



URINE AMINO-ACID TESTS: AN INFORMATION SYSTEM FOR REGISTRATION AND CONSULTATION

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ABSTRACT

This article presents the implementation of an information system to optimize the process of performing amino-acid tests in the urine at the hospitals in Huila, Colombia, in order to improve the organization of the results and access to them. In the implementation, the HL7 standards set were used as a guide to achieve good interoperability and to make the system scalable. Access to test results can be done through any web browser and any device since a responsive web design was used. The information system allows access to the data of patients and it is possible to export information from the database to obtain different statistics. Spring Framework was used to design the information system, which provides a complete programming and configuration model for modern, Java-based enterprise applications on any type of deployment platform.

Keywords: information system, amino-acids profile, web services, HL7-FHIR, spring framework.

INTRODUCTION

The advancement of clinical biochemistry has allowed a better understanding of pathological processes, increase accuracy in diagnosis, arouse interest in physicians in so-called congenital diseases of metabolism and expand knowledge about diseases that affect metabolism by amino acids. These diseases have the characteristic of being hereditary as a consequence of genetic mutation of chromosomes responsible for enzymes of the metabolism, which determines a partial or total enzymatic deficit, causing the alteration of a metabolic pathway with the consequent accumulation of a metabolite. They usually manifest themselves in early childhood due to a severe condition, in which diagnosis is difficult if specific biochemical tests are not available. In those patients who have not been diagnosed and treated in a timely manner, death (classic form of the disease maple syrup in urine) or mental retardation (phenylketonuria), occur frequently.

The most appropriate diagnostic procedure for treating a metabolic disorder is the determination of enzyme activity deficiency. This usually requires complex and costly techniques. In terms of congenital errors of amino acid metabolism, diagnostic techniques have initially been based on qualitative tests for urine. These are designed to determine the abnormal concentration of a metabolite. However, these tests are not specific, being only able to determine excessive eliminations of some amino acids. A positive result necessarily requires deeper biochemical research to separate, identify and quantify the metabolite excreted abnormally [1-4].

This article presents the design and implementation of an information system for the registration, organization and analysis of the results of amino-acid profile in urine tests in Huila hospitals. The main objective of the work is to create a healthcare information system – HIS, which allows register the laboratories' staff, physicians and patients and allows also register, consult and authorize the exams of amino-acid.

The data can be entered through the Hospital's local area network, as well as from any remote computer or device (Smart phone or Tablet) connected to the Internet. The designed HIS follows the guidelines of the HL7-FHIR standard, the most widely worldwide distributed, ensuring easy interoperability with almost any other hospital information system. According to the World Health Organization - WHO, if better information is available, better decisions will be made and the population will be able to have better health; this is what justifies the need for more robust HISs for hospitals in Huila.

As information systems evolved, information systems were available that could present reports related to the health of each patient, statistics on the data obtained in the examinations performed, as well as medicines and treatments formulated by physicians. Examples of these systems are the Care2x (Open Source Hospital Information System), first published in 2002 by Elpidio Latorilla and the Mexican Government's Information System for Hospital Management (SIGHO), which began only in 2005 [5-6]. In the Department of Huila this technology is just beginning to be implemented; therefore, this work can be considered as an initial contribution in the area.

METHODOLOGY

General design of the platform

For development of the Information System the model described in Figure-1 is proposed, in which MySQL is used to store the data, a web server to control the platform and the web clients requesting a connection. Web clients can request the server to send pages from any device with internet connection; these devices can be desktop computers, laptops, tablets or smartphones.

In the stages of the project development process, the database was first designed taking into account the variables and records necessary for the correct functioning of the system. Then the control and the service of the web



pages were defined through the server along with its visual design. The system follows the HL7-FHIR standard for sending medical information, so tools like Mirth Connet can access the information using their standard-based connection protocols [7].

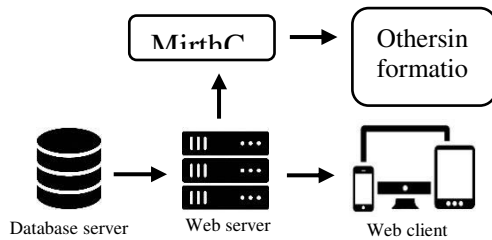


Figure-1. Information system architecture.

