fe	larin fe 1.5-30	marlissa	nora-be	pimtrea	tri-legest 21	zovia 1-50

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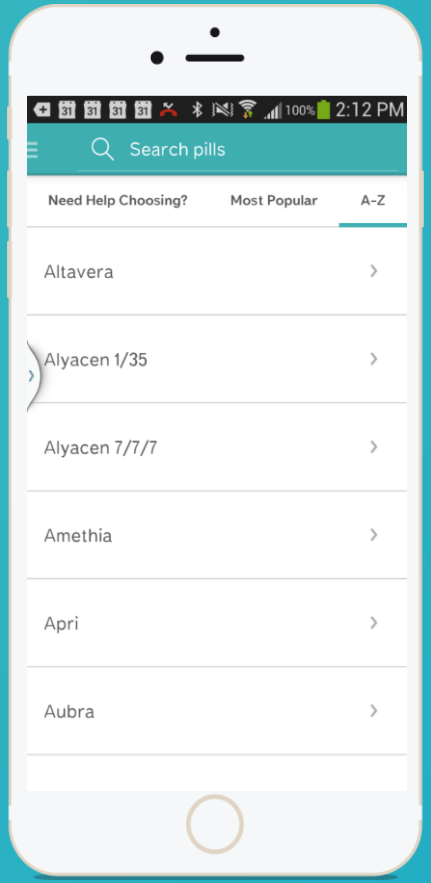
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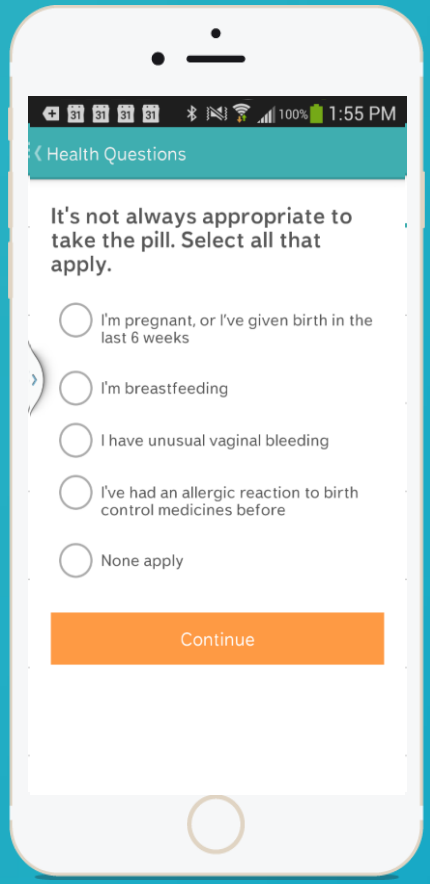
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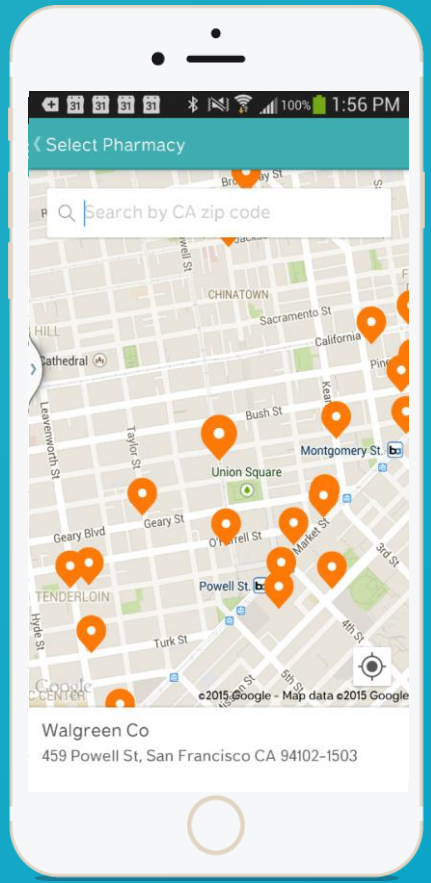
Health Questions
It's not always appropriate to take the pill. Select all that apply.
I'm pregnant, or I've given birth in the last 6 weeks
I'm breastfeeding
I have unusual vaginal bleeding
I've had an allergic reaction to birth control medicines before
None apply
Continue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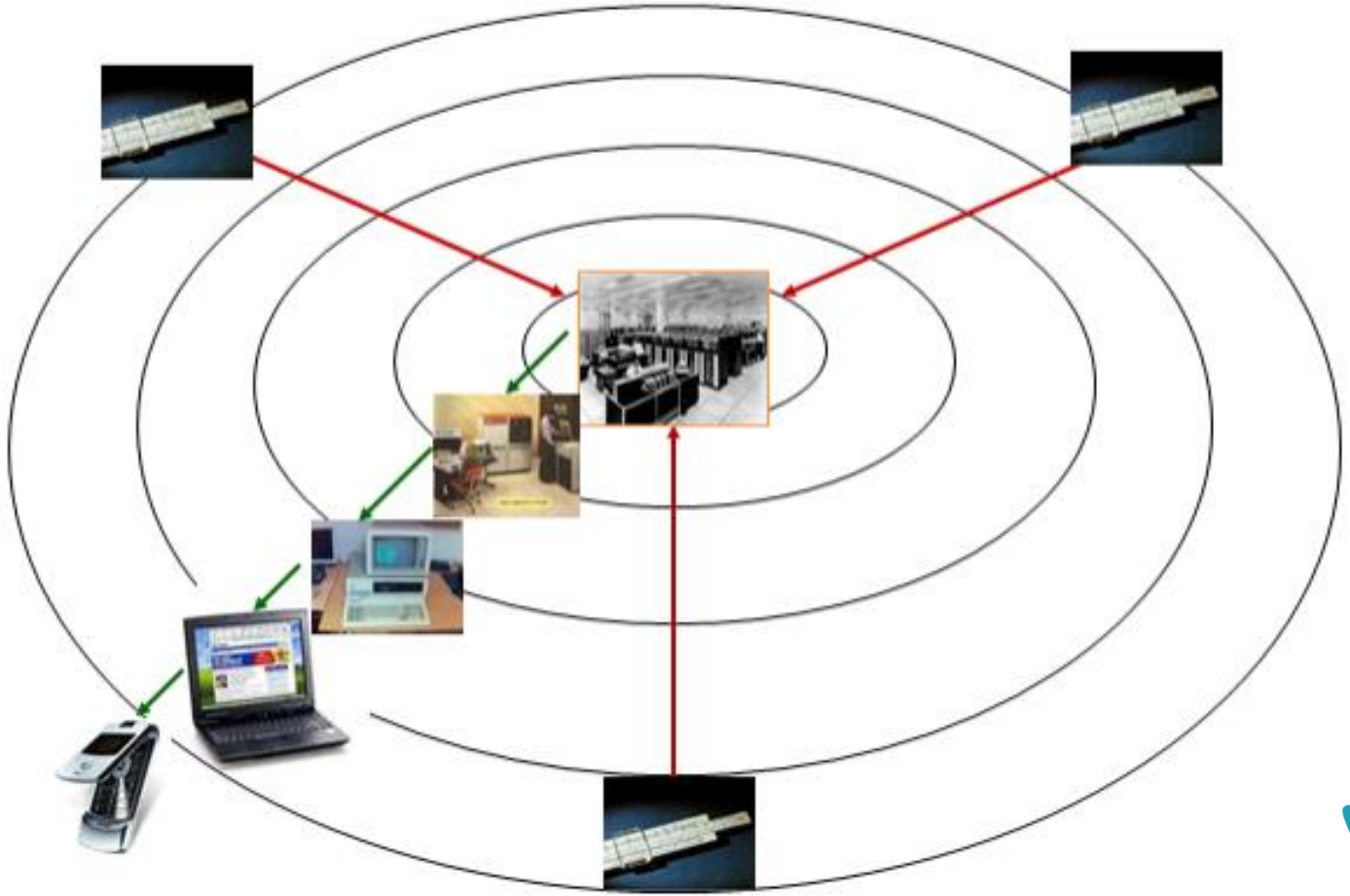
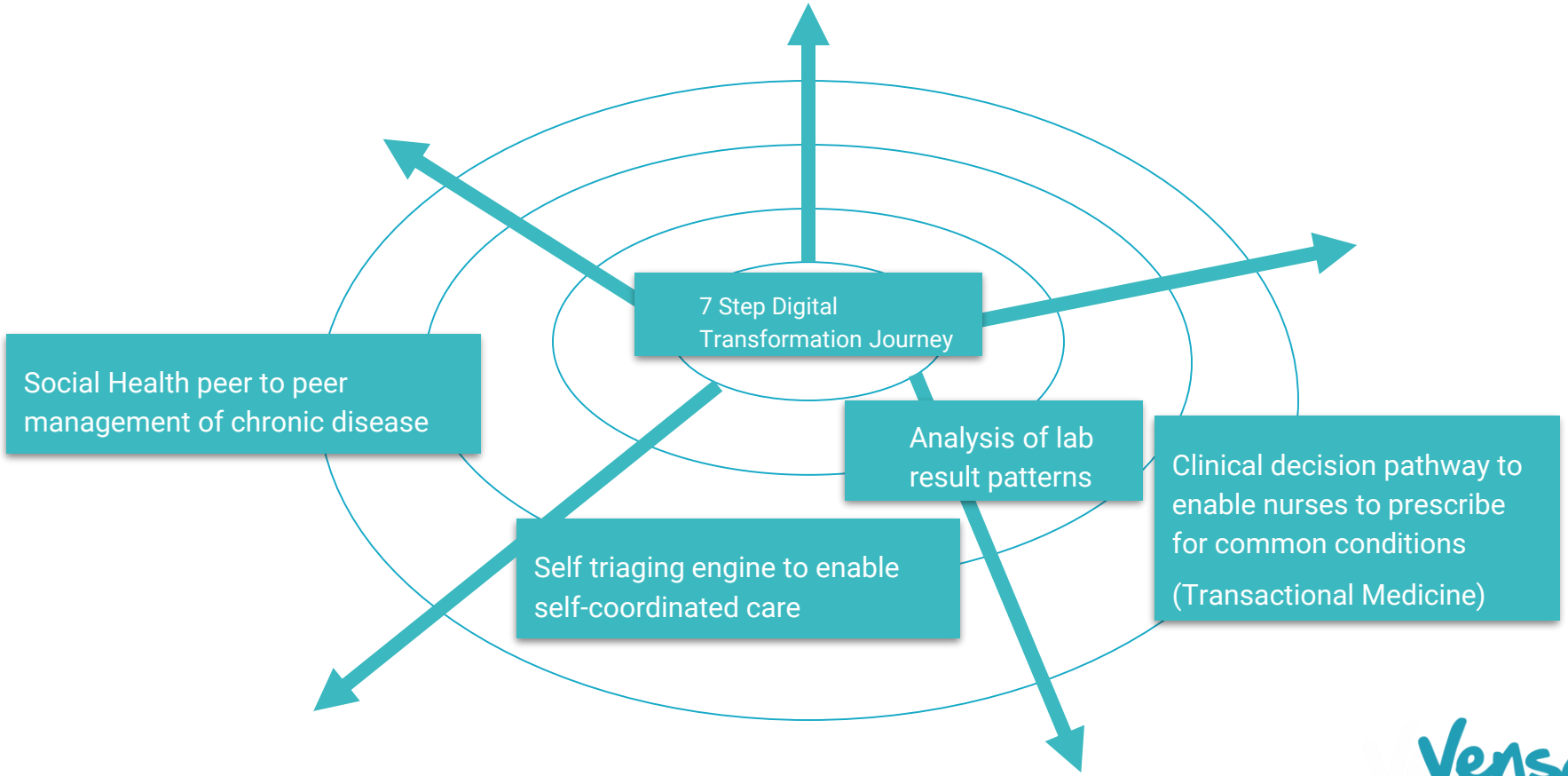
“The Handheld Hospital” – Health Care in the Palm of Your Hand

