

## Health Tech to Watch in 2017



Which technologies are likely to see expanded use in healthcare next year? Hospitals continue to pour money into IT investments aimed at improving services and overall quality of care. Laboratory-focused technologies, such as transfusion and specimen collection management systems, lab outreach services and molecular diagnostics, are among the innovations with the most potential for growth for 2017, according to HIMSS Analytics.

## See Also: HIT Spending to Grow

Matt Schuchardt, director of market intelligence solutions sales at HIMSS Analytics, provides a listing of the technologies most on the radar for 5,461 hospitals across the U.S. in 2017 (number of predicted installs in parentheses):

Transfusion Management System (375) and Specimen Collection Management System (398). These are advanced laboratory systems for managing how things are transfused, whether blood or even breast milk, and then labelling these things from a specimen management perspective.

**Infection Surveillance System (405).** This helps improve management and monitoring of hospital-acquired infections. "It's part of the CMS (quality) scores and they're doing a better job monitoring that, making sure the taxpayers aren't paying for HAIs," says Schuchardt.

Anaesthesia Information Management System (237). "If you think about where risk is, hospitals really focus around surgery," notes Schuchardt. "Making sure they're monitoring anaesthesia is really important: It's the most dangerous part of any hospital stay, other than staph infections.

Medical Necessity Checking Content (424). The idea behind this innovation is to make sure the hospital is going to get paid for the procedure prior to doing it. "I expect growth there to continue," he says. "It still surprises me that a lot of hospitals do these procedures with the hope of getting paid as a strategy."

Laboratory - Outreach Services (298). "This is making sure people are getting the tests that they need," explains Schuchardt. "You see the see the TV ads for biologics all the time that may cause liver damage: Are these people coming back in and having their levels checked on their liver while they're taking them? This technology manages the process – making sure people are being notified of the results, notified for follow-up work, and things like that."

Laboratory - Molecular Diagnostics (113). This is HIMSS Analytics' term for precision medicine. Schuchardt sees more health systems moving to a "hub-and-spoke model" for genomics capabilities, with larger medical centres with the technology and the personnel serving smaller hospitals. "(We) will see precision medicine installed at hub hospitals, so the actual blood work and tests may be done at the academic medical centre that's the centre of the healthcare system you go to – but probably never will be done at your local hospital."

**Radiology 3D Image/Display (348).** As imaging capabilities increase, being able to see those images also becomes complicated. For example, a three-dimensional mammogram can be as large as a terabyte or more. "As these images get more discrete, the volume and size of those images grows pretty rapidly," Schuchardt says. "Being able to manipulate a giant 3D model like that requires special monitors, special software to

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Nurse Communication System (420). This is to make sure that nurses – the primary caregivers in the hospital – are in the right places and doing the right things and taking care of patients at the right moment.

**Health Information Exchange (496).** The majority of installs are in EMR or legacy systems, but there's some movement toward some specific systems – even in places where people are focused around an HIE that does more than connect them just within their vendor but connects them to other organisations as they look to control their catchment area, maintain where patients are going and exchange the right data while maintaining the security necessary to protect PHI, according to Schuchardt.

**Data Warehousing/Mining (287).** A lot of hospitals have data warehousing capabilities, but they're often "some sort of cobbled-together, self-developed system," says Schuchardt. "We expect there to be growth there. More and more organisations are looking to turn their data into an asset. Having the data is one thing, using it effectively is an entirely different animal."

Source: Healthcare IT News

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Published on : Tue, 20 Dec 2016