HL7-FHIR standard

HL7-FHIR (Health Level 7 - Fast Healthcare Interoperability Resources) is a standard that describes "resources", data formats, and electronic health records exchange (EHR) elements. The standard was created by the international health standards organization HL7. One of HL7-FHIR's objectives is to facilitate interoperability between different health care systems, so that be easy to provide healthcare information to healthcare providers and individuals through a wide variety of devices, from computers to tablets and cell phones; enabling third-party application developers to develop medical applications that can be easily integrated with existing information systems. HL7-FHIR is relatively easy to deploy, because it uses a modern web-based technology suite, including REST ful, HTML and Cascading Style Sheets (CSS) for UI integration. For data representation JSON or XML can be used and for authorization OAuth can be used [8].

In this paper, JSON was chosen for data representation, which means interoperability with other information systems using the same technology for exchanging EHRs will be simple and guaranteed. However, interoperability with information systems that use a different technology to represent data, such as XML or others can be achieved through a management tool for integration of multiple health information systems, such as Mirth Connect [8]. It should be noted that this paper is part of a more ambitious project for the Department of Huila, which seeks to systematize the entire health system, so that interoperability between different health information systems must be guaranteed.

Database server

MySQL is the most popular open source database in the world, making it a reliable and secure option [9]. In addition, it has features such as high scalability, easy operation, high performance among others, making it the ideal choice for the information system needs.

In the project some tables were defined to store information about the users, the status of each session and the information corresponding to the defined amino-acid profile in urine tests. In Figure-2 the described database

diagram can be visualized. For the tables of patients, staff and exams, the fields are constructed using the JSON format as defined in the HL7 standard.

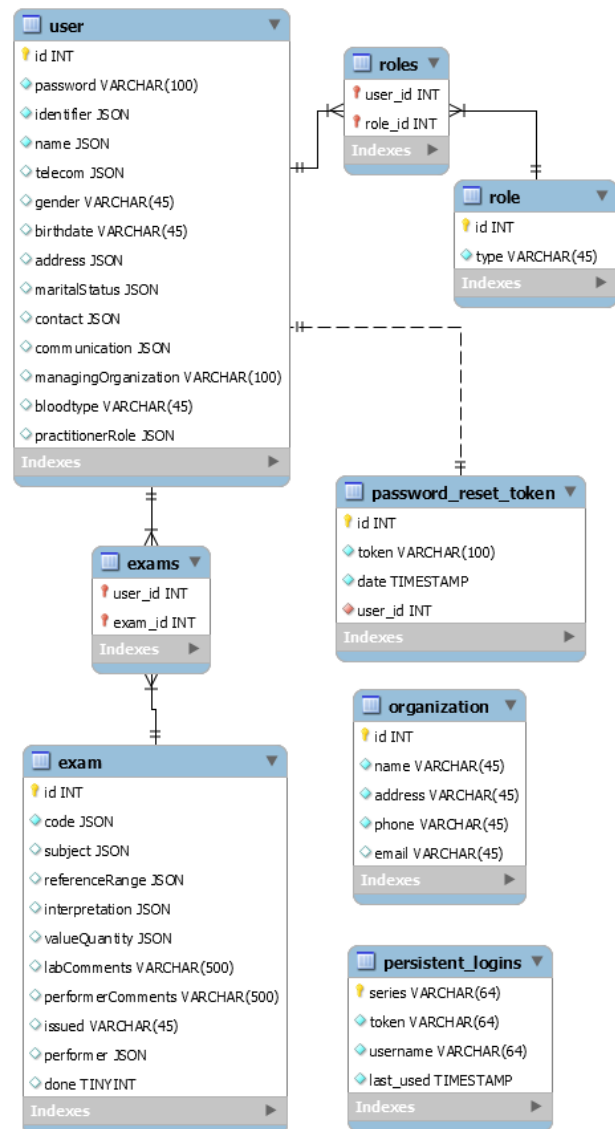


Figure-2. Database tables.

