WEBVTT NOTE duration:"00:16:28.6130000" NOTE language:en-us NOTE Confidence: 0.8881749 $00:00:00.000 \rightarrow 00:00:02.508$ It's my pleasure to introduce Doctor NOTE Confidence: 0.8881749 00:00:02.508 --> 00:00:04.730 Wade Schultz, who is an assistant NOTE Confidence: 0.8881749 00:00:04.730 --> 00:00:06.110 professor of laboratory medicine NOTE Confidence: 0.8881749 $00{:}00{:}06{.}110 \dashrightarrow 00{:}00{:}07{.}804$ and a computational health care NOTE Confidence: 0.8881749 $00:00:07.804 \rightarrow 00:00:10.618$ researcher at Yale School of Medicine. NOTE Confidence: 0.8881749 00:00:10.620 --> 00:00:12.164 He received his pH. NOTE Confidence: 0.8881749 00:00:12.164 --> 00:00:13.708 D in microbiology immunology NOTE Confidence: 0.8881749 $00:00:13.708 \longrightarrow 00:00:15.070$ and cancer biology, NOTE Confidence: 0.8881749 00:00:15.070 - 00:00:17.266 as well as his medical degree NOTE Confidence: 0.8881749 $00:00:17.266 \longrightarrow 00:00:19.510$ from the University of Minnesota. NOTE Confidence: 0.8881749 $00:00:19.510 \longrightarrow 00:00:21.967$ He is the Director of Informatics for NOTE Confidence: 0.8881749 00:00:21.967 --> 00:00:24.360 the Department of Laboratory Medicine, NOTE Confidence: 0.8881749 $00:00:24.360 \longrightarrow 00:00:26.862$ director of the Core Center for NOTE Confidence: 0.8881749 $00:00:26.862 \rightarrow 00:00:28.530$ Computational Health and Medical

- NOTE Confidence: 0.8881749
- 00:00:28.601 --> 00:00:30.815 Director of Data Science for Yale,

00:00:30.820 --> 00:00:31.932 New Haven Health System.

NOTE Confidence: 0.8881749

 $00:00:31.932 \longrightarrow 00:00:33.600$ So thank you so much for

NOTE Confidence: 0.8881749

00:00:33.664 --> 00:00:35.200 joining us Doctor Scholl's.

NOTE Confidence: 0.8309002

 $00{:}00{:}36{.}980 \dashrightarrow 00{:}00{:}38{.}726$ Thank you for the introduction and

NOTE Confidence: 0.8309002

 $00{:}00{:}38.726 \dashrightarrow 00{:}00{:}40.650$ for people who might be on Gallery

NOTE Confidence: 0.8309002

 $00{:}00{:}40.650 \dashrightarrow 00{:}00{:}42.603$ View and zoom if you switch to either

NOTE Confidence: 0.8309002

00:00:42.603 - 00:00:44.458 the speaker view or pin my video,

NOTE Confidence: 0.8309002

 $00{:}00{:}44.460 \dashrightarrow 00{:}00{:}46.280$ that will make it easiest to see

NOTE Confidence: 0.8309002

 $00:00:46.280 \dashrightarrow 00:00:47.660$ the presentation if any issues.

NOTE Confidence: 0.8309002

 $00:00:47.660 \dashrightarrow 00:00:49.796$ Just let me know before I get started.

NOTE Confidence: 0.8309002

00:00:49.800 --> 00:00:51.669 I just really want to acknowledge one.

NOTE Confidence: 0.8309002

00:00:51.670 --> 00:00:53.539 All of the support we've gotten from NOTE Confidence: 0.8309002

 $00:00:53.539 \rightarrow 00:00:55.145$ so many people across the School

NOTE Confidence: 0.8309002

 $00{:}00{:}55{.}145 \dashrightarrow 00{:}00{:}57{.}230$ of Medicine as well as the old New

 $00{:}00{:}57{.}230 \dashrightarrow 00{:}00{:}59{.}134$ Haven Dr Churchwell being one of them

NOTE Confidence: 0.8309002

 $00{:}00{:}59{.}134 \dashrightarrow 00{:}01{:}00{.}844$ along with rich Lisitano and Lisa

NOTE Confidence: 0.8309002

 $00{:}01{:}00{.}844 \dashrightarrow 00{:}01{:}02{.}299$ Stump and the fantastic collaboration

NOTE Confidence: 0.8309002

 $00{:}01{:}02.299 \dashrightarrow 00{:}01{:}04.089$ that we have with Charlie Tori to

NOTE Confidence: 0.8309002

 $00:01:04.089 \dashrightarrow 00:01:05.550$ really make this platform a reality.

