Chapter 8.11

Picture Archiving and Communication System for Public Healthcare

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BACKGROUND

For the past 100 years, film has been almost the exclusive medium for capturing, storing, and displaying radiographic images. Film is a fixed medium with usually only one set of images available. Today, the radiologic sciences are on the brink of a new age. In particular, Picture Archiving and Communication System (PACS) technology allows for a near filmless process with all of the flexibility of digital systems. PACS consists of image acquisition devices, storage archiving units, display stations, computer processors, and database management systems. These components are integrated by a communications network system. Filmless radiology is a method of digitizing traditional films into electronic files that can be viewed and saved on a computer. This technology generates clearer and easier-to-read images, allowing the patient the chance of a faster evaluation and diagnosis. The time saved may prove to be a crucial element in facilitating the patient’s treatment process. With filmless radiology, images taken from various medical sources can be manipulated to enhance resolution, increasing the clarity of the image. Images can also be transferred internally within hospital departments and externally to other locations such as the office of the patient’s doctor or medical specialist in other parts of the world. This is made possible through the picture-archiving and communication system (Dreyer, Mehta, & Thrall, 2001), which
electronically captures, transmits, displays, and saves images into digital archives for use at any given time. The PACS functions as a state-of-the-art repository for long-term archiving of digital images, and includes the backup and bandwidth to safeguard uninterrupted network availability. The objective of the picture-archiving and communications system is to improve the speed and quality of clinical care by streamlining radiological service and consultation. With instant access to images from virtually anywhere, hospital doctors and clinicians can improve their work processes and speed up the delivery of patient care. Besides making film a thing of the past, the likely benefits would include reduced waiting times for images and reports, and the augmented ability of clinicians since they can get patient information and act upon it much more quickly. It also removes all the costs associated with hard film and releases valuable space currently used for storage. According to Dr. Lillian Leong, Chairman of the Radiology IT Steering Group of the Hong Kong Medical Authority, a single hospital can typically save up to 2.5 million Hong Kong dollars (approximately US$321,000) a year in film processing cost (Intel, 2007). The growing importance of PACS on the fight against highly infectious disease such as Severe Acute Respiratory Syndrome (SARS) is also identified (Zhang & Xue, 2003).

In Hong Kong, there was no PACS-related project until the establishment of Tseung Kwan O Hospital (TKOH) in 1998. The TKOH is a 600-bed acute hospital with a hospital PACS installed for the provision of filmless radiological service. The design and management of the PACS for patient care was discussed in the first edition of this encyclopedia (Tong & Wong, 2005). The TKOH was opened in 1999 with PACS installed. At the beginning, due to immature PACS technologies, the radiology service was operating with film printing. A major upgrade was done in 2003 for the implementation of server clustering, network resilience, liquid crystal display (LCD), smart card, and storage-area-network (SAN) technologies. This upgrade has greatly improved the reliability of the system. Since November 2003, TKOH has started filmless radiology service for the whole hospital. It has become one of the first filmless hospitals in the Greater China region (Seto, Tsang, Yung, Ching, Ng, & Ho, 2003; Tsou, Goh, Kaw, & Chee, 2003).

**MAIN FOCUS OF THE ARTICLE**

The design of a PACS for such a system should be high-speed, reliable, and user friendly (Siegel & Kolodner, 2001). While most equipment is designed for high reliability, system or subsystem breakdowns can still occur, especially when equipment is used in a demanding environment. A typical situation is what could be called a “single-point failure.” That is, the entire system fails if only one piece of equipment such as a network switch fails. If some of the processes that the system supports are critical or the cost of a system stop is too high, then implementing redundancy management into the system is the best way to overcome this problem. The continuous operation of a PACS in a filmless hospital for patient care is a critical task. The main purpose of a reliability design is to avoid the occurrence of any single point of failure in the system. This design includes a number of technical features. The technical features of the PACS installed in a local hospital include the archiving of various types of images, clustering of Web servers installed, redundancy provision for image distribution and storage channels, and adoption of bar-code and smart-card systems. All these features are required to be integrated with the electronic patient record system (ePR) for effective system performance and these are described below.

**Archiving of Multiple Image Types**

In order to make connections with different imaging modalities (e.g., Magnetic Resonance