Submission No. 062E

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## Quantum Ltd

SARS Expert Committee Room 108 Murray Building Garden Road Hong Kong June 30, 2003

Dear Members of the SARS Expert Committee,

## Re: Some Opinions Regarding the Efficiency of Hong Kong's HIS/RIS in Tackling SARS

I would like to appreciate the Government for offering a channel to people for voicing opinions regarding SARS. As a businessman selling dictation hardware and software products to various hospitals in Hong Kong, I would like to take this opportunity to contribute my idea as to how to improve the productivity of information system, particularly in the radiology department.

SARS has caused a lot of burden on doctors, particularly radiologists and pathologists, who have to conduct tremendous amount of diagnosis during the crisis. Many radiologists use traditional tape recording device to record their diagnosis and then pass the tape to typists for compilation. However, many modern hospitals in Europe and the US have already employed various digital dictation systems, to replace the traditional method. This can vastly improve efficiency, security and reliability of the IS in a hospital environment through centralized client-server speech processing system. Manufacturers (e.g., Philips) and software companies (e.g., Winscribe) have developed products that tailor to the needs of a hospital environment.

The concept of a digital dictation system is to allow the author (radiologist) to use recording device to record diagnosis verbally in digital format, and download the message via LAN, WAN, or Internet to a central server. The doctor can use any recording device such as a professional digital recorder (e.g., Philips Digital Pocket Memo), or a simple microphone, or even a mobile phone to do the recording. He or she can also be located at any location



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within or beyond a hospital, as long as there is a way to connect to the server. Typing pool (also can be located anywhere) will then retrieve messages from the server for compilation of patient records. Finished patient records will be electronically delivered to final destination or tag on with other records and become an integral part of HIS/RIS.

During SARS, doctors and transcriptionists could be benefited by such a dictation system because of its flexibility. For example, joint hospitals can share facilities and information, thanks to the use of centralized server for diagnosis. Personnel can be 'retreated' from the epicenter and still be able to compile patient records.

Other software-related features, for example, work flow management (patient ID, bar-coding), speech recognition engine, system management (user profile, priority, job costing) can be incorporated into the system to make it even more powerful and efficient.

I believe digital dictation is the answer to hospitals that want to modernize HIS/RIS. If unfortunately SARS or other epidemics were to strike again, hospitals that employ such a system will be better prepared to handle the emergency situation than the status quo.

Best regards,

James Lo

Director

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For more information regarding digital dictation, visit the websites of the manufacturers: http://www.dictation.philips.com for details regarding their digital dictation device and speech recognition system and http://www.winscribe.com for digital dictation workflow management solution.



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