NOTE Confidence: 0.8309002

00:01:05.550 --> 00:01:07.503 I do have a couple of potential

NOTE Confidence: 0.8309002

 $00:01:07.503 \longrightarrow 00:01:08.340$ conflicts of interest.

NOTE Confidence: 0.8309002

00:01:08.340 --> 00:01:10.665 Consultant for Hugo Health and

NOTE Confidence: 0.8309002

00:01:10.665 --> 00:01:12.990 a founder for refactor Health.

NOTE Confidence: 0.8309002

 $00:01:12.990 \longrightarrow 00:01:14.680$ To start off the talk,

NOTE Confidence: 0.8309002

00:01:14.680 --> 00:01:16.577 you know I really want to highlight

NOTE Confidence: 0.8309002

 $00:01:16.577 \dashrightarrow 00:01:18.272$ one what is computational health

NOTE Confidence: 0.8309002

 $00{:}01{:}18.272 \dashrightarrow 00{:}01{:}20.738$ research and this is really defined.

NOTE Confidence: 0.8309002

 $00{:}01{:}20.740 \dashrightarrow 00{:}01{:}22.535$ Now is the interdisciplinary application

NOTE Confidence: 0.8309002

 $00{:}01{:}22.535 \dashrightarrow 00{:}01{:}24.726$ of computer science tools to address

NOTE Confidence: 0.8309002

 $00{:}01{:}24.726 \dashrightarrow 00{:}01{:}26.416$ health related questions and problems

- NOTE Confidence: 0.8309002
- $00:01:26.416 \rightarrow 00:01:28.733$ and what this means is really that
- NOTE Confidence: 0.8309002
- 00:01:28.733 > 00:01:30.243 we want to leverage different
- NOTE Confidence: 0.8309002
- $00:01:30.243 \rightarrow 00:01:31.702$ components of technology to really
- NOTE Confidence: 0.8309002
- $00:01:31.702 \dashrightarrow 00:01:33.690$ advance science and what we do with
- NOTE Confidence: 0.8309002
- 00:01:33.746 --> 00:01:35.496 this within the computational health
- NOTE Confidence: 0.8309002
- $00{:}01{:}35{.}496 \dashrightarrow 00{:}01{:}37{.}246$ platform is really leverage high
- NOTE Confidence: 0.8309002
- $00{:}01{:}37{.}302 \dashrightarrow 00{:}01{:}38{.}397$ performance computing capabilities
- NOTE Confidence: 0.8309002
- $00{:}01{:}38{.}397 \dashrightarrow 00{:}01{:}40{.}952$ layer on top of that data acquisition
- NOTE Confidence: 0.8309002
- $00{:}01{:}40.960 \dashrightarrow 00{:}01{:}42.192$ and data modeling strategies,
- NOTE Confidence: 0.8309002
- $00{:}01{:}42.192 \dashrightarrow 00{:}01{:}44.780$ and then begin to build tools applications.
- NOTE Confidence: 0.8309002
- 00:01:44.780 --> 00:01:47.006 An analytic insights on top of it.
- NOTE Confidence: 0.8309002
- 00:01:47.010 --> 00:01:49.117 This system is really aimed to enable
- NOTE Confidence: 0.8309002
- $00:01:49.117 \dashrightarrow 00:01:50.819$ the next generation of healthcare,
- NOTE Confidence: 0.8309002
- $00{:}01{:}50.820 \dashrightarrow 00{:}01{:}52.160$ analytics and integrated insights
- NOTE Confidence: 0.8309002
- $00:01:52.160 \rightarrow 00:01:53.835$ and something that does Doctor
- NOTE Confidence: 0.8309002

 $00:01:53.835 \rightarrow 00:01:55.590$ Church will mention during the time.