It's not the technology, but the business model that usually determines success or failure



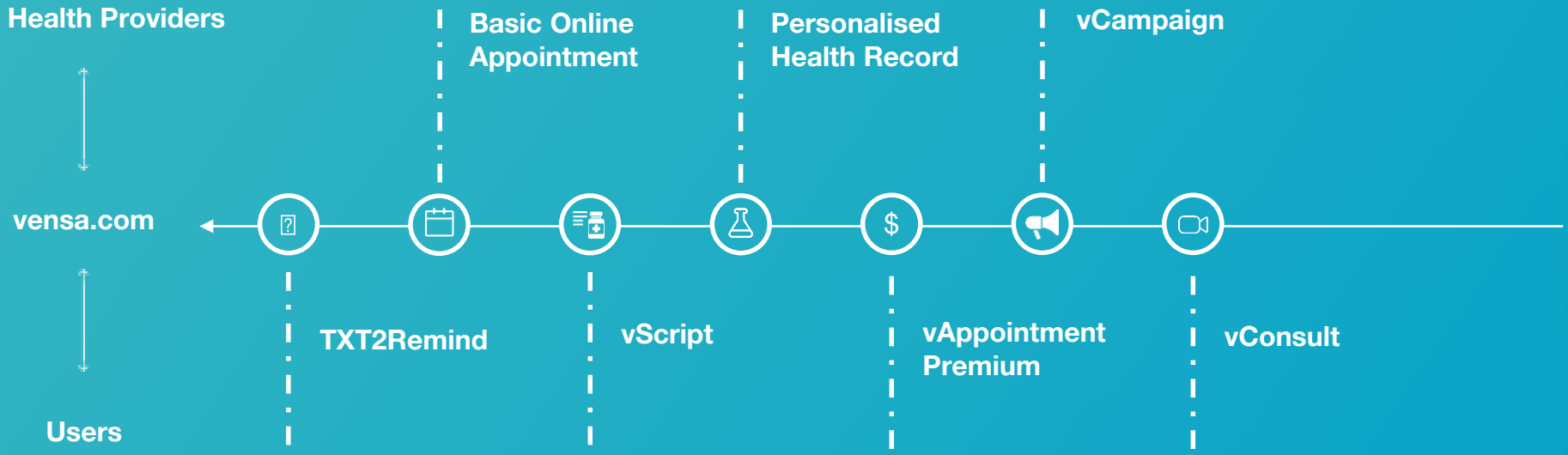
Vensa™

#VisionVensa: Technology to enable Business Models



Vensa™

Enabling Better Business and Clinical Care



NZHiT
Enabling a Healthier New Zealand

2017 Health Innovation Award Industry overall winner

FINALIST OF THE NZ HI-TECH AWARDS 2018

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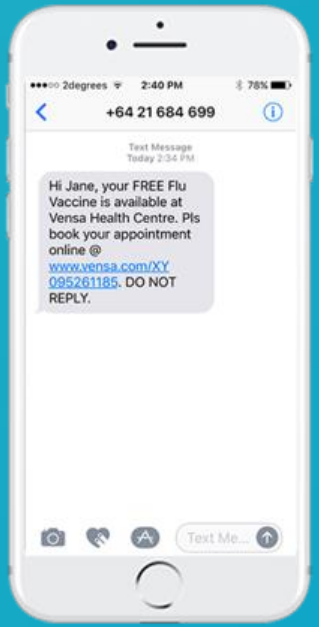
Our Starting Point: TXT2Remind

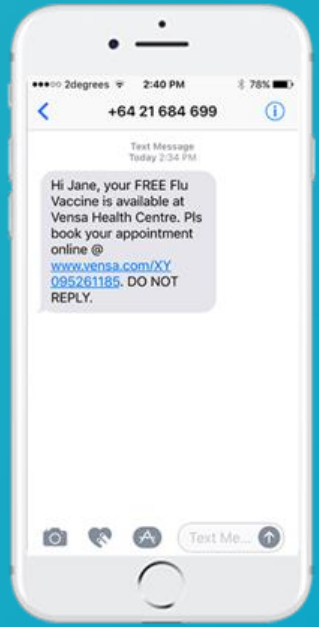


3,090,000

Kiwis have been impacted by TXT2Remind

Vensa™

70,000,000



Health Messages have been sent through TXT2Remind

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MOH Case Study Report 2014-2016

Cohort of 10 NZ Medical Practices

Supports Health Care Home

"Txt2Remind has the ability to bring healthcare closer to home and increase access to primary care" (pg. 2).

Improved Health Outcomes

"has shown to significantly increase recall follow up for CVD, diabetic and cervical smear recalls. By connecting people to their healthcare and increasing CVD recalls, it is possible to increase early health prevention methods and improve health outcomes" (pg. 11).

Improved Recall Rates

"Eight month immunisation recall data shows that eight of the nine practices sending immunisation recalls via Txt2Remind have had a higher rate of vaccination with the use of Txt2Remind". (pg. 12).

So what's in it for me?