The following is a description of each table:

User: This table stores the information corresponding to the users of the platform. It defines the following fields:

- **Id:** INT field, which identifies the record.
- **password:** String field containing the encrypted user password.
- **Identifier:** JSON field that stores the user identifier according to the HL7 standard.
- **Name:** JSON field that stores the user name according to the HL7 standard.
- **Telecom:** JSON field that stores contact information.
- **Gender:** String field that stores the gender.
- **Birthdate:** String field that stores the date of birth.



- **Address:** JSON field storing address.
- **Marital Status:** JSON field that stores the marital status.
- **Contact:** JSON field that stores the information of a contact to go to.
- **Communication:** JSON field that defines the language of interpretation of information.
- **Managing Organization:** String field that stores health entity.
- **Bloodtype:** String field that stores blood type.
- **Practitioner Role:** JSON field that stores according to the standard HL7 the charge of a user of medical personnel.
- **Entitylab:** String field that stores the entity that provides the services for the laboratory.

roles: Table with many to many relationship between the user table and the role table, which stores user roles. In this the following fields are defined:

- **User_id:** INT field containing the id of the user table.
- **Role_id:** INT field containing the id of the role table.

role: This table contains the user roles of the platform. The user roles in the platform are shown below:

- **ADMIN:** role for the administrator.
- **PATIENT:** role for the patient.
- **STAFF:** role for staff.
- **LAB:** role for the laboratory.

In the role table the following fields are defined:

- **id:** INT field containing the role id.
- **type:** String field containing the user role.

exams: This table with many to many relationship between the user table and the exam table contains the user's exams. It defines the following fields:

- **user_id:** INT field containing the id of the user table.
- **exam_id:** INT field containing the id of the exam table.

exam: This table stores the information corresponding to the amino acid exams in urine. For each record in this table the following fields are defined:

- **id:** INT field that identifies the record.
- **code:** JSON field that stores the type of examination of the amino acid profile in urine.
- **subject:** JSON field that stores patient information according to the HL7 standard.
- **Reference range:** JSON field that stores the reference range of the variable to be measured according to the HL7 standard.
- **interpretation:** JSON field that stores according to the HL7 standard the interpretation of the value taken from the variable to be measured.
- **Value quantity:** JSON field that stores according to the HL7 standard the value taken from the variable to be measured.
- **labComments:** String field that stores the lab's comments about the exam.

- **performer Comments:** String field that stores the doctor's comments about the exam.
- **issued:** String field that stores the date and time of the exam.
- **performer:** JSON field that stores according to the HL7 standard the user of the medical personnel requesting the examination.
- **done:** Boolean field that stores 1 if the test was performed.

organization: This table stores information about the service provider. For this table the following fields are defined:

- **id:** INT field that identifies the record.
- **name:** String field that stores the name of the entity.
- **address:** String field that stores the physical location of the entity.
- **phone:** String field that stores the phone of the entity.
- **email:** String field that stores the email of the entity.

persisten_logins: This table stores the sessions that are remembered in the browser. For the records in this table the following fields are defined:

- **series:** Identifier of the record.
- **token:** String field that stores a token or session key.
- **username:** String field that identifies the user for the login.
- **last_used:** TIMESTAMP field that stores the date and time of the last recorded session.

Web platform

The web platform allows users to perform operations for the management of registered information and to record new information in the system. There are four types of users, which are defined below:

- **Administrator:** It is registered through the web page. Its function is registering, modifying or eliminating the other users of the platform.
- **Personal:** cans view his/her basic information and modify his/her data. In addition, has access to patient data, to authorize exams and to review exam history.
- **Patient:** cans view his/her personal information and modify his/her data. The platform allows consulting the history of exams that were practiced to him.
- **Lab-operator:** cans view his/her personal information; modify his/her data and those of the entity that provides the services of laboratories. The platform allows record test results when authorized.

Figure-3 shows the start page, in which the user manual it can be consulted and log on to the system. The platform has support in English and Spanish. Figure-4 shows the view for the login in the platform.