NOTE Confidence: 0.8309002

00:01:55.590 --> 00:01:56.196 During Covid,

NOTE Confidence: 0.8309002

 $00{:}01{:}56.196 \dashrightarrow 00{:}01{:}58.014$ we rapidly pivoted to really provide

NOTE Confidence: 0.8309002

 $00:01:58.014 \rightarrow 00:01:59.334$ clinical and operational insights

NOTE Confidence: 0.8309002

 $00:01:59.334 \rightarrow 00:02:01.320$ into how are we treating patients?

NOTE Confidence: 0.8309002

 $00:02:01.320 \rightarrow 00:02:03.072$ What are the outcomes in different

NOTE Confidence: 0.8309002

 $00{:}02{:}03{.}072 \dashrightarrow 00{:}02{:}04{.}632$ populations and to really also

NOTE Confidence: 0.8309002

00:02:04.632 --> 00:02:05.996 accelerate data driven research

NOTE Confidence: 0.8309002

 $00{:}02{:}05{.}996 \dashrightarrow 00{:}02{:}07{.}360$ across the TO2T4 spectrum,

NOTE Confidence: 0.8309002

 $00{:}02{:}07{.}360 \dashrightarrow 00{:}02{:}11{.}064$ which I'll talk about a little bit later.

NOTE Confidence: 0.8309002

 $00:02:11.070 \longrightarrow 00:02:13.046$ The last piece of this is that we

NOTE Confidence: 0.8309002

00:02:13.046 --> 00:02:15.114 really need to integrate large evolving

NOTE Confidence: 0.8309002

 $00{:}02{:}15{.}114 \dashrightarrow 00{:}02{:}17{.}009$ and heterogeneous datasets to really

NOTE Confidence: 0.8309002

 $00:02:17.009 \dashrightarrow 00:02:19.258$ make use of these data moving forward,

NOTE Confidence: 0.8309002

 $00{:}02{:}19{.}260 \dashrightarrow 00{:}02{:}21{.}304$ being able to integrate data from the

NOTE Confidence: 0.8309002

 $00{:}02{:}21{.}304 \dashrightarrow 00{:}02{:}23{.}548$ HR genomic data sources are real time

 $00:02:23.548 \dashrightarrow 00:02:25.504$ sensors and devices across the health

NOTE Confidence: 0.8309002

 $00{:}02{:}25{.}560 \dashrightarrow 00{:}02{:}27{.}765$ systems provides a really rich data set,

NOTE Confidence: 0.8309002

 $00:02:27.770 \longrightarrow 00:02:30.002$ but until we can get those into a

NOTE Confidence: 0.8309002

00:02:30.002 --> 00:02:31.860 single environment where we can link

NOTE Confidence: 0.8309002

 $00{:}02{:}31.860 \dashrightarrow 00{:}02{:}33.415$ patients across the different data

NOTE Confidence: 0.8309002

 $00{:}02{:}33{.}415 \dashrightarrow 00{:}02{:}35{.}499$ silos and make that available to

NOTE Confidence: 0.8309002

 $00:02:35.499 \rightarrow 00:02:37.214$ investigators limits the potential up

NOTE Confidence: 0.8309002

 $00:02:37.220 \rightarrow 00:02:40.524$ until we have the back capacity available.

NOTE Confidence: 0.8309002

 $00:02:40.530 \longrightarrow 00:02:42.378$ The primary goals of this or that

NOTE Confidence: 0.8309002

 $00:02:42.378 \longrightarrow 00:02:44.437$ you know one when we started this,

NOTE Confidence: 0.8309002

 $00:02:44.440 \longrightarrow 00:02:45.982$ we were really trying to drive

NOTE Confidence: 0.8309002

 $00{:}02{:}45{.}982 \dashrightarrow 00{:}02{:}47{.}510$ that multi modal data analysis.