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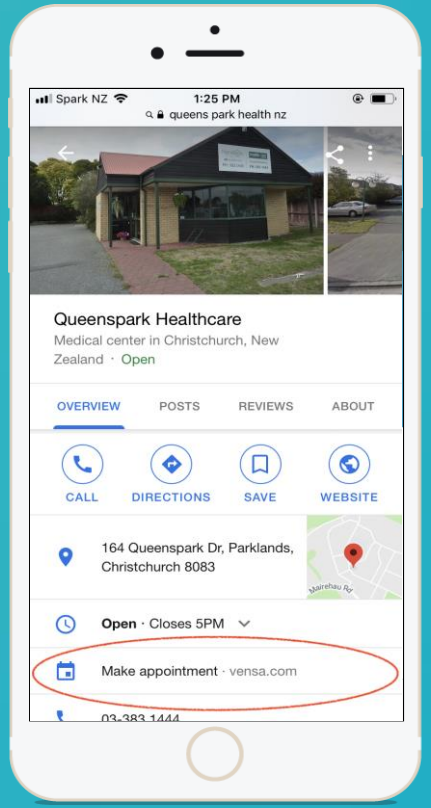
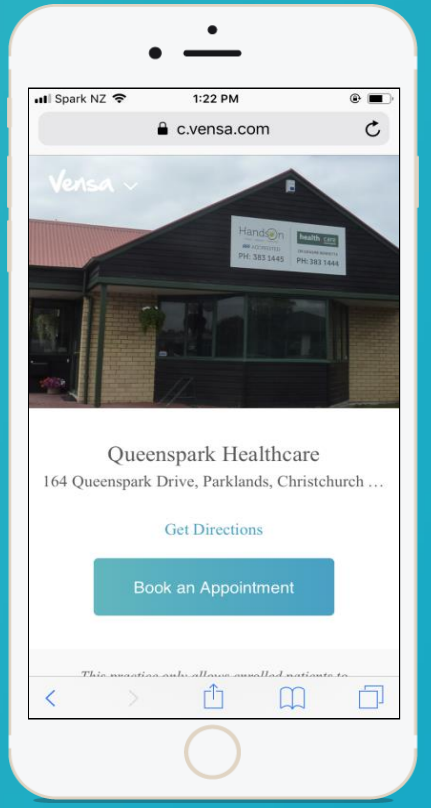
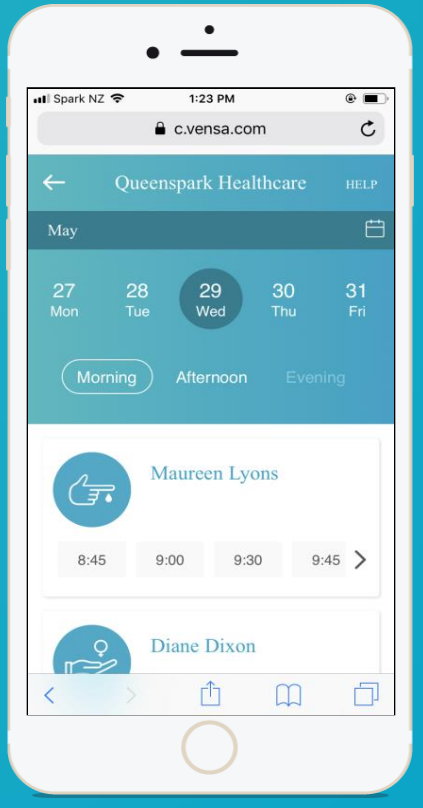
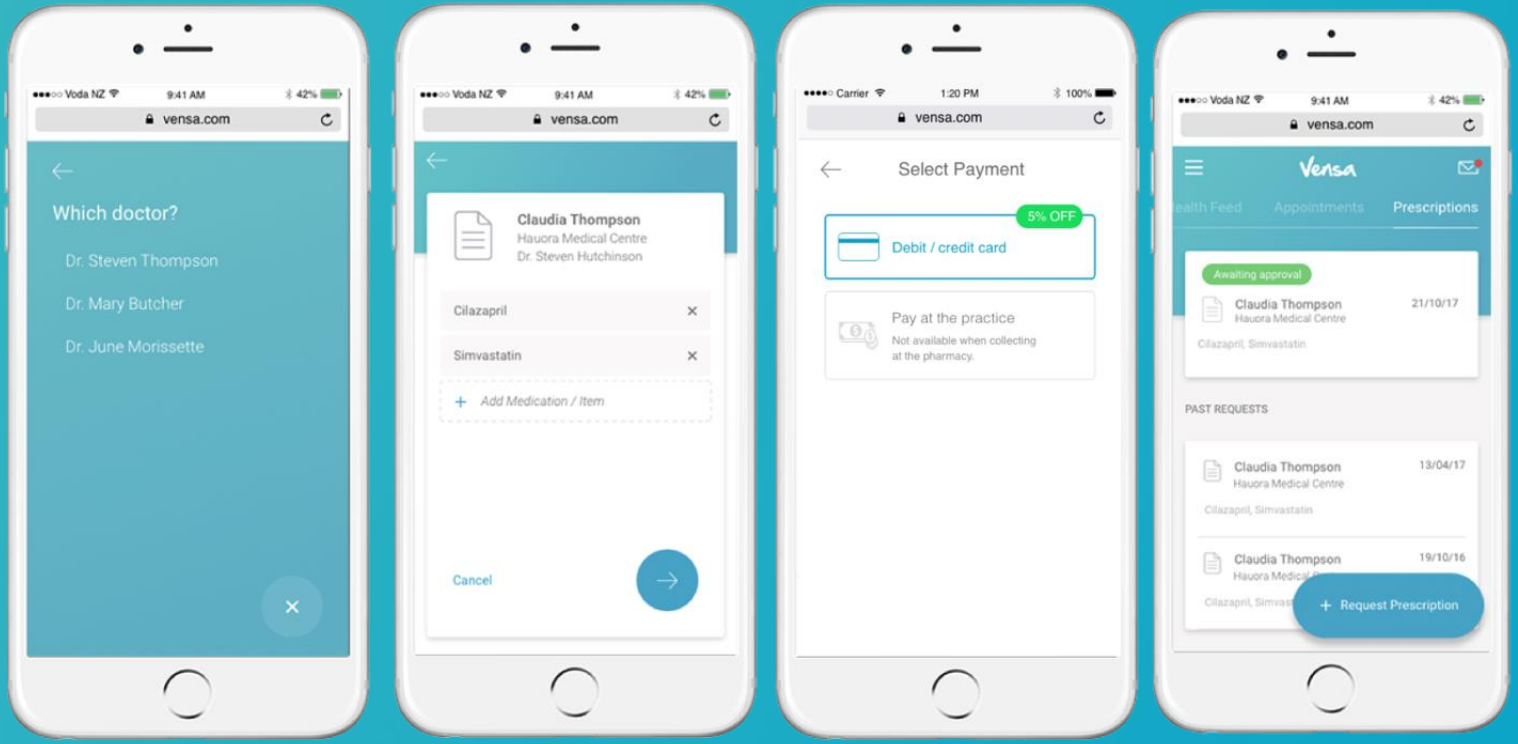
Book appointments **Free Forever** for patients and practices







Repeat Prescriptions with **Online Payments** and **Automatic Reconciliation** of accounts



Prescriptions

New Requests 13

Historic Requests

Settings

New Repeat Script Requests

New Requests | Accepted not Collected

Search for patient or keyword

Date	Patient	Doctor	Urgency	
17/08/16	Claudia Thompson	Dr Hutchinson	Due Today	Process Request
17/08/16	Marie Tioriori	Mary Louvian	Due 28/08/16	Process Request
17/08/16	Jimmy Tioriori	Luccas Marlin	Due 28/08/16	Process Request
17/08/16	John O'Leary	Heloise Cox	Due 28/08/16	Process Request
17/08/16	Helen Smith	Jason Krugger	Due 28/08/16	Process Request
17/08/16	Jordan Harrington	Louise Andra	Due 28/08/16	Process Request
17/08/16	Alicia Hanson	Alex Jones	Due 28/08/16	Process Request
17/08/16	Ginny O'neil	Angela Smith	Due 28/08/16	Process Request

Claudia Thompson (ChartNo: 130341.1 | NHI: 323hds)

28 years old (23 April 1987) | Female | European

027 485 9876

claudiat@gmail.com

Claudia has given permission for Vensa to display her clinical notes

Repeat Script Decision Pin

✓ *Within 6 months from today*

Medical Warning: 24 May 2017 - Penicillins - anaphalaxis
24 May 2016 - Alargey - Xyz
Conditions: Type 2 Diabetes - Heart Disease

Last Medication Prescribed

- ✓ **Pantoprazole 20mg**: 23 June 2019 (20 days ago) by Dr Jane Stone, Qty:90, Refill: 3
- ✓ **Phanzyne**: 23 June 2019 (20 days ago) by Dr Jane Stone, Qty:20, Refill: 3
- ✓ **Panadol**: 11 May 2019 (45 days ago) by Dr Harry Pert, Qty:10
- ✓ **Phanzyne**: 23 June 2019 (20 days ago) by Dr Jane Stone, Qty:20, Refill: 3

Last Appointments

✓ **22 March 2019**	Dr. Steven Hutchinson	General Practitioner
✓ **22 January 2019**	Dr. Steven Hutchinson	General Practitioner
✓ **22 November 2018**	Dr. Steven Hutchinson	General Practitioner

Last Lab Results

- ✓ **LDL 80 mg/dL** on 23 March 2019
- ✓ **HDL 55 mg/dL** on 23 March 2019
- ✓ **Triglycerides 144 mg/dL** on 23 March 2019
- ✓ **Total Cholesterol 135 mg/dL** on 23 March 2019
- ✓ **ALT 21 U/L** on 12 May 2018

Awaiting Approval

Reason:
I am still having the symptoms and my pills have finished already.

