Crossing the Great Divide **Enhancing Clinical Medicine with Advanced Computing**

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the problem...

 clinical workflows historically have had no access to computing innovation;

 real world impact of novel algorithms is lost

 medical care and patient outcomes could suffer

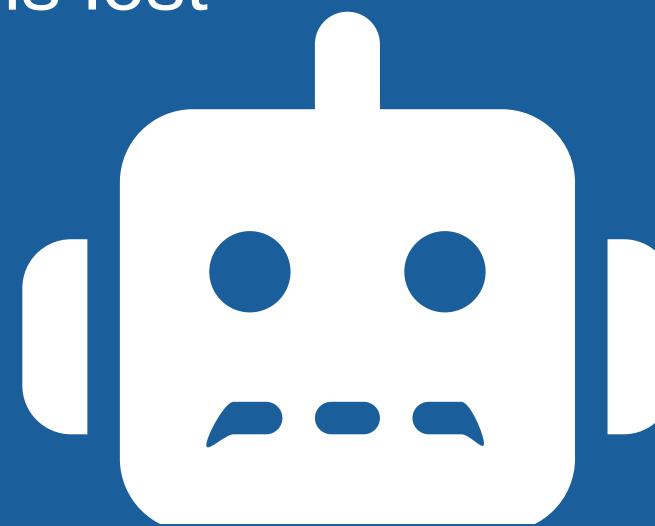


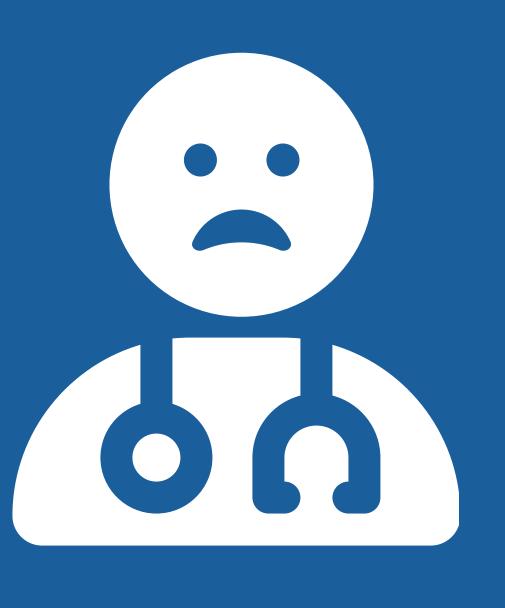
how things are...

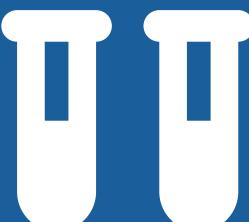
- researchers develop new algorithms that advance the basic field;
- imagine, publish, forget?
- delegate/ignore the integration problem;
- cutting edge / impactful research is lost