NOTE Confidence: 0.8309002

 $00:02:47.510 \dashrightarrow 00:02:49.178$ How can we integrate the clinical,

NOTE Confidence: 0.8309002

 $00{:}02{:}49{.}180 \dashrightarrow 00{:}02{:}51{.}268$ the EHR with genomics or radiology

NOTE Confidence: 0.8309002

 $00:02:51.268 \rightarrow 00:02:52.660$ data and so on?

00:02:52.660 - 00:02:54.445 We wanted to also make sure that NOTE Confidence: 0.8309002 $00{:}02{:}54.445 \dashrightarrow 00{:}02{:}56.026$ we have the capacity available NOTE Confidence: 0.8309002 00:02:56.026 --> 00:02:58.288 to allow for AI driven analytics, NOTE Confidence: 0.8309002 $00:02:58.290 \rightarrow 00:03:00.618$ so making sure that we have the newest NOTE Confidence: 0.8309002 $00:03:00.618 \rightarrow 00:03:01.837$ computing technology available both NOTE Confidence: 0.8309002 $00:03:01.837 \rightarrow 00:03:03.583$ from the resources GPU's to really NOTE Confidence: 0.8309002 $00:03:03.583 \longrightarrow 00:03:05.256$ make sure that our investigators NOTE Confidence: 0.8309002 $00:03:05.256 \rightarrow 00:03:06.981$ could leverage and accelerate the NOTE Confidence: 0.8309002 $00{:}03{:}06{.}981 \dashrightarrow 00{:}03{:}08{.}636$ research that they wanted to do, NOTE Confidence: 0.8309002 $00:03:08.636 \longrightarrow 00:03:10.513$ as well as with some focus on NOTE Confidence: 0.8309002 $00:03:10.513 \rightarrow 00:03:11.680$ precision medicine initiatives NOTE Confidence: 0.8309002 $00:03:11.680 \rightarrow 00:03:13.625$ such as the generations project, NOTE Confidence: 0.8309002 $00:03:13.630 \longrightarrow 00:03:15.358$ along with all of that we've NOTE Confidence: 0.8309002 $00:03:15.358 \rightarrow 00:03:16.510$ been trying to integrate NOTE Confidence: 0.8653239 $00:03:16.566 \rightarrow 00:03:18.426$ real time Insights so that with NOTE Confidence: 0.8653239 $00:03:18.426 \rightarrow 00:03:20.068$ some of our collaborators say

- NOTE Confidence: 0.8653239
- $00:03:20.068 \rightarrow 00:03:21.460$ in the emergency Department,

 $00:03:21.460 \longrightarrow 00:03:23.120$ making sure that we can.

NOTE Confidence: 0.8653239

 $00{:}03{:}23{.}120 \dashrightarrow 00{:}03{:}24{.}702$ Access data in real time because if

NOTE Confidence: 0.8653239

 $00:03:24.702 \rightarrow 00:03:26.570$ you start to build predictive models,

NOTE Confidence: 0.8653239

00:03:26.570 - 00:03:27.890 say for something like sepsis,

NOTE Confidence: 0.8653239

 $00{:}03{:}27{.}890 \dashrightarrow 00{:}03{:}30{.}818$ it's not useful if you don't can't deliver

NOTE Confidence: 0.8653239

 $00:03:30.818 \rightarrow 00:03:33.967$ that until a day after observations are made.

NOTE Confidence: 0.8653239

00:03:33.970 --> 00:03:35.884 Anthem is noting early on, you know,

NOTE Confidence: 0.8653239

 $00{:}03{:}35{.}884 \dashrightarrow 00{:}03{:}37{.}860$ there's a few different areas that we work

NOTE Confidence: 0.8653239

 $00{:}03{:}37{.}912 \dashrightarrow 00{:}03{:}39{.}910$ on with the computational health platform.