- ☑ Pantoprazole 20mg
- ☑ Phanzyne

Decline All | Approve Selected

Details:

Requested by Claudia Thompson on 27/08/16, 8:45am

Dr. Hutchinson | Due to 28/08/16

Pick-up Location:

Ellerslie Family Pharmacy
365 Great South Road, One tree hill, Auckland 1061
Fax: 09 309 1744 - Phone 027 879 9876

Payment details:

Prescription request	$ 17.00
Service Fee	$ 5.00
1234 ••••	$ 22.00

Cancel | Export to Medtech

Hauora Medical Centre
386 Great South Road, Penrose - Auckland - 1061 - NZ
Phone: 09-526 1185 Fax: 09-526 1185

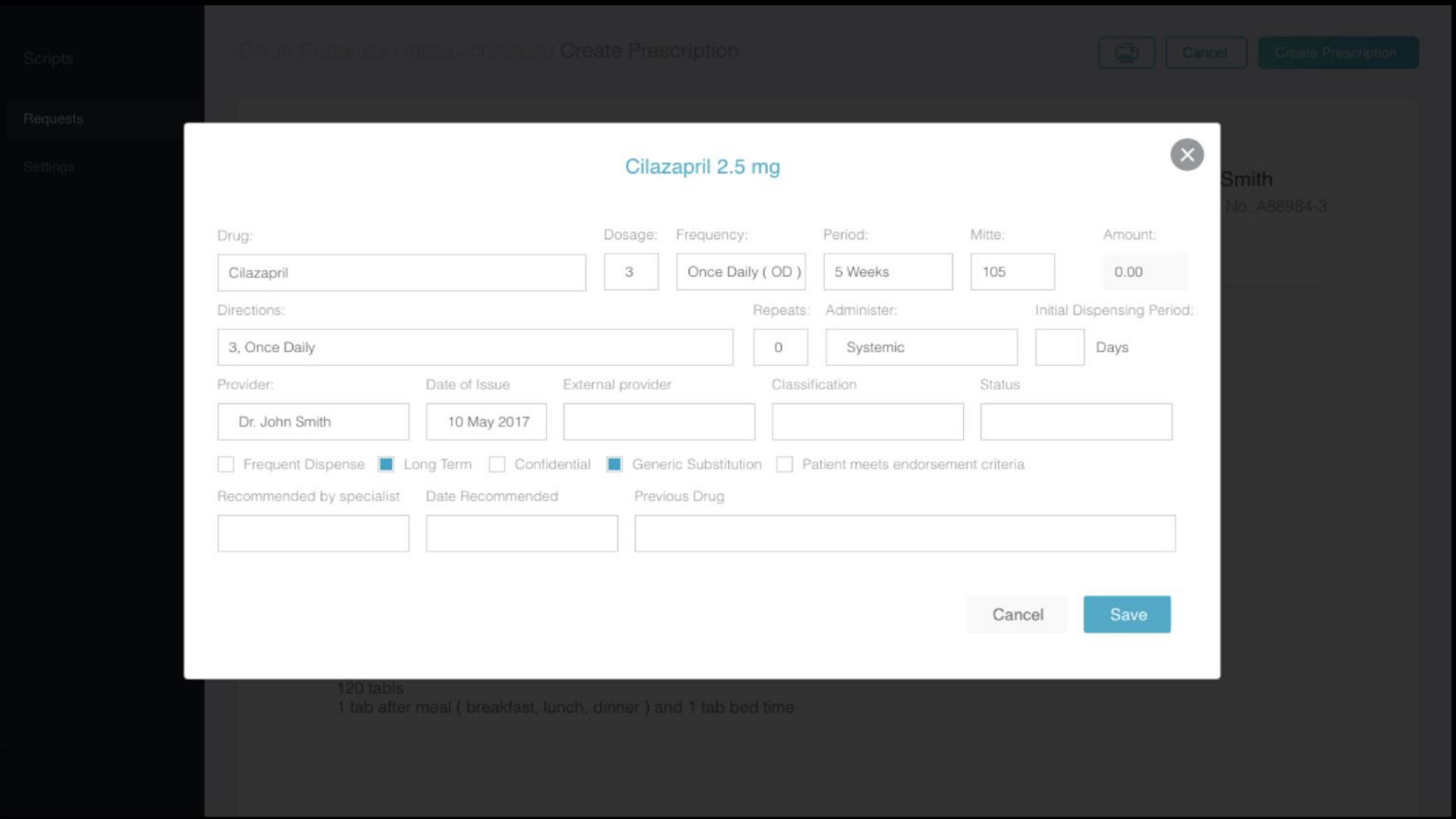
Dr. John Smith
NZMC Reg No. A88984-3

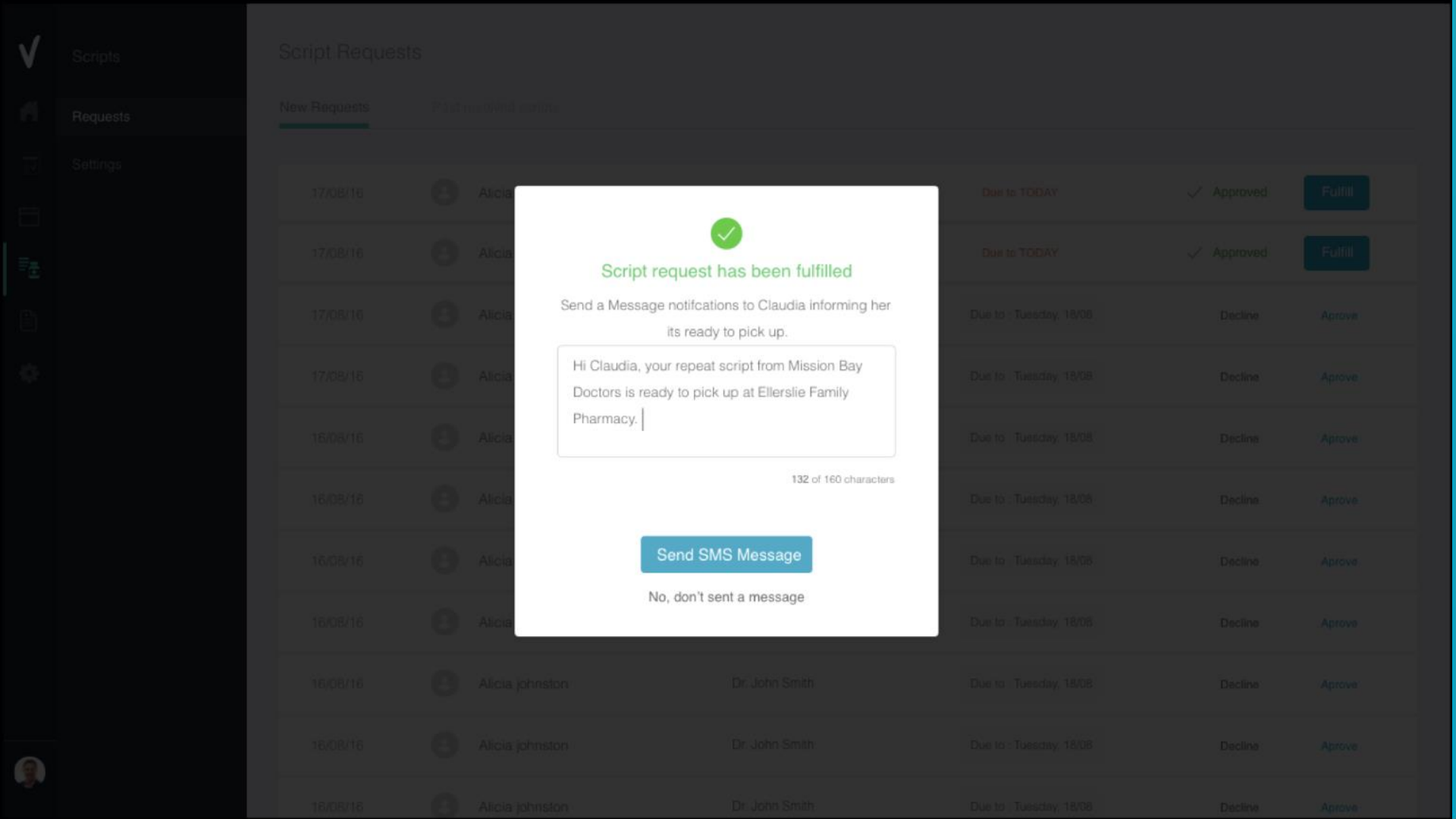
Claudia Thompson
DOB: 1 Jan 1945 **NHI**: JDR1234
123 great south road, ellerslie - auckland - jajaka

Cilazapril 2.5mg Edit
Sig 32, As required
Mitte: 3 Repeats

Simvastatin 45mgs Edit
120 tabls
1 tab after meal (breakfast, lunch, dinner) and 1 tab bed time