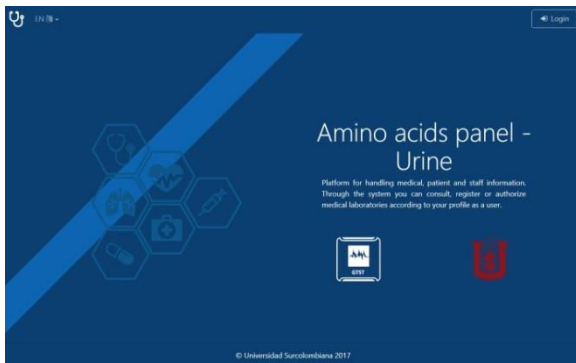


Figure-3. Web platform home.

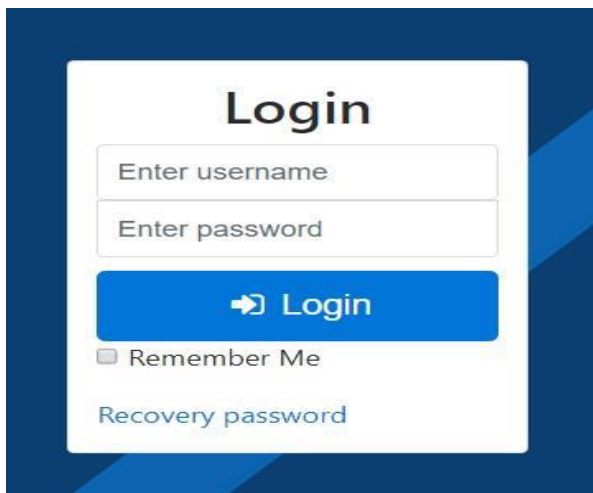


Figure-4. Web platform login.

Users can access with their personal identification number and password. The platform can remember the user session and recover the password if the user does not remember it. Figure-5 shows the start page when the user login.

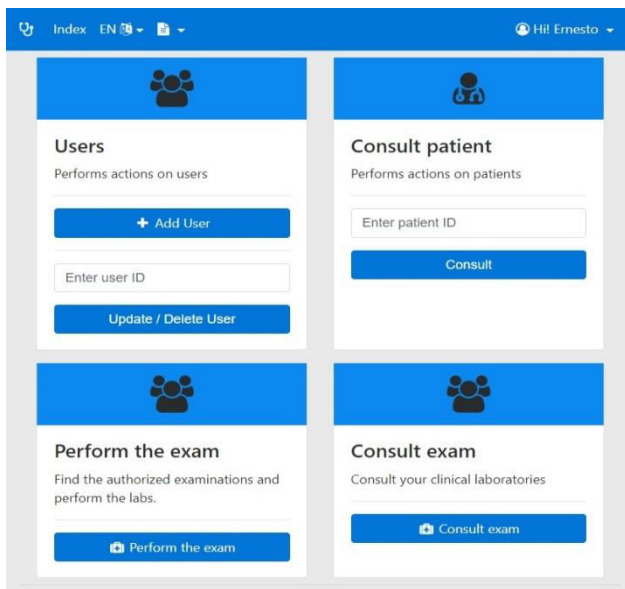


Figure-5. User's starting view.

Figure-6 shows the information that is stored related to the user. The ID number and user roles can only be updated by the administrator; other data can be updated from the platform by the user himself.

New user

Hi! Please record user information.

Personal information

Identification type:

Identification number:

First name:

Last name:

Email:

General information

Birthdate:

Gender:

Blood type:

Marital status:

Managing Organization:

Contact information

Relationship:

First name:

Last name:

Contact phone:

Location data

Home phone:

Mobile phone:

Work phone:

Address:

City:

Session information

Password:

Confirm Password:

User roles:

Profession

Practitioner role:

Add

Figure-6. User form.



Personal information

Identification type: 2222
Name: LORENA CLAROS
Email: lorenacarlos@example.com
Age: 50 years

General information

Birthdate: 1967-07-01
Gender: Male
Marital status: Unmarried
Blood type: A+
Managing Organization: entidad

Contact information

Relationship: Next-of-Kin
Contact name: LILIANAMARTINEZ
Contact phone: 85236

Location data

Home phone:
Work phone:
Mobile phone: 31125
Address: CALLE 96
City: Distrito Capital

what you want to do?