NOTE Confidence: 0.8653239

 $00{:}03{:}39{.}910 \dashrightarrow 00{:}03{:}41{.}758$ One of them is the infrastructure and

NOTE Confidence: 0.8653239

 $00{:}03{:}41.758 \dashrightarrow 00{:}03{:}43.723$ what we've been developing out in our

NOTE Confidence: 0.8653239

 $00{:}03{:}43.723 \dashrightarrow 00{:}03{:}45.397$ newest version of this platform is

NOTE Confidence: 0.8653239

 $00:03:45.453 \rightarrow 00:03:47.511$ making sure that we have a composable NOTE Confidence: 0.8653239

00:03:47.511 --> 00:03:49.356 architecture that can allow us to scale

 $00{:}03{:}49{.}356 \dashrightarrow 00{:}03{:}51{.}508$ both our compute as well as our storage

NOTE Confidence: 0.8653239

 $00{:}03{:}51{.}508 \dashrightarrow 00{:}03{:}53{.}500$ as we move between different datasets.

NOTE Confidence: 0.8653239

00:03:53.500 --> 00:03:54.552 Initially, as I noted,

NOTE Confidence: 0.8653239

 $00:03:54.552 \dashrightarrow 00:03:56.130$ you know we're really focused on

NOTE Confidence: 0.8653239

 $00{:}03{:}56{.}179 \dashrightarrow 00{:}03{:}57{.}841$ how can we support generations and

NOTE Confidence: 0.8653239

00:03:57.841 --> 00:03:59.720 genomic data with covid that's changed. NOTE Confidence: 0.8653239

 $00:03:59.720 \longrightarrow 00:04:01.498$ How can we really accelerate our access

NOTE Confidence: 0.8653239

 $00:04:01.498 \longrightarrow 00:04:03.690$ to real time datasets and moving forward?

NOTE Confidence: 0.8653239

 $00{:}04{:}03.690 \dashrightarrow 00{:}04{:}06.122$ We really need to be able to scale

NOTE Confidence: 0.8653239

 $00{:}04{:}06{.}122 \dashrightarrow 00{:}04{:}07{.}769$ that independently as new use cases.

NOTE Confidence: 0.8653239

 $00{:}04{:}07{.}770 \dashrightarrow 00{:}04{:}09{.}630$ And new datasets come online within

NOTE Confidence: 0.8653239

 $00{:}04{:}09{.}630 \dashrightarrow 00{:}04{:}11{.}736$ the health system from a data

NOTE Confidence: 0.8653239

00:04:11.736 --> 00:04:12.540 management perspective,

NOTE Confidence: 0.8653239

 $00:04:12.540 \longrightarrow 00:04:14.927$ we really have this need to again,

NOTE Confidence: 0.8653239

00:04:14.930 --> 00:04:16.976 not only capture E HR data,

NOTE Confidence: 0.8653239

 $00:04:16.980 \longrightarrow 00:04:19.367$ but how can we get data from

- NOTE Confidence: 0.8653239
- 00:04:19.367 --> 00:04:20.390 different multimodal datasets,

00:04:20.390 --> 00:04:21.750 including our clinical imaging

NOTE Confidence: 0.8653239

 $00:04:21.750 \longrightarrow 00:04:22.770$ datasets and genetics,

NOTE Confidence: 0.8653239

 $00{:}04{:}22.770 \dashrightarrow 00{:}04{:}25.082$ and get that into a data model that

NOTE Confidence: 0.8653239

 $00{:}04{:}25{.}082 \dashrightarrow 00{:}04{:}27{.}291$ can really be understood by analysts

NOTE Confidence: 0.8653239

 $00:04:27.291 \dashrightarrow 00:04:29.246$ with a variety of backgrounds.

NOTE Confidence: 0.8653239

 $00:04:29.250 \longrightarrow 00:04:31.706$ For those of you who are a little

NOTE Confidence: 0.8653239

 $00{:}04{:}31.706 \dashrightarrow 00{:}04{:}33.885$ more familiar with our data models

NOTE Confidence: 0.8653239

 $00:04:33.885 \longrightarrow 00:04:35.385$ within the health system,

NOTE Confidence: 0.8653239

 $00:04:35.390 \longrightarrow 00:04:37.145$ our main data repository or

NOTE Confidence: 0.8653239

 $00:04:37.145 \longrightarrow 00:04:38.198$ data warehouse is.

NOTE Confidence: 0.8653239

 $00{:}04{:}38{.}200 \dashrightarrow 00{:}04{:}39{.}428$ Clarity that has somewhere

NOTE Confidence: 0.8653239

 $00{:}04{:}39{.}428 \dashrightarrow 00{:}04{:}40{.}349$ around 22,000 tables.

