



# Physiological Monitoring Replacement Project Charter

(Hemodynamic and Physiological)

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Exhibit TL4.f



## Project Charter

**Date:** 2013-07-18

**Executive Sponsors:**

Lorna Facticeau, Chief Nursing Officer  
George Rich, MD, Chair of Anesthesiology

**Project Sponsors:**

Scott Croonquist, Associate Chief Nursing Officer  
Donna Via, Administrator, Perioperative Services

**Sponsoring Department:** Clinical Engineering Services

**Project Managers:**

Glenn Fielding (interim), Program Management Office  
Patrick Headley, Clinical Engineering Services

**Project Title:** Physiological Monitoring Replacement

**Current Environment**

Physiological monitoring equipment currently in use at the University of Virginia Health System (UVAHS) was installed starting in 2001, when General Electric (GE) was chosen to replace Marquette Medical Systems. In addition to the advanced age of current physiological monitoring equipment, GE devices deployed in the operative room (OR) are being discontinued by the manufacturer. It is important to note that not all patient care areas are equipped with physiological monitoring devices and that a number of different vendors have equipment in use within the Health System. Philips/Witt equipment is in use in the Cardiac Catheterization and Electrophysiology Labs as well as the Cardiac Transition Unit (CTU). Invivo Corporation's MRI-safe monitors are used in magnetic resonance (MR) environments. GE fixed procedural and patient care monitoring equipment is currently integrated through Aware/CARESCAPE Gateway to Electronic Medical Record systems (EMRs) (both GE-CPA and Epic). Philips procedural monitoring equipment is interfaced to Cath/Heart EMR; however, CTU monitoring equipment is not integrated. Invivo monitoring in the Intraoperative MRI suite (IMRIS) is integrated through Capsule to GE-CPA EMR. Portable procedural location monitoring is not currently fully integrated.

After a careful process of specification development, vendor research, site visits by vendors and delivery of best and final offers (BAFOs), University of Virginia Health System has decided to replace existing monitoring equipment with physiological monitors from Philips Healthcare.



**Revision History**

| <b>Revision</b> | <b>Date</b> | <b>Revised By</b>                 | <b>Changes Made – Reasons for the Change</b>                                 |
|-----------------|-------------|-----------------------------------|--|
| 0.1             | 2013-04-03  | Patrick Headley and Steve Prevost | Initial document creation  |
| 0.2             | 2013-06-06  | Steve Prevost                     | Updated risks section  |
| 0.3             | 2013-07-18  | Glenn Fielding                    | Updated PMO participant and total project costs, responsibilities and dates. |
| 1.0             | 2013-07-18  | Glenn Fielding                    | Title, Requirements clarification; Final for signature                       |



### Project Description

This project will replace all current monitoring equipment with new Philips Healthcare monitoring equipment, inclusive of cardiac hemodynamic monitoring, in order to standardize physiological monitoring across the University of Virginia Health System. Additionally, UVAHS will expand acute care physiological monitoring capability to the 196 beds currently without monitoring equipment. All monitors will be interfaced to existing EMRs via an HL7 interface.

### Project Goals

1. Implement new generation physiological monitoring technology in all procedural and patient care areas within UVAHS
2. Replace applicable networking hardware as needed
3. Standardize physiological monitoring across all platforms to the greatest extent feasible
4. Interface all physiological monitoring equipment with existing EMRs via HL7

### Linkage with UVA Health System Key Strategies

- I Care      Improving patient safety by expanding monitoring capability to all beds
- I Build      Ensuring all monitoring equipment is interfaced to EMRs
- I Heal      Raising the standard of care by implementing new physiological monitoring technology

### Project Timeline

The vendor was selected as of **May 30, 2013**. New monitor implementation will take place over a three-year period beginning in **FY2013 Q3** and ending **FY2016 Q1**.

### Estimated Financial Costs

According to the BAFO provided by the vendor, and incorporating capitalized labor costs and a 15% contingency, the estimated total cost for this project is **\$28,109,294**.

### Requirements

Detailed specifications will be defined during and after the initial kick off meeting with the project team and summarized in a project scope document. The overall effort is inclusive of replacing the current hemodynamic application and monitoring devices within cardiology and replacing and expanding the current GE Unity Network for physiological monitoring throughout University Hospital.

### Assumptions

- Required resources will be available as identified in the project management plan
- All units cooperate with the installation of new monitoring equipment

### Constraints

- There can be no interruptions in patient care during the life of the project
- There must be clear delineation of responsibility between UVA and Philips Healthcare