+ Add medication


Scripts
Requests
Settings
Script Requests / Alicia Johnston / Create Prescription
Cancel
Create Prescription
Smith
No. A88984-3
Cilazapril 2.5 mg
Drug:
Cilazapril
Dosage:
3
Frequency:
Once Daily (OD)
Period:
5 Weeks
Mitte:
105
Amount:
0.00
Directions:
3, Once Daily
Repeats:
0
Administer:
Systemic
Initial Dispensing Period:
Days
Provider:
Dr. John Smith
Date of Issue
10 May 2017
External provider
Classification
Status
Frequent Dispense
Long Term
Confidential
Generic Substitution
Patient meets endorsement criteria
Recommended by specialist
Date Recommended
Previous Drug
Cancel
Save
120 tabls
1 tab after meal (breakfast, lunch, dinner) and 1 tab bed time

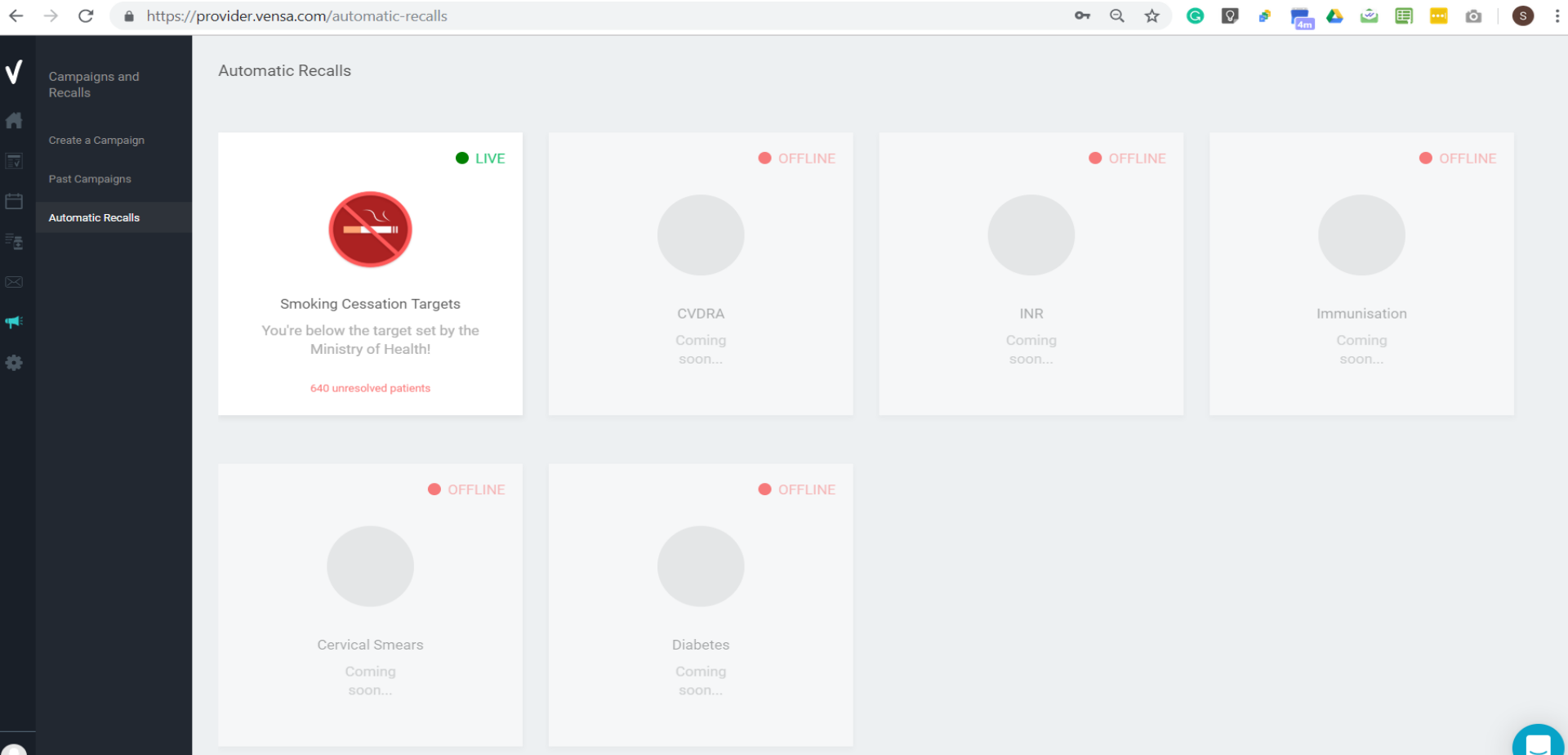

Scripts
Requests
Settings
Script Requests
New Requests
Script request has been fulfilled
Send a Message notifcations to Claudia informing her its ready to pick up.
Hi Claudia, your repeat script from Mission Bay Doctors is ready to pick up at Ellerslie Family Pharmacy.
132 of 160 characters
Send SMS Message
No, don't sent a message

Want to automate expensive administrative work?

Vensa™

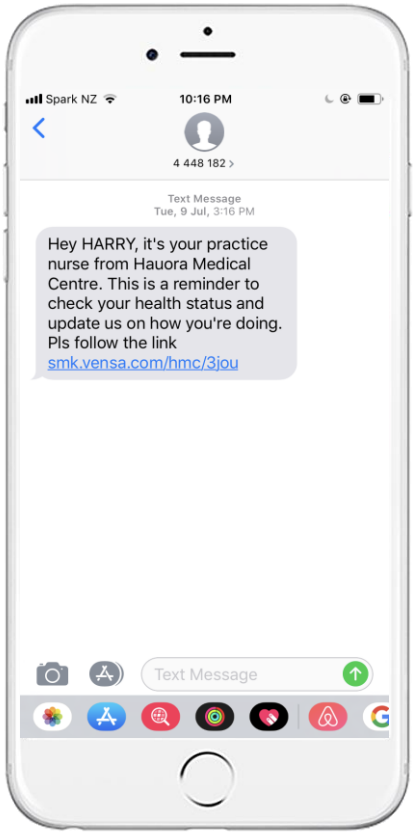
Automation of Recalls

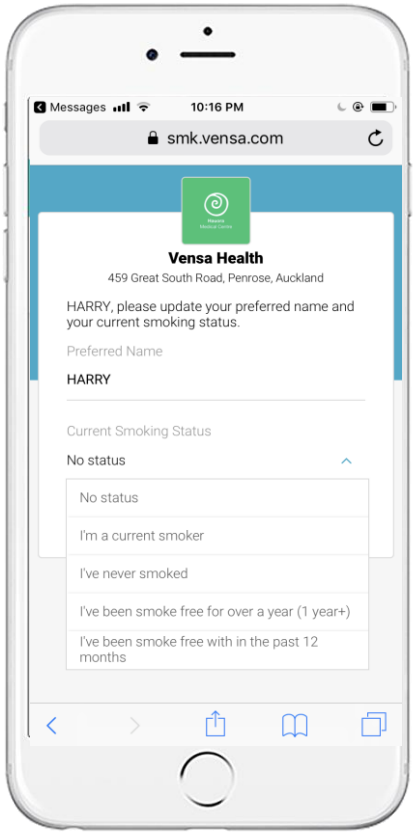
2019 vCampaign Release



Patient flow for Automatic Recalls

Vensa™


Spark NZ
10:16 PM
4 448 182
Text Message
Tue, 9 Jul, 3:16 PM
Hey HARRY, it's your practice nurse from Hauora Medical Centre. This is a reminder to check your health status and update us on how you're doing. Pls follow the link smk.vensa.com/hmc/3jou
Text Message


Messages
10:16 PM
smk.vensa.com
Vensa Health
459 Great South Road, Penrose, Auckland
HARRY, please update your preferred name and your current smoking status.
Preferred Name
HARRY
Current Smoking Status
No status
No status
I'm a current smoker
I've never smoked
I've been smoke free for over a year (1 year+)
I've been smoke free with in the past 12 months

