



International Society for  
Telemedicine & eHealth

*Open Source working group  
of the International Society  
for Telemedicine & eHealth*

# **Problem Based Tele-Learning**

IFMSA conference, Hammamet / Tunisia, 1 March 2014

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# ISfTeH Objectives

International Society for  
Telemedicine & eHealth

- Improvement of medical education using a problem based approach.
- Training made accessible for medical students in remote locations, who could otherwise not afford to stay at university.
- Continued education and know-how exchanges.
- “Collaborative Care Team” : training how to work together across Internet.

# Introduction

- A project of the IsfTeH, International Society for Telemedicine & eHealth, <http://www.isfteh.org/>
- Participation of the IFMSA is essential. Sorry, not yet much new development since the Santiago conference.
- 2 Main issues:
  - Medical knowledge: assumed to be available.
  - Training: focus on medical methodology how to manage patient information and to solve problems

# ( 1 ) Access to Medical Knowledge

- Much medical knowledge is already freely available on Internet, but guidance is needed in order to find the most relevant documents for the intended study.
- The role of a teacher is to evaluate, adapt or extend documents, but no more to give lectures to passive listeners.
- The student study the recommended documents on own computer, at own tempo.

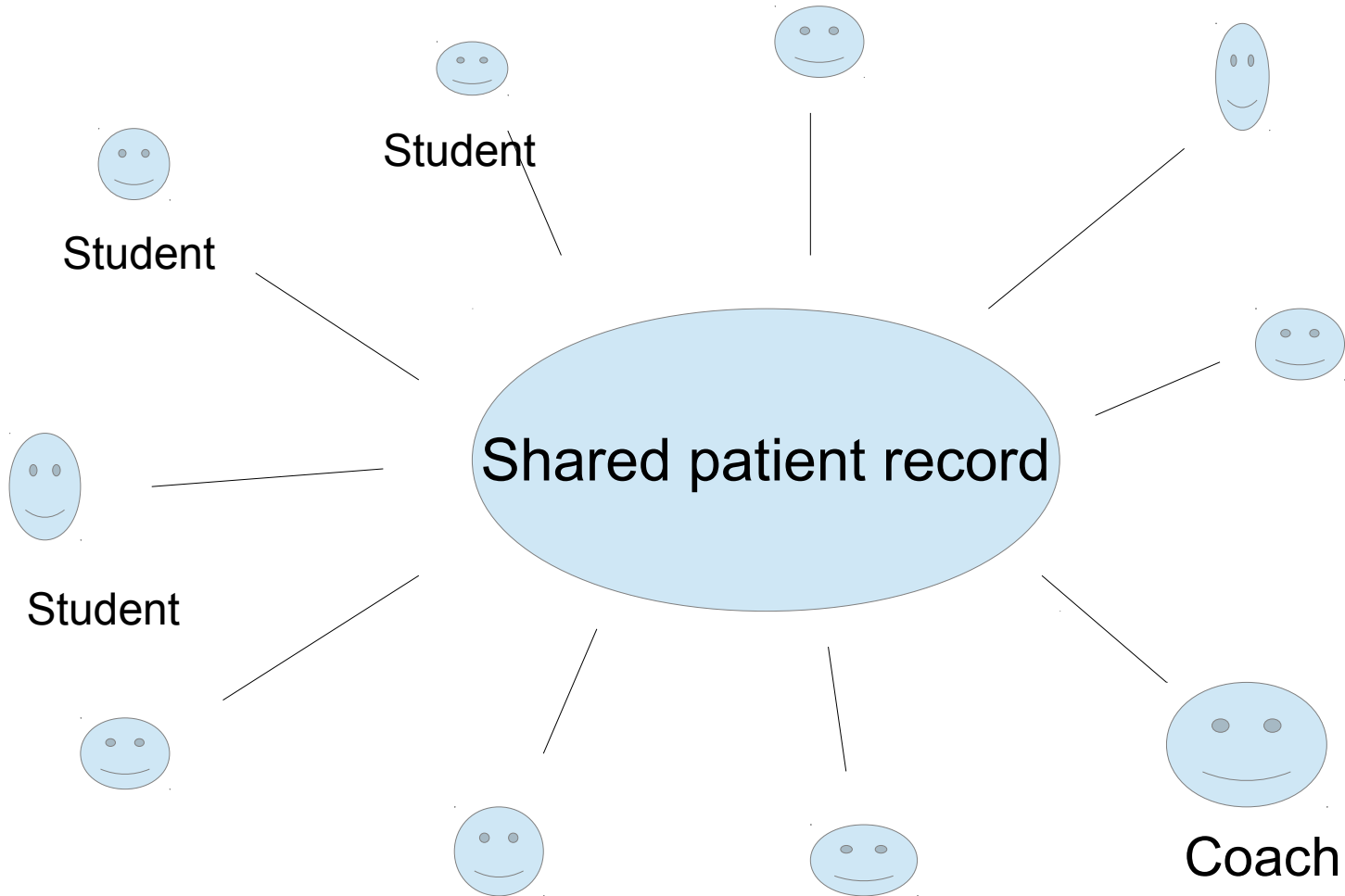
# Sources of medical knowledge

- In principle based on “open data”. To be further explored, a few examples:
- En: <http://www.doaj.org/> , <http://www.ncbi.nlm.nih.gov/pmc/> ,  
<http://www.cochrane.org/> , <http://www.biomedcentral.com/> ,  
<http://www.healthinformaticsforum.com/MOOC> ,  
etc...
- Fr: Université Médicale Virtuelle Francophone, <http://www.umvf.org/>
- Es: <http://biblioteca.fucsalud.edu.co/index.php/bases-de-datos/libre-acceso> ,
- ..... : .....

## ( 2 ) Training

- Having good theoretical knowledge is not enough.
- Training is an essential aspect of education.
- Exercises with questions and answers can help. However interaction with a tutor or coach remains essential.
- This is nowadays possible in a “virtual room” across Internet.

# Virtual Care Team across Internet



# Solving health problems : Problem Oriented Medical Record

- In order to solve problems it is of course critical to identify the problems.
- Maintenance an up to date and explicit documentation of the current understanding of the “Health Issues”.
- This methodology is a quality factor, particularly when several medical actors need to share knowledge about a common patient.