NOTE Confidence: 0.8653239

 $00{:}04{:}40{.}350 \dashrightarrow 00{:}04{:}42{.}430$ It takes a lot of time and experience

NOTE Confidence: 0.8653239

 $00:04:42.430 \rightarrow 00:04:44.339$ to really become comfortable with.

 $00{:}04{:}44{.}340 \dashrightarrow 00{:}04{:}46{.}258$ How do you even extract data from NOTE Confidence: 0.8653239 $00{:}04{:}46.258 \dashrightarrow 00{:}04{:}48.092$ that database and what we're moving NOTE Confidence: 0.8653239 $00{:}04{:}48.092 \dashrightarrow 00{:}04{:}49.994$ into our some more simplified data NOTE Confidence: 0.8653239 $00:04:49.994 \rightarrow 00:04:51.957$ models that align with many national NOTE Confidence: 0.8653239 $00{:}04{:}51{.}957 \dashrightarrow 00{:}04{:}53{.}856$ initiatives to make that much lower NOTE Confidence: 0.8653239 $00:04:53.856 \rightarrow 00:04:55.386$ barrier and burden for investigators. NOTE Confidence: 0.8653239 $00:04:55.390 \longrightarrow 00:04:57.540$ With some of these clinical NOTE Confidence: 0.8653239 $00{:}04{:}57{.}540 \dashrightarrow 00{:}04{:}58{.}830$ common data models. NOTE Confidence: 0.8653239 $00:04:58.830 \rightarrow 00:05:00.524$ And then finally making sure that again NOTE Confidence: 0.8653239 $00:05:00.524 \rightarrow 00:05:02.582$ we have that analysis capacity to one NOTE Confidence: 0.8653239 00:05:02.582 --> 00:05:04.508 support the hardware and infrastructure, NOTE Confidence: 0.8653239 $00:05:04.510 \rightarrow 00:05:07.230$ but also the tools and libraries on top NOTE Confidence: 0.8653239 $00:05:07.230 \rightarrow 00:05:10.637$ of it that individuals might need to use. NOTE Confidence: 0.8653239 $00:05:10.640 \rightarrow 00:05:12.368$ The data sources that we acquire NOTE Confidence: 0.8653239 00:05:12.368 --> 00:05:13.520 from are quite diverse, NOTE Confidence: 0.8653239 $00:05:13.520 \longrightarrow 00:05:15.816$ so we do get data from the HR.

- NOTE Confidence: 0.8653239
- $00:05:15.820 \longrightarrow 00:05:17.548$ Some of that directly from the
- NOTE Confidence: 0.8653239
- 00:05:17.548 --> 00:05:18.412 main HR database,
- NOTE Confidence: 0.8653239
- $00:05:18.420 \longrightarrow 00:05:20.214$ as well as the data warehouses
- NOTE Confidence: 0.8653239
- $00:05:20.214 \longrightarrow 00:05:22.447$ that are on the back end of it.
- NOTE Confidence: 0.8653239
- 00:05:22.450 --> 00:05:23.910 Digital pathology is something that
- NOTE Confidence: 0.8653239
- $00{:}05{:}23{.}910 \dashrightarrow 00{:}05{:}25{.}982$ we are looking forward to as we
- NOTE Confidence: 0.8653239
- $00{:}05{:}25{.}982 \dashrightarrow 00{:}05{:}27{.}372$ bring that hopefully online within
- NOTE Confidence: 0.8653239
- $00{:}05{:}27{.}372 \dashrightarrow 00{:}05{:}28{.}824$ the health system digital image
- NOTE Confidence: 0.8653239
- $00:05:28.824 \rightarrow 00:05:30.522$ and we are fully integrated with
- NOTE Confidence: 0.8653239
- $00{:}05{:}30{.}522 \dashrightarrow 00{:}05{:}31{.}951$ our clinical imaging platform so
- NOTE Confidence: 0.8653239
- $00{:}05{:}31{.}951 \dashrightarrow 00{:}05{:}33{.}673$ we can acquire chest X Rays.
- NOTE Confidence: 0.8653239
- $00{:}05{:}33{.}680 \dashrightarrow 00{:}05{:}34{.}170$ CT scans,
- NOTE Confidence: 0.8653239
- $00{:}05{:}34.170 \dashrightarrow 00{:}05{:}36.130$ Mr is and so on and then are physiologic
- NOTE Confidence: 0.8653239
- 00:05:36.188 --> 00:05:38.253 monitoring data which come from all of
- NOTE Confidence: 0.8653239
- $00:05:38.253 \rightarrow 00:05:40.298$ our attached sensors across the enterprise,
- NOTE Confidence: 0.8653239