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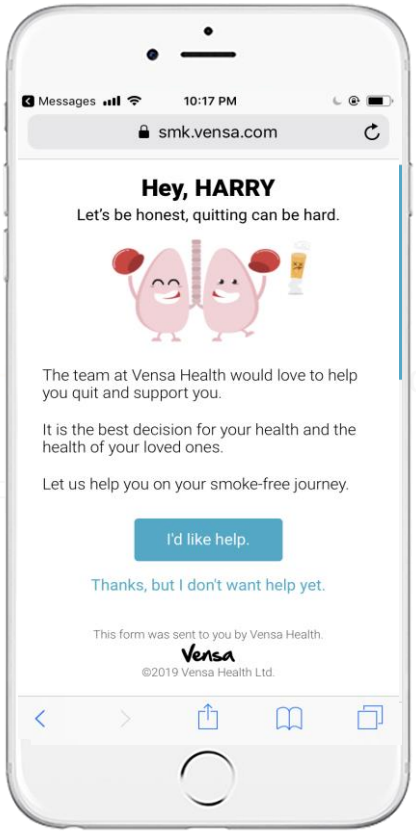
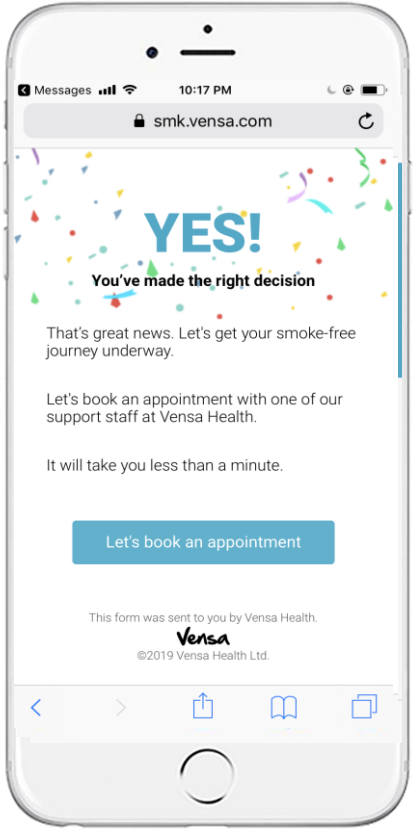
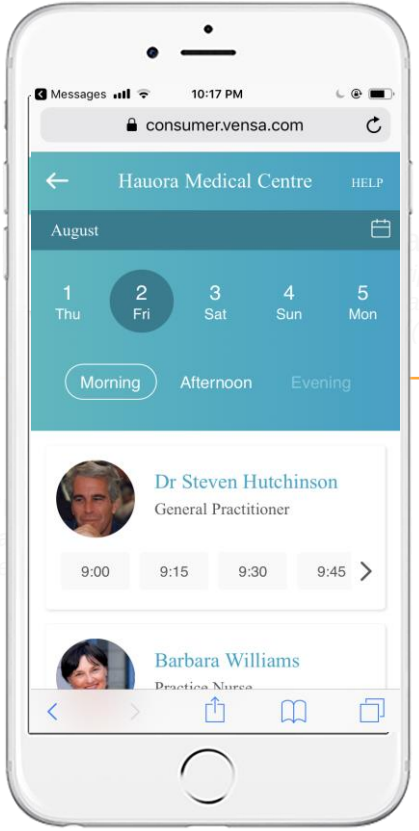






Automatic Recalls

- *Smoking targets*
- *CVDR (coming soon)*
- *Cervical Smears (coming soon)*
- *Immunisations(coming soon)*

Vensa™

Our first run results were impressive

34% patients verified their identity and updated their smoking status (over 2,500 records)

6% identified as a current smoker that weren't previously captured.

Offered brief advice and know where they can receive support

36 patients requested support to quit

How much do I hate my inbox?

Vensa™

Lab Tests

New Requests 13

Archived

Settings

New Requests

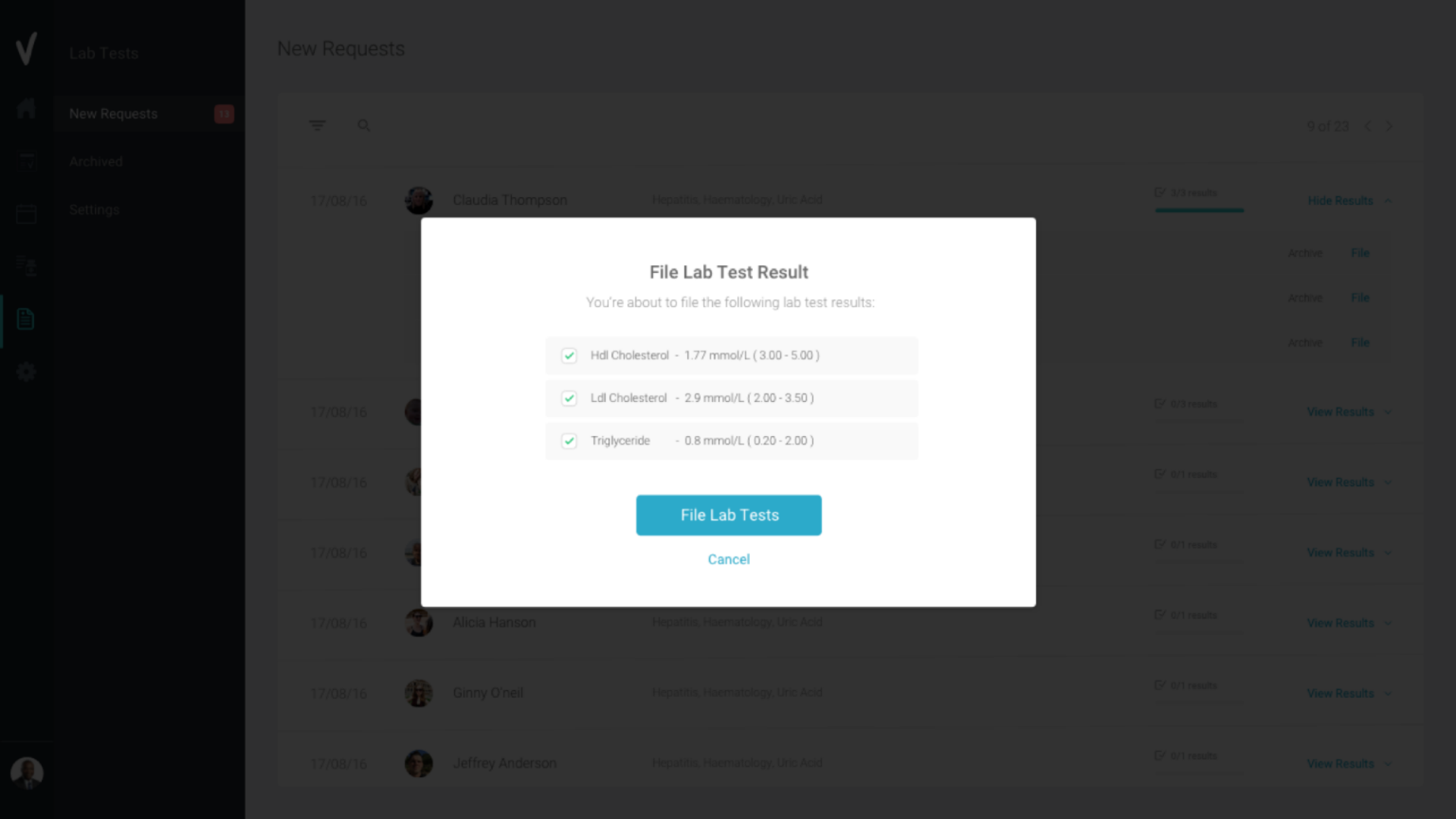
9 of 23

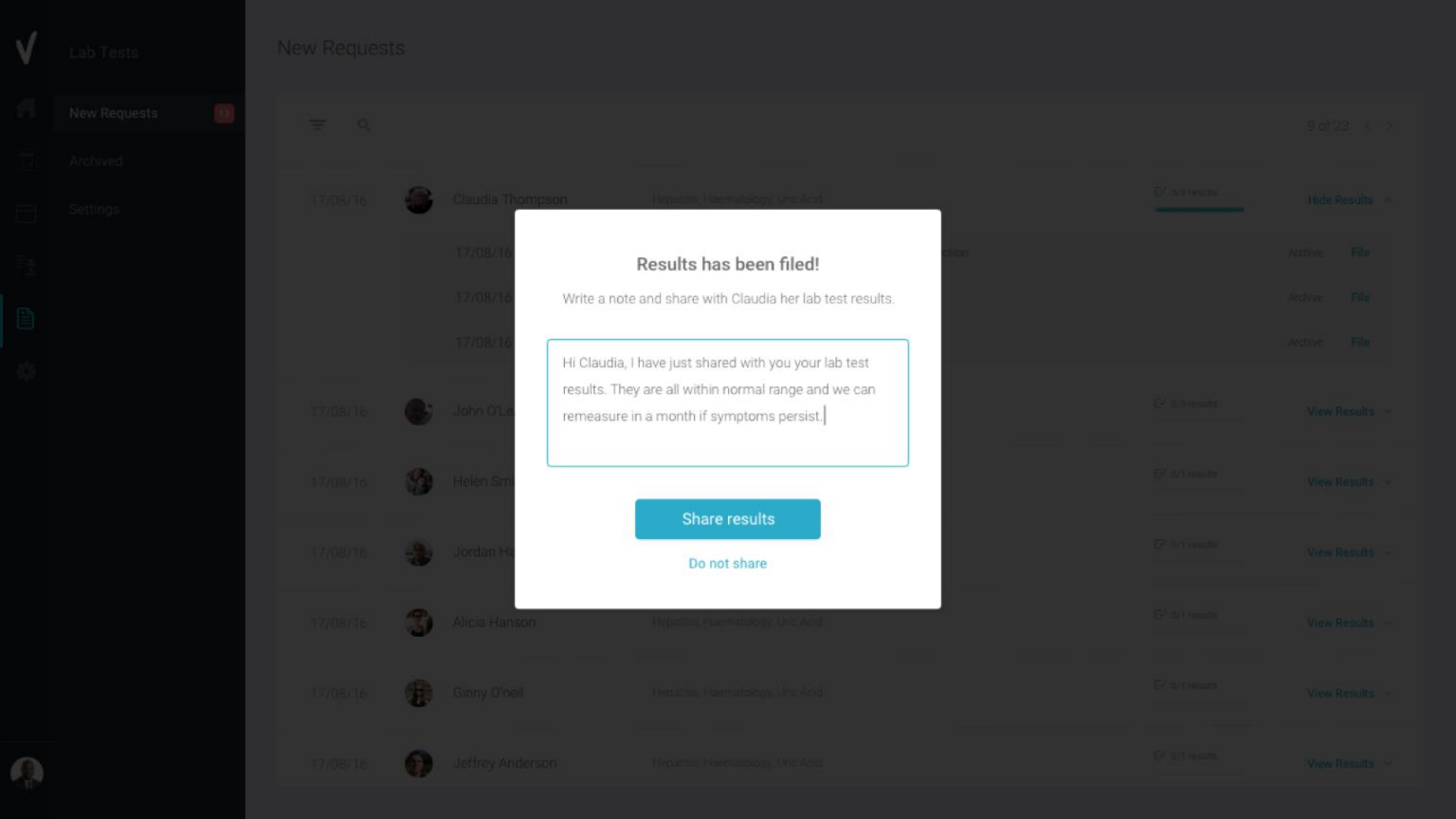
21/08/17	Claudia Thompson	Hdl Cholesterol, Ldl Cholesterol, Triglyceride	3/3 results	View Results
21/08/17	Marie Tioriori	Thyroid Function Test	2/3 results	View Results
21/08/17	Jimmy Tioriori	Iron Studies	0/1 results	View Results
22/08/17	John O'Leary	Glycated Haemoglobin	0/1 results	View Results
22/08/17	Helen Smith	Breastscreen Aotearoa Results	0/1 results	View Results
22/08/17	Jordan Harrington	Shoulder (Left) X-Ray	0/1 results	View Results
22/08/17	Alicia Hanson	Gynaecological Cytology	0/1 results	View Results
22/08/17	Ginny O'neil	Renal Function Panel	0/1 results	View Results
23/08/17	Jeffrey Anderson	Complete Bld Count	0/1 results	View Results

