

Grant Agreement Number ECP-2006-EDU-410030



www.virtualpatients.eu

Complete referatory of repurposed, standardised and localised VPs for different disciplines, including metadata descriptions

Deliverable number/name	<i>D3.6</i>
Dissemination level	<i>Public Product</i>
Delivery date	<i>25/06/10</i>
Status	<i>Draft</i>
Author(s)	<i>eViP Consortium</i>



eContentplus

This project is funded under the *eContentplus* programme¹,
a multiannual Community programme to make digital content in Europe more accessible, usable and exploitable.

¹ OJ L 79, 24.3.2005, p. 1.

1	BACKGROUND.....	3
2	INTRODUCTION.....	3
2.1	REPURPOSED, STANDARDISED AND LOCALISED VPS.....	3
2.2	METADATA DESCRIPTIONS.....	3
3	THE EVIP REFERATORY	4
3.1	BROWSING.....	4
3.2	SEARCHING.....	4
3.3	VIEWING.....	5
4	SUMMARY	6

1 Background

This deliverable (D3.6) is one of the main achievements of the eViP project. Firstly, it made use of the knowledge gained and results achieved since the start of the eViP project. Secondly, it constitutes the major OPEN virtual patient (VP) referatory worldwide both in terms of amount of virtual patients and the cultural richness of its content. As a result of the work carried out by the partners over the last three years, the project has produced more than the anticipated number of repurposed and enriched VPs initially forecast at the outset (i.e. 320+ VPs, n=327) and this number is expected to increase further over the remaining months of the project. The eViP referatory is now publically available at <http://virtualpatients.eu/referatory>

2 Introduction

2.1 *Repurposed, standardised and localised VPs*

The work toward creating 320 repurposed, standardised and localised VPs started with a pilot case study (D1.1). Issues related to the standardisation the VPs were reported in D2.1 (eViP Application Profile and evaluation report on third party tools and services), D2.2 (eViP Profile implementation and conformance testing) and D2.3b (Best practice guidelines for the eViP AP and conformance metrics). The different steps of the repurposing efforts and the knowledge gained were reported in D2.3a (IP management), D3.1 (Inventory of existing VPs), D3.2 (Populated repository of English VPs as selected in D3.1), D3.3 (Report on set of new repurposed standards compliant VPs, with metadata, and packaged, for multi-lingual access) and D3.4 (Report on set of localized new VPs into new disciplines and new cultures and approved peer review process).

2.2 *Metadata descriptions*

In D3.5 (Report on and metadata schemes for eViP VP) we presented an eViP proposal for virtual patient specific metadata in eViP application profile compliant VP packages. The proposed metadata application profile of eViP was based on the IEEE LOM standard and its extension, MedBiquitous Healthcare LOM. A selection of existing fields as well as a proposal of new elements have been made to illustrate system properties and workflow stages commonly encountered in the eViP project as virtual patient systems features, repurposing types, patient consent and copyright issues. The Deliverable 3.5 extended the work already presented in D2.2 (VP Profile implementation and conformance testing).

The reported work on metadata was the base the creation of a metadata profile for the eViP referatory. The fields are described in Table 1.

Field Number	Description	Specification
1	Unique ID of the VP record	LOM 1.1
2	Title of the VP	LOM 1.2
3	Language of the VP	LOM 1.3
4	Description of the VP	LOM 1.4
5	Author of the VP	LOM 2.3.2
6	Institution	LOM 2.3.2

7	Email Contact	LOM 2.3.2
8	Date of metadata record creation	LOM 3.2.3
9	URL to the VP	LOM 4.3
10	License for the VP	LOM 6.3
11	Keywords (Mesh, ICD10, etc...)	LOM 1.5
12	Virtual Patient System used to create/play the VP	eViP 1.1

Table 1. Mapping of the metadata required for the eViP referatory

3 The eViP referatory

The eViP referatory is openly available at <http://virtualpatients.eu/referatory>

The eViP referatory contains the description of 320 freely available virtual patients that have been repurposed by the eViP partners. The main features of the eViP referatory are illustrated below.

3.1 Browsing

The screenshot shows the eViP referatory website interface. At the top, there is a banner with the eViP logo and the text "electronic Virtual Patients" and "Co-funded by the European Commission". Below the banner is a navigation menu with links for HOME, ABOUT, RESOURCES, EVIP NEWS, and EVIP MEMBERS AREA. A search bar is also present. The main content area displays "You are here: Home » Referatory" and "Referatory". Below this, there is a search bar and the text "Displaying 327 virtual patients". A table lists several virtual patients with columns for Title, Keywords, Language, Institution, License, and URL.

Title	Keywords	Language	Institution	License	URL
Catherine Miller	Meningitis, Bacterial Meningitis, Sepsis	en-GB	St George's, University of London		Link
Catherine Miller	Meningitis, Bacterial Meningitis, Sepsis	en-GB	St George's, University of London		Link
Anna-Lena Olofsson	Failure to thrive	en-GB	St George's, University of London		Link
John M	Idiopathic thrombocytopenic purpura, Bruises, Immunoglobulin	en-GB	St George's, University of London		Link
Florian	Prematurity, Respiratory distress syndrome, Hyaline membrane disease, Pneumothorax, Sepsis	en-GB	St George's, University of London		Link
Oga	Tuberculosis, Respiratory distress syndrome, Cough	en-GB	St George's, University of London		Link
Anna-Lena Olofsson	Failure to thrive	en-GB	St George's, University of London		Link

Figure 1: List view of the VPs available in the referatory

3.2 Searching



Figure 2: Search tool

3.3 Viewing



Figure 3: View of a VP record

4 Summary

Over the course of the last three years, the eViP website has proven itself to be the main port of call for information relating to Virtual Patients. As such, it made sense for the 320+ VPs to be openly disseminated 'for free' to the wider community via the website referatory.

Over the next few months (i.e. between now and the end of August 2010), the project team will:

1. Refine and fine tune the existing 320+ VPs to ensure that all content is of the highest quality.
2. Deploy 320+ MedBiquitous VP standard compliant content packages alongside their respective VPs.
3. Add more VPs to the referatory, in addition to the 320 initially proposed.
4. Disseminate the launch of the eViP referatory to the wider community at forthcoming meetings and conferences.