



Leveraging the Clinician Registry to Disseminate Critical Information

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Presentation Overview



- ❖ **Needs & Issues**
 - Provide clinicians with up-to-date information
- ❖ **An Immediate Solution**
 - The CDC Clinician Registry
- ❖ **Phased Approaches**
- ❖ **Integration with PHIN**

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Clinician Needs and Issues



- ❖ In a public health event, clinicians are key points in identification, prevention, treatment and prophylaxis
- ❖ Information changes rapidly during such events
 - Hourly, Daily, Weekly
- ❖ As key points in the health system, clinicians readily need up-to-date information
- ❖ How to alert clinicians to changes in guidance?

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The Solution



- ❖ **Develop a means to inform clinicians of what they need to know, when they need to know it.**
- ❖ **The CDC Clinician Registry**
- ❖ **Recruitment**
 - Initially through direct mail campaign
 - Asked to register through a CDC Web page
 - Ongoing outreach via CDC Web pages
 - Intermittent invitations through CDC partners

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CDC Clinician Registry



❖ Professional role information on registrants:

➤ Nurses	16,387
➤ Physicians	10,552
➤ Other	17,250
➤ TOTAL	44,189

(as of 05-18-04)

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Disseminating the Information



❖ Information dissemination model

- Categorized by “topic”
 - Offers a summary
 - URL where full-text version of information may be obtained
- As this content changes, an update is sent
 - Brief summary of change
 - URL where full-text version of the information can be obtained

❖ Challenges

- Competition for clinician time
- Ease of access
- Information volume
- Clear visualization of “what’s new”

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Disseminating the Information



✉ **CDC Updates to Information and Guidance, 1/22-1/30/04 - Message (HTML)**

File Edit View Insert Format Tools Actions Help Type a question for help

Reply Reply to All Forward Options... [Icons]

From: Clinician Outreach and Communication Activity
To: CDC-CLINICIAN.TERRORISM.ANDEMERG.RESP.Updates@LISTSERV.CDC.GOV
Cc:
Subject: CDC Updates to Information and Guidance, 1/22-1/30/04

Sent: Mon 2/2/2004 12:52 PM

Good afternoon,

The following updates and additions were made to CDC information and guidance on influenza during the period from January 22 to 30, 2004. If you have any questions on these or other clinical issues, please call our toll-free Clinician Information Line at 877-554-4625 or write to us at COCA@cdc.gov:

UPDATES TO INFORMATION AND GUIDANCE

INFLUENZA
The following additions or changes were made to Web pages dealing with influenza:

Influenza A (H5N1) Outbreak in Vietnam
This Web page has been updated to report the occurrence of cases in southern Vietnam as well as cases and deaths reported by the government of Thailand.
(Visit <http://www.who.int/en/> for updated case counts.)
<http://www.cdc.gov/flu/about/h5n1outbreak.htm>

Weekly Report: Influenza Summary Update, Week ending January 17, 2004 - Week 2
All four surveillance components reflected decreases in influenza activity during week 3 (January 18-24, 2004). The percentage of specimens testing positive for influenza decreased, and the percentage of patient visits for influenza-like illness (ILI) remained below the national baseline of 2.5%. Mortality due to pneumonia and influenza (9.7%) appears to have peaked but remained above the epidemic threshold during week 3 (8.2%). <http://www.cdc.gov/flu/weekly/>

If you need to unsubscribe or update your information, please go to our Web site: <http://www.bt.cdc.gov/clinregistry/>.

If you need further information or technical help, please send an email message to coca@cdc.gov.

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Smarter Information Dissemination



❖ Phase 1

- Using available standards-based technologies (XML, RSS, content management, etc.) to support:
 - More flexible content management
 - Currently content is either on CDC's Web site or in a Word document
 - Manually cut and pasted into an email for distribution
 - more flexible content dissemination (move away from flat content as form for dissemination)
 - “Change tracking” – effectively identify what's changed/new

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Smarter Information Dissemination (cont'd)



❖ Phase 2

- Integrate into a personalized “MyCDC” framework
- Refine information architecture to support more flexible content dissemination
 - Content subscriptions based on topic(s) of interest, geographical location, alert notification status
 - Use more specific XML schemas to better chunk content
 - Refine metadata and tagging
 - Support multiple devices
- Remove manual “cut and paste” approach and move toward write once, publish for multiple needs

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Integration with PHIN



❖ PHIN Components

- Vocabulary standards
 - Meta-Tagging utilizes controlled vocabularies (Controlled Health Thesaurus)
- Industry content-exchange standards
 - XML
 - RSS
- Alerts and Communications
 - Standard definitions for “alert”, “notification”, “update”

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