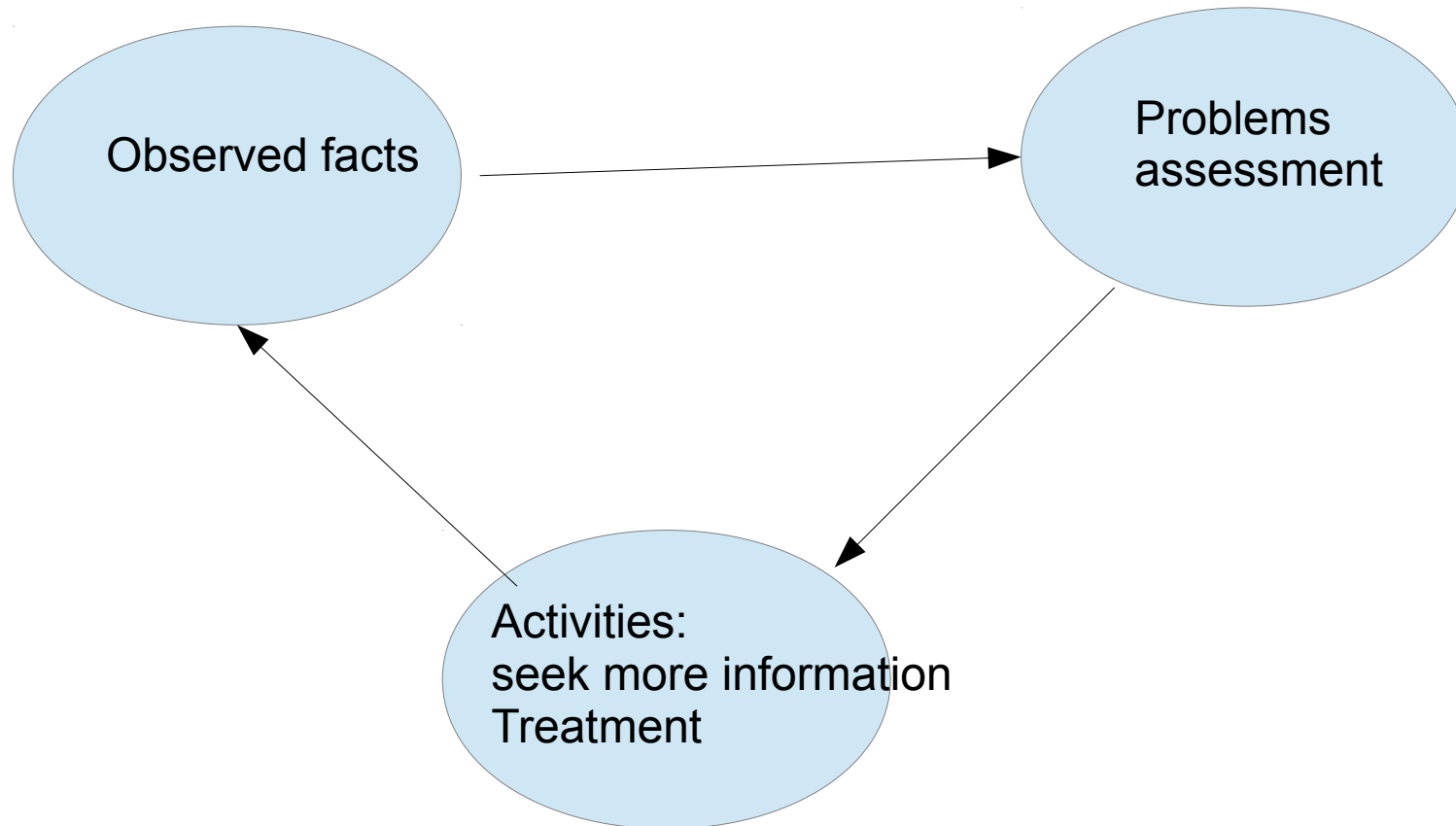
# Health Issues

- Any health concern requiring attention :
- Fact to be further explored as complaints, abnormal finding, important risk factors, hypothesis or confirmed diagnoses.
- “Problem list”, an overview of the issues to be shared between the members of the care team, as the first page of the patient record.
- Step by step new versions when the understanding of the case progress.

# Iterative Care Process

- Some facts about a case are presented starting for example with fever, pain, ...
- **Given what is known up to now, what should be done next ?**
- > 10'000 actions are in principle possible, as ask more questions, lab tests, images, prescriptions, etc...
- Again and again the question is to discuss the appropriated priorities, in function of expected benefits and charges.