- $00:05:40.300 \longrightarrow 00:05:40.968$ so are.
- NOTE Confidence: 0.8653239
- 00:05:40.968 --> 00:05:41.970 EKG's pulse oximetry.
- NOTE Confidence: 0.8653239
- $00:05:41.970 \longrightarrow 00:05:43.914$ All of that streams in real
- NOTE Confidence: 0.8653239
- $00:05:43.914 \dashrightarrow 00:05:45.789$ time into this platform as well.
- NOTE Confidence: 0.8653239
- $00{:}05{:}45{.}790 \dashrightarrow 00{:}05{:}46{.}774$ Genetics and molecular.
- NOTE Confidence: 0.8653239
- $00{:}05{:}46.774 \dashrightarrow 00{:}05{:}48.414$ We've been acquiring for some
- NOTE Confidence: 0.8653239
- $00:05:48.414 \rightarrow 00:05:50.240$ time now on the semantic side,
- NOTE Confidence: 0.8653239
- $00:05:50.240 \longrightarrow 00:05:52.196$ so for oncology for both our
- NOTE Confidence: 0.8653239
- $00{:}05{:}52{.}196 \dashrightarrow 00{:}05{:}53{.}500$ hematologic malignancy and solid
- NOTE Confidence: 0.81305254
- $00{:}05{:}53{.}563 \dashrightarrow 00{:}05{:}55{.}489$ tumor panels and with the generations
- NOTE Confidence: 0.81305254
- $00:05:55.489 \rightarrow 00:05:57.714$ project with both Mike and now having NOTE Confidence: 0.81305254
- $00{:}05{:}57{.}714 \dashrightarrow 00{:}05{:}59{.}478$ our onboard starting to move in
- NOTE Confidence: 0.81305254
- $00:05:59.478 \dashrightarrow 00:06:01.156$ germline sequencing results as well.
- NOTE Confidence: 0.81305254
- $00:06:01.156 \longrightarrow 00:06:02.876$ Digital and Home Health is
- NOTE Confidence: 0.81305254
- 00:06:02.876 --> 00:06:04.708 something that is again need a
- NOTE Confidence: 0.81305254
- 00:06:04.708 --> 00:06:06.133 little bit more forward looking.

- NOTE Confidence: 0.81305254
- $00:06:06.140 \rightarrow 00:06:08.415$ We do have some ways of acquiring

 $00{:}06{:}08{.}415 \dashrightarrow 00{:}06{:}10{.}781$ that within the EHR and are continuing

NOTE Confidence: 0.81305254

 $00{:}06{:}10.781 \dashrightarrow 00{:}06{:}13.293$ to look at how we integrate and

NOTE Confidence: 0.81305254

 $00:06:13.293 \rightarrow 00:06:15.558$ expand those datasets moving forward.

NOTE Confidence: 0.81305254

 $00:06:15.560 \longrightarrow 00:06:17.432$ For people who haven't heard it

NOTE Confidence: 0.81305254

 $00{:}06{:}17.432 \dashrightarrow 00{:}06{:}18.680$ talk about the computational

NOTE Confidence: 0.81305254

 $00:06:18.740 \longrightarrow 00:06:20.200$ health platform in the past,

NOTE Confidence: 0.81305254

 $00:06:20.200 \rightarrow 00:06:22.664$ this might be a figure that you've seen.