New Requests

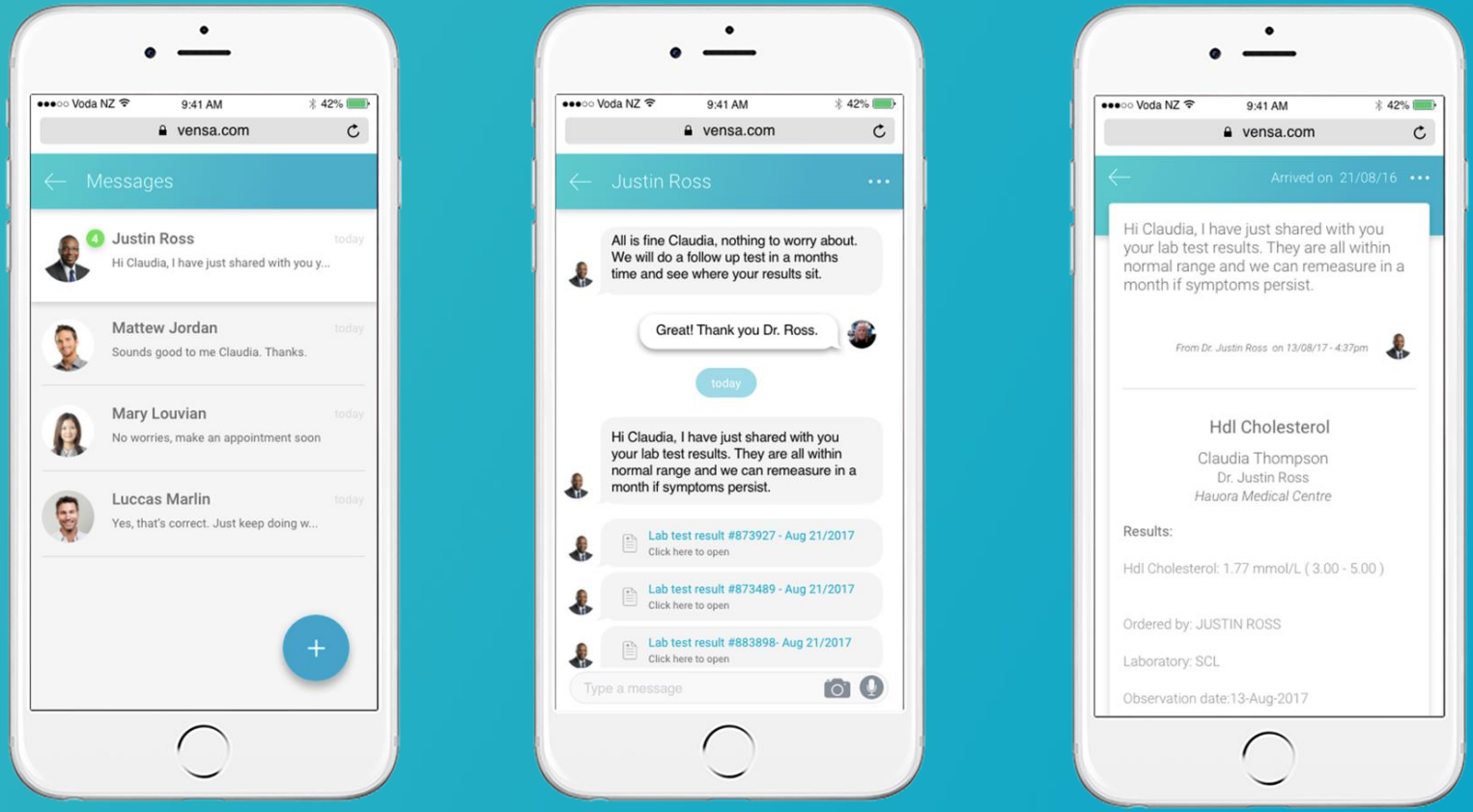
9 of 23

21/08/17	Claudia Thompson	Hdl Cholesterol, Ldl Cholesterol, Triglyceride	3/3 results	Hide Results	
	17/08/16	Hdl Cholesterol	1.77 mmol/L (3.00 - 5.00)	View	File
	17/08/16	Ldl Cholesterol	2.9 mmol/L (2.00 - 3.50)	View	File
	17/08/16	Triglyceride	0.8 mmol/L (0.20 - 2.00)	View	File
22/08/17	John O'Leary	Glycated Haemoglobin	0/3 results	View Results	
22/08/17	Helen Smith	Breastscreen Aotearoa Results	0/1 results	View Results	
22/08/17	Jordan Harrington	Shoulder (Left) X-Ray	0/1 results	View Results	
22/08/17	Alicia Hanson	Gynaecological Cytology	0/1 results	View Results	
22/08/17	Ginny O'neil	Renal Function Panel	0/1 results	View Results	
23/08/17	Jeffrey Anderson	Complete Bld Count	0/1 results	View Results	


Lab Tests
New Requests
13
Archived
Settings
New Requests
9 of 23
17/08/16
Claudia Thompson
Hepatitis, Haematology, Uric Acid
3/3 results
Hide Results
Archive
File
Archive
File
Archive
File
17/08/16
0/3 results
View Results
17/08/16
0/1 results
View Results
17/08/16
0/1 results
View Results
17/08/16
Alicia Hanson
Hepatitis, Haematology, Uric Acid
0/1 results
View Results
17/08/16
Ginny O'neil
Hepatitis, Haematology, Uric Acid
0/1 results
View Results
17/08/16
Jeffrey Anderson
Hepatitis, Haematology, Uric Acid
0/1 results
View Results
File Lab Test Result
You're about to file the following lab test results:
Hdl Cholesterol - 1.77 mmol/L (3.00 - 5.00)
Ldl Cholesterol - 2.9 mmol/L (2.00 - 3.50)
Triglyceride - 0.8 mmol/L (0.20 - 2.00)
File Lab Tests
Cancel


Lab Tests
New Requests
Archived
Settings
New Requests
Results has been filed!
Write a note and share with Claudia her lab test results.
Hi Claudia, I have just shared with you your lab test results. They are all within normal range and we can remeasure in a month if symptoms persist.
Share results
Do not share

No More Calling with Normal Results



How do we protect patient privacy?