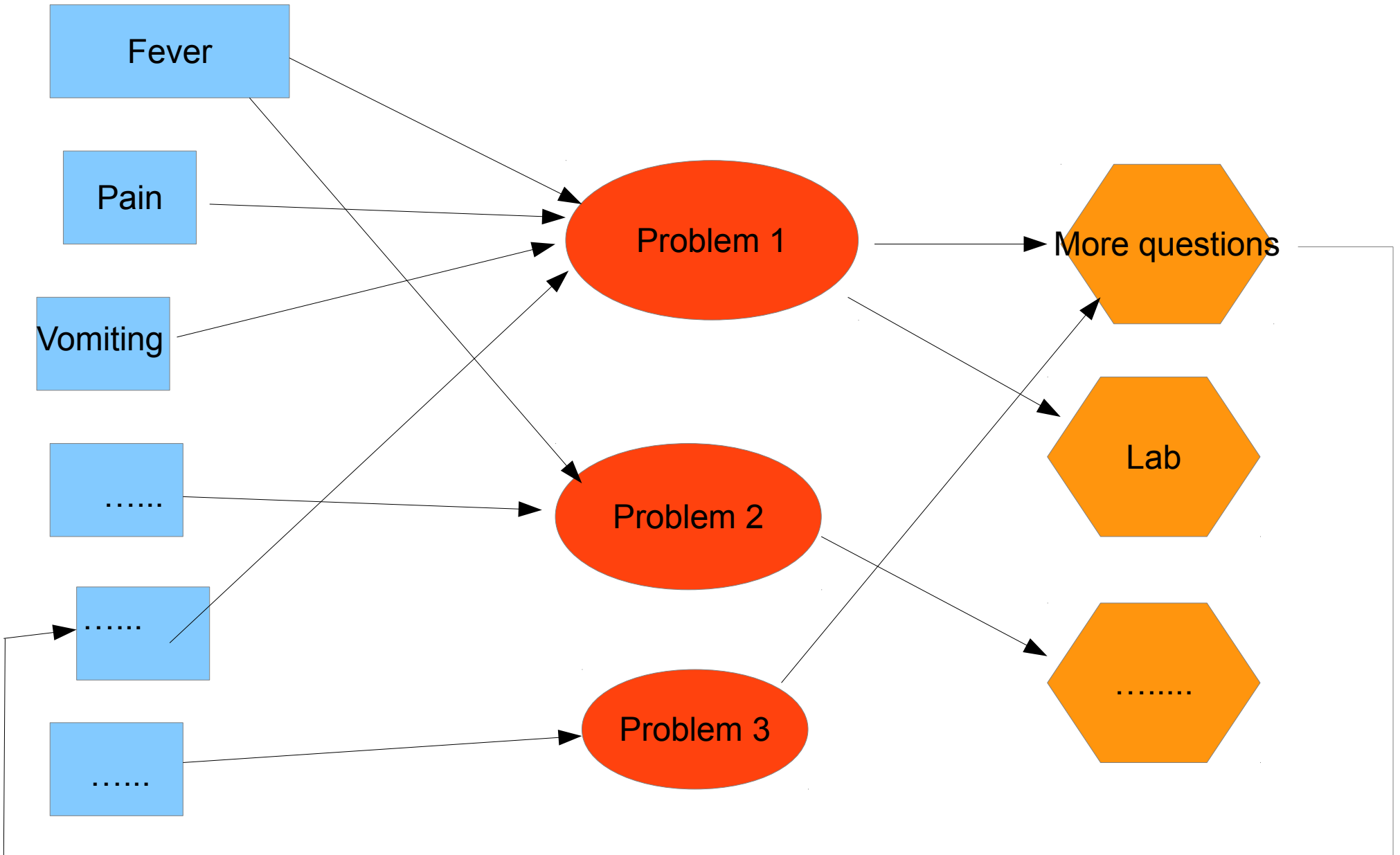
# Iterative Care Process



# Facts

# Issues

# Activities



# Software tools

- Define the training scenario.  
The point is to support interactive dialogues between the members of a team i.e. discussions about  
**“What to do next?” and Expected benefice/costs ?**
- Begin with simple white board tools like MCONF, <http://mconf.org/> ,  
Etherpad, <http://etherpad.org/> ,  
<https://etherpad.saliez.be/p/test>  
(click on the top right button to add a participant receiving a color)
- Evaluate existing medical record systems available in open source.  
Seek how to make adaptation and extension, in function of our teaching scenario.  
For example look at “GNU Health”, <http://health.gnu.org/> .

# Free & Open Source, Sharing software know-how

- In the international context of the IFMSA the software educational requirements are likely to be similar everywhere and should be shared.
- Open source software may be freely installed in any number of locations. No licenses costs.
- Right to make extensions in an international community sharing new developments.
- ...

# Project Economic Model

- The healthcare world needs are everywhere much greater than the available resources.
- The IFMSA need training softwares tools but the goal is not to try to make profits selling softwares.
- Many software components are already available in Open Source, but extensions are still needed.
- Contributions in money and/or in kind.  
From welfare foundations, from governmental grants, with help from students in informatics and Open Source volunteers.

# Call for Partners

- Group of students willing to build experience in Virtual Care Teams.
- Tutors accepting to spent time in order to coach students teams.
- Teachers accepting to make courses available on Internet.
- Sponsors understanding that the results of their limited resources will be maximized, when made available in the public domain, as “Open Source” and “Open Data”.





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<http://www.isfteh.org>

Problem Based Tele-Learning.

<http://www.chos-wg.eu/PBTL/PBTL.html>

Register on the mailing list, send your Email to  
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