Update user

Delete user

Authorize exam

Authorize examination

Select

Add

Exams

Show 10 entries

Search:

Order	Laboratory	Date	Action	Realized
5	Tyrosine/u200BCreatinine [Ratio] in Urine	2017-07-25		See
2	Asparagine/u200BCreatinine [Ratio] in Urine	--		No
1	Beta alanine/u200BCreatinine [Ratio] in Urine	--		No

Showing 1 to 3 of 3 entries

Previous

1

Next

Figure-7. General user information form.

Figure-7 shows the presentation form for the general user information

Tests performed by the laboratory can be quantitative if a variable is measured or descriptive if only

the presence of the compound in the sample needs to be determined. Figure-8 and Figure-9 shows the quantitative and descriptive tests form respectively.



Figure-8. Quantitative tests form.

Figure-9. Descriptive tests form.

Developments technologies

Tools with free software license were used for the development of the web project.

- Project developed using Spring Framework
- Spring Tool Suite - version 3.8.4
- Build Id: 201703310825
- Java: 1.8.0_121

- Database

MySQL Workbench 6.3.8 build 1228 CE (64-bit)
Community
Database port for MySQL: 3306

- Application server
- Apache Tomcat 8.5.14

Programming languages

HTML, CSS and JS: For view handling and script functions on the client side. HTML5 organizes parameters for HTML page structure tagging, CSS3 builds the page



appearance for an interesting visual style and JS allows the construction of page functions on the client to avoid loading on the server.

JAVA SPRING: Spring is an enterprise open source framework for application development for the Java platform. With this, it is done the control of pages and development of the services of the application.

In addition, the following tools were used:

1. Bootstrap v4.0.0-alpha.6: This framework facilitates the web design adaptable to different devices through a responsive design.

2. Font-Awesome: This library contains a compiled icon to give a better visual style to the pages.

3. javax.mail version 1.4.7: allows you to send mail messages from the server to the users. It is used to send an email to the user when requesting a password recovery.

4. Gson version 2.6.2: class library for handling JSON messages using java language.

5. Mysql connector version 5.1.39: library for controlling connections to the MySQL database from java.

RESULTS

The system allows patients, physicians, auxiliary staff and lab-operators entering information for platform interoperability. Each user role has different functions according to their profile. First, medical personnel must authorize patient examinations; these authorized examinations are awaited by laboratory operators. While the examination has not been performed, medical personnel may cancel the issued order. When the laboratory performs the examination enters the results and the information is available to be consulted by the staff or patients and thus the process is completed.

The platform allows authorizing 41 different exams of the urine amino-acid test as shown below.

1. Beta alanine/Creatinine [Ratio] in Urine
2. Alanine/Creatinine [Ratio] in Urine
3. Alpha aminoadipate/Creatinine [Ratio] in Urine

4. Amino beta guanidinopropionate/Creatinine [Ratio] in Urine
5. Gamma aminobutyrate/Creatinine [Ratio] in Urine
6. Beta aminoisobutyrate/Creatinine [Ratio] in Urine
7. Alpha aminobutyrate/Creatinine [Ratio] in Urine
8. Anserine/Creatinine [Ratio] in Urine
9. Arginine/Creatinine [Ratio] in Urine
10. Asparagine/Creatinine [Ratio] in Urine
11. Aspartate/Creatinine [Ratio] in Urine
12. Carnosine/Creatinine [Ratio] in Urine
13. Citrulline/Creatinine [Ratio] in Urine
14. Cystathionine/Creatinine [Ratio] in Urine
15. Cystine/Creatinine [Ratio] in Urine
16. Glutamate/Creatinine [Ratio] in Urine
17. Glutamine/Creatinine [Ratio] in Urine
18. Glycine/Creatinine [Ratio] in Urine
19. Histidine/Creatinine [Ratio] in Urine
20. Homocystine/Creatinine [Ratio] in Urine
21. Hydroxylysine/Creatinine [Ratio] in Urine
22. Hydroxyproline/Creatinine [Ratio] in Urine
23. Isoleucine/Creatinine [Ratio] in Urine
24. Leucine/Creatinine [Ratio] in Urine
25. Lysine/Creatinine [Ratio] in Urine
26. Methionine/Creatinine [Ratio] in Urine
27. 1-Methylhistidine/Creatinine [Ratio] in Urine
28. 3-Methylhistidine/Creatinine [Ratio] in Urine
29. Ornithine/Creatinine [Ratio] in Urine
30. Phenylalanine/Creatinine [Ratio] in Urine
31. Phosphoethanolamine/Creatinine [Ratio] in Urine
32. Phosphoserine/Creatinine [Ratio] in Urine
33. Proline/Creatinine [Ratio] in Urine
34. Sarcosine/Creatinine [Ratio] in Urine
35. Serine/Creatinine [Ratio] in Urine
36. Taurine/Creatinine [Ratio] in Urine
37. Threonine/Creatinine [Ratio] in Urine
38. Tryptophan/Creatinine [Ratio] in Urine
39. Tyrosine/Creatinine [Ratio] in Urine
40. Valine/Creatinine [Ratio] in Urine
41. Amino acid pattern [Interpretation] in Urine