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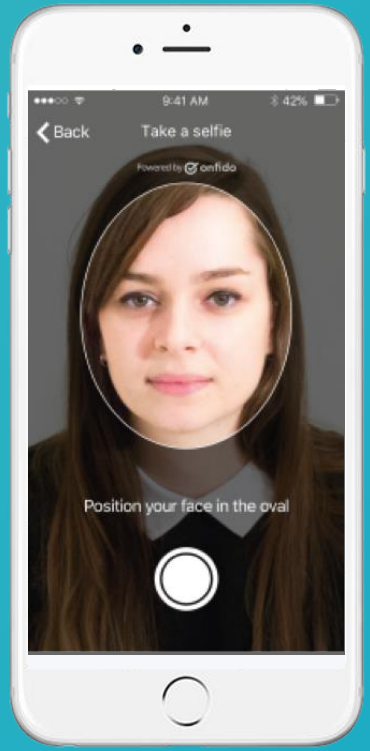
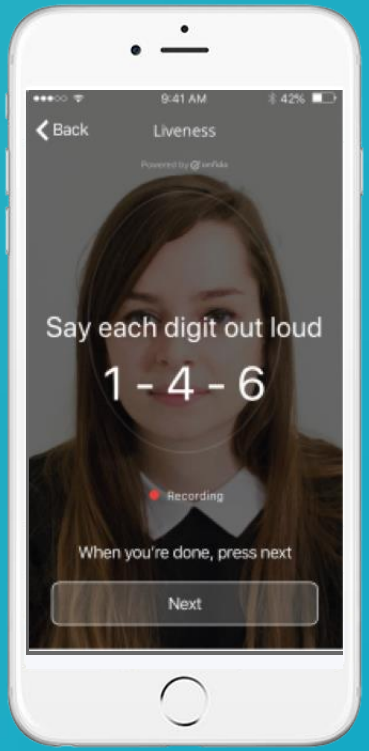
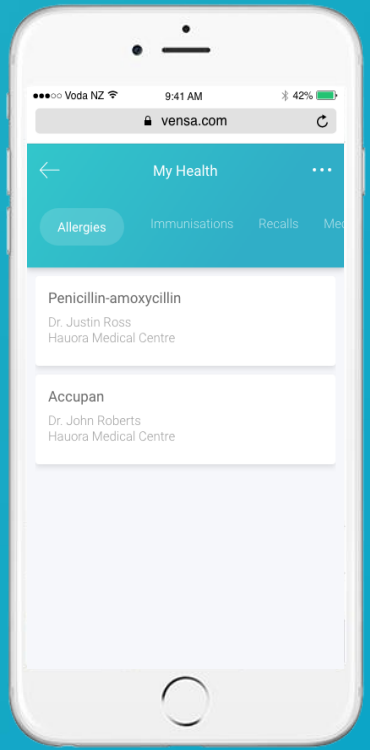
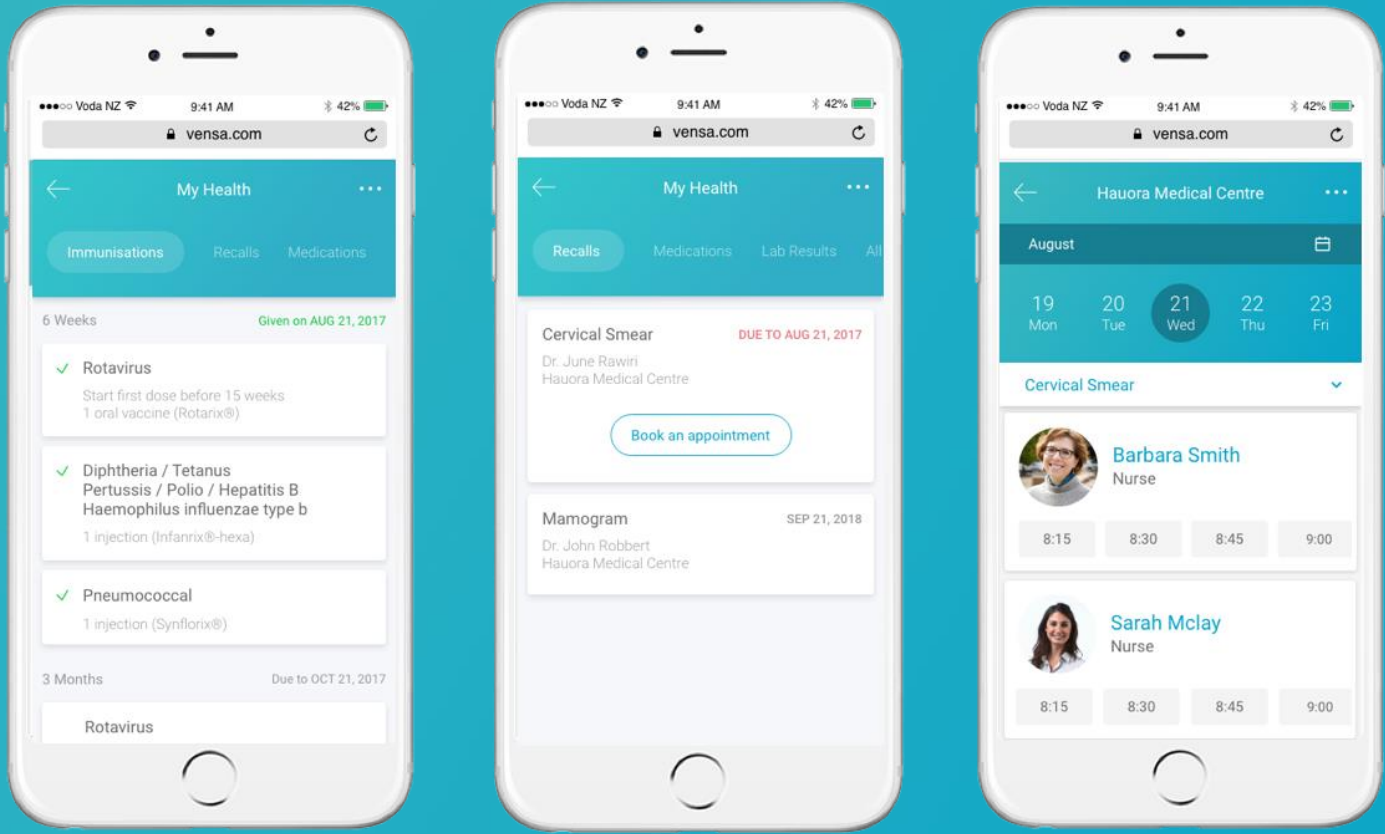
Use of **Bio-Metrics** to enable access to Health Record
Free Forever







Interoperable Patient Health Record



What will it cost me?

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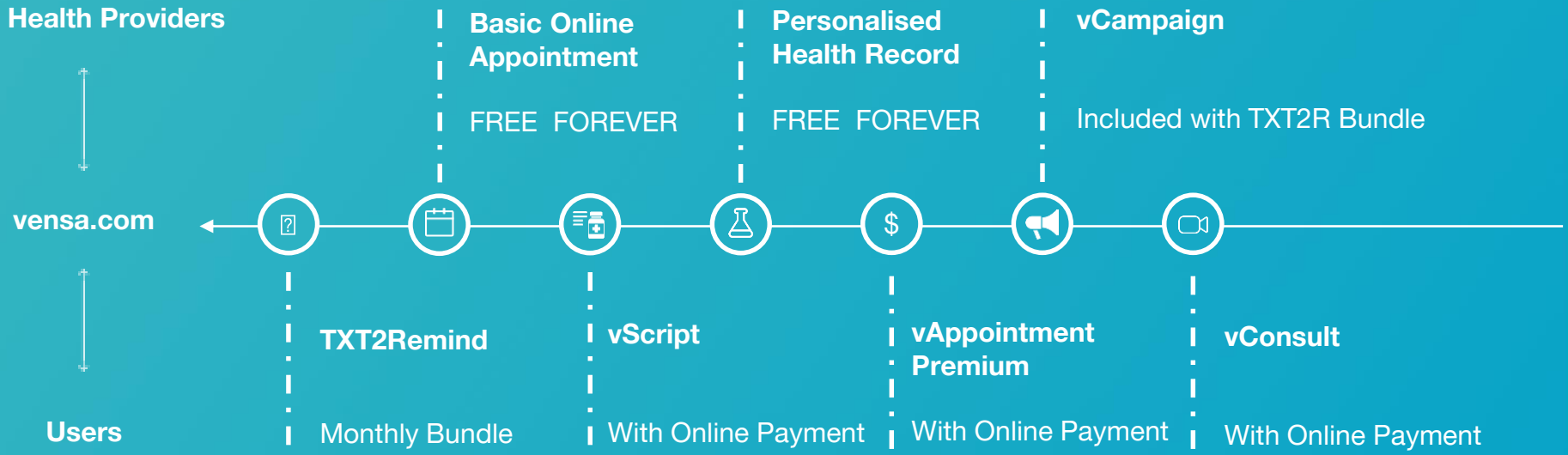
Enabling Better Business and Clinical Care



What next?

Vensa™

Thank you

For more information - please contact

Sarah Zub

szub@vensa.com

Can sign-up in less than 5 min or check us out at

www.vensa.com

Please fill out a ballot to be entered in to win a bottle of Vensa Cristal

We would love your feedback and participation in our R &D

Your Practice Success Team

Sarah Zub

VP Success & Innovation

Samuel Wong

VP Product Innovation

Ahmad Jubbawey

CEO & Founder

Brandon Wong

Practice Success Team

Ali Wahid

Technical Support

Eduardo Monzon

VP Engineering