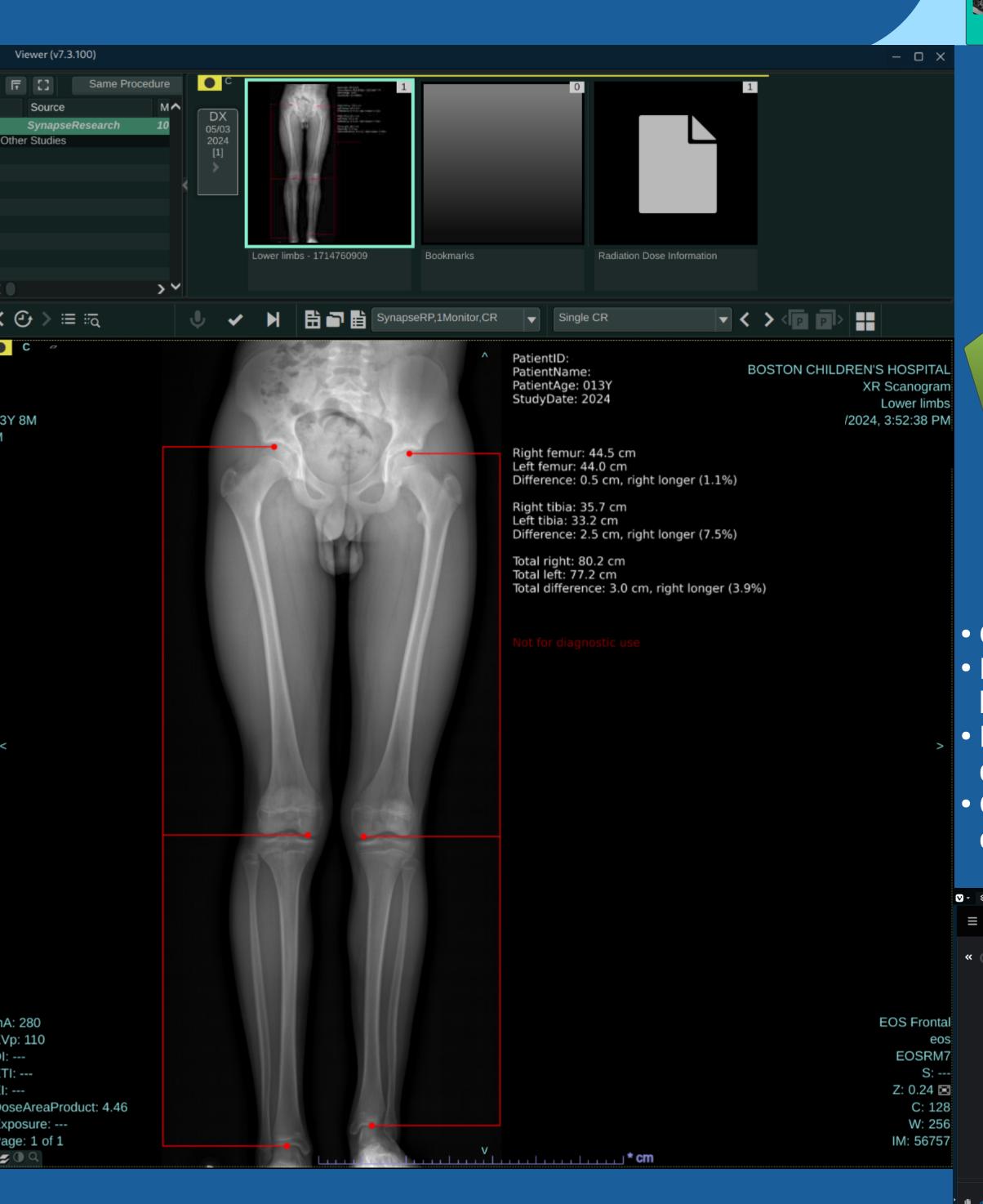
V ▼ S Workspaces ▼ My Analyses - ChRIS UI site +