Data query

Patients and medical staff will be able to see the test results by accessing the patient profile, which will show a table at the bottom of the page with the laboratories performed, as shown in the Figure-10.



Exams

Show 10 entries Search:

Order	Laboratory	Date	Action	Realized
6	Beta alanine/u200BCreatinine [Ratio] in Urine	--		No
5	Tyrosine/u200BCreatinine [Ratio] in Urine	2017-07-25		See
2	Asparagine/u200BCreatinine [Ratio] in Urine	--		No
1	Beta alanine/u200BCreatinine [Ratio] in Urine	--		No

Showing 1 to 4 of 4 entries

Previous **1** Next

Figure-10. Form for accessing to the tests results.

Figure-11 shows a laboratory order performed, detailing the descriptive data of the examination performed. It shows the type of laboratory, the measurement range, the measured value, the unit of

measurement and the comments about the laboratory. For non-quantitative examinations, the lab-operator and specialist comments on the presence of the compound are shown.

Exam information.

Exam: (30054-1) Tyrosine/Creatinine [Ratio] in Urine

Order: 5

Patient: 2222 - LORENA CLAROS

Specialist: Ernesto Claro

Authorized: 2017-07-25

Results

Unit of measurement	measured value	Reference range	Interpretation
umol/g(creat)	25	38 - 145	Low

Specialist comments:

[Add](#)

Figure-11. Results information form.

Connection with other information systems

The information system is enabled to communicate with any other health information system that supports the HL7-FHIR standard and package the data using the JSON standard. This can be easily achieved by establishing channels between this system and any other that meets the above requirement and using Mirth Connect or a similar tool. Systems that pack their data using XML or other technologies can also be supported by making small adaptations.

Project file

The project can be consulted at: https://github.com/albecor/Medical_AminoAcidsUrine; where it can find the following files:

- Database / EERDatabase.mwb: Database model.
- Database / ScriptDatabase.sql: Script file of the database.
- Javadoc /: Contains the project API documentation
- User Manual /: Contains the user manual of the web application.



- Web Application / medical_amino_acids_urine/: Application project file.
- Web Application /medical_amino_acids_urine.war: Application deployment files for the Tomcat server.

CONCLUSIONS

With the information system implemented, it is possible to optimize the communication between the agents involved in the authorization, realization and publication of the examinations for a patient in the Hospitals of Huila. This allows shorter test times and facilitates the work of medical staff to choose treatments that are appropriate to the specific condition of each patient. The use of information technologies should be intensified through the development of projects that solve many of the problems that afflict the Colombian health system. As has been shown, the Surcolombiana University's electronic engineering program can contribute to the development of the city, the department and in general the country.

The information system presented here ensures the integrity and readability of patient information and makes it possible for information to be available anywhere, regardless of the institution providing health services.

The execution of this project is expected to mark the way forward in the department and in the country in terms of the use of computer technologies as an immediate solution to many difficulties of the hospital centers. We hope to generate the basis for future projects that involve a full integration of the different areas of the hospital into robust, effective and reliable hospital information systems.

ACKNOWLEDGEMENTS

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