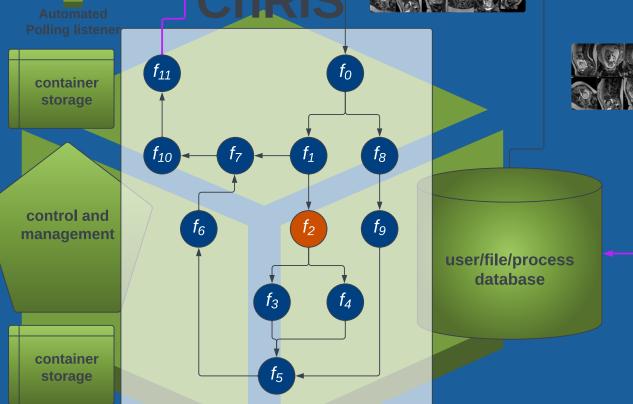
ChRIS Dashboard











Picture Archive and

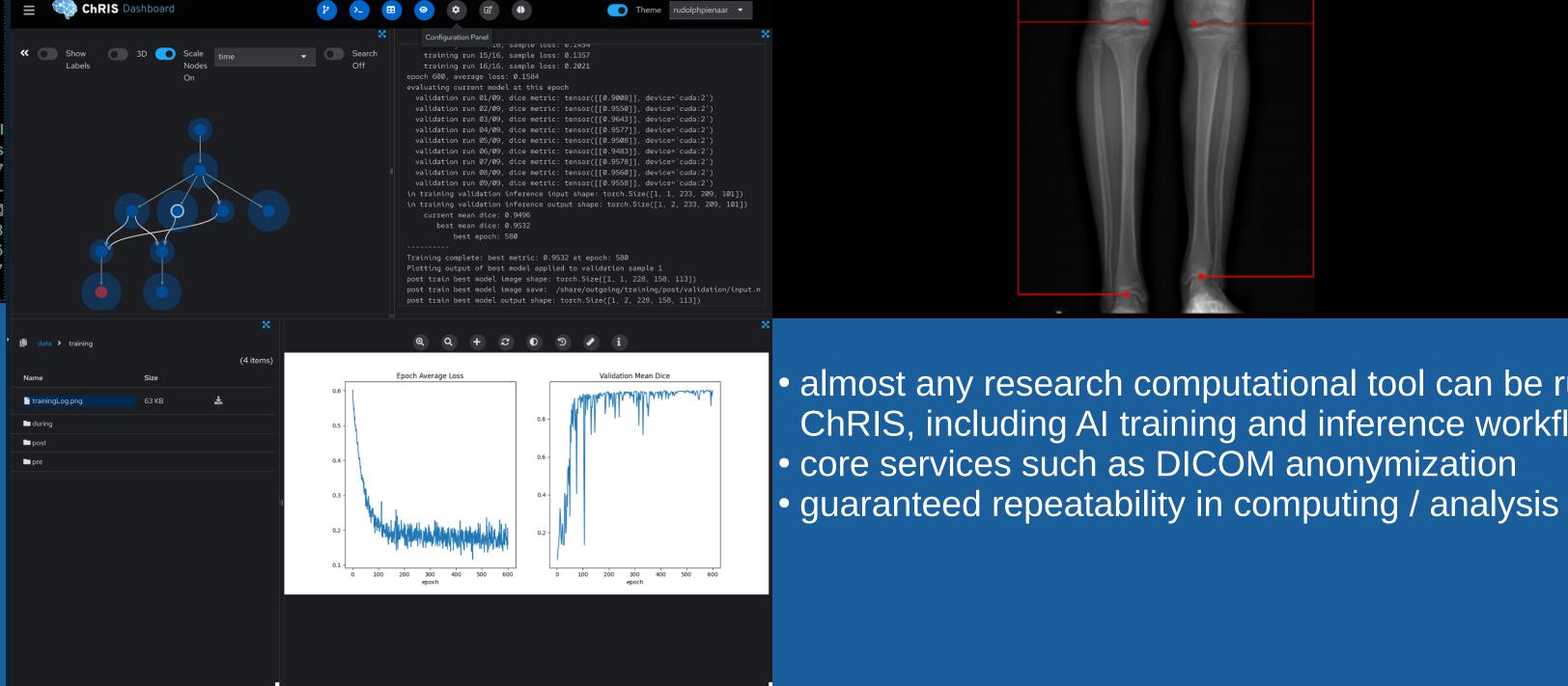
Communications System

PACS

1

ChRIS

- Open source / open science platform
- Designed to bridge clinical / research last mile
- Provides templatized application development tools
- Connects to cloud, HPC, and local dev environments







core services such as DICOM anonymization

Difference: 0.5 cm, right longer (1.1%)

Difference: 2.5 cm, right longer (7.5%)

Total difference: 3.0 cm, right longer (3.9%)

- automated PUSH triggering:
- directly from PACS to ChRIS
- directly from clinical scheduling system to controller service

automated PULL polling:

- poll **PACS** for appearance of trigger images
- initiate pull to and analysis in ChRIS