NOTE Confidence: 0.81305254

 $00:06:22.670 \longrightarrow 00:06:24.270$ Really, what this is demonstrating

NOTE Confidence: 0.81305254

 $00:06:24.270 \longrightarrow 00:06:25.870$ is the different layers that

NOTE Confidence: 0.81305254

 $00{:}06{:}25{.}929 \dashrightarrow 00{:}06{:}27{.}609$ we've really put into the system.

NOTE Confidence: 0.81305254

 $00:06:27.610 \rightarrow 00:06:30.074$ On the bottom are data ingestion and storage,

NOTE Confidence: 0.81305254

 $00:06:30.080 \rightarrow 00:06:32.229$ which we are now migrating to our

NOTE Confidence: 0.81305254

 $00{:}06{:}32.229 \dashrightarrow 00{:}06{:}34.362$ newest version to allow us a little

NOTE Confidence: 0.81305254

 $00:06:34.362 \rightarrow 00:06:36.479$ bit more elasticity as well as more

 $00:06:36.479 \longrightarrow 00:06:38.712$ efficiency and how we can scale and

NOTE Confidence: 0.81305254

 $00{:}06{:}38.712 \dashrightarrow 00{:}06{:}40.590$ acquire both storage and compute resources.

NOTE Confidence: 0.81305254

 $00:06:40.590 \longrightarrow 00:06:42.164$ Key to this, you know,

NOTE Confidence: 0.81305254

 $00:06:42.164 \rightarrow 00:06:43.774$ really working those for investigators

NOTE Confidence: 0.81305254

 $00{:}06{:}43.774 \dashrightarrow 00{:}06{:}46.063$ is how we integrate those data and

NOTE Confidence: 0.81305254

 $00:06:46.063 \dashrightarrow 00:06:48.190$ can layer different tools on top of.

NOTE Confidence: 0.81305254

 $00:06:48.190 \rightarrow 00:06:50.406$ The platform that we are building one of

NOTE Confidence: 0.81305254

 $00:06:50.406 \rightarrow 00:06:52.948$ those is a so much comap common data model,

NOTE Confidence: 0.81305254

 $00{:}06{:}52{.}950 \dashrightarrow 00{:}06{:}54{.}546$ which I'll talk about a little

NOTE Confidence: 0.81305254

 $00:06:54.546 \rightarrow 00:06:56.309$ bit more on the next slide,

NOTE Confidence: 0.81305254

 $00{:}06{:}56{.}310 \dashrightarrow 00{:}06{:}58{.}095$ as well as some tooling that we're

NOTE Confidence: 0.81305254

 $00{:}06{:}58.095 \dashrightarrow 00{:}07{:}00.212$ starting to build to be able to more

NOTE Confidence: 0.81305254

 $00{:}07{:}00{.}212 \dashrightarrow 00{:}07{:}01{.}892$ efficiently extract data and build what

NOTE Confidence: 0.81305254

 $00:07:01.892 \rightarrow 00:07:03.866$ we call computed or computable phenotypes.

NOTE Confidence: 0.81305254

 $00{:}07{:}03.870 \dashrightarrow 00{:}07{:}05.466$ So one challenge with real world

NOTE Confidence: 0.81305254

 $00{:}07{:}05{.}466 \dashrightarrow 00{:}07{:}07{.}741$ and EHR data is how do we even

 $00:07:07.741 \longrightarrow 00:07:09.186$ identify patients to begin with?

NOTE Confidence: 0.81305254

 $00{:}07{:}09{.}190 \dashrightarrow 00{:}07{:}10{.}702$ Often this is done in research

NOTE Confidence: 0.81305254

 $00:07:10.702 \rightarrow 00:07:12.549$ studies based off of diagnostic code,

NOTE Confidence: 0.81305254

00:07:12.550 --> 00:07:14.209 but research by our group and others

NOTE Confidence: 0.81305254

 $00{:}07{:}14.209 \dashrightarrow 00{:}07{:}16.127$ you know it has really shown that

NOTE Confidence: 0.81305254

00:07:16.127 --> 00:07:17.562 diagnostic codes alone are often

NOTE Confidence: 0.81305254

 $00:07:17.562 \rightarrow 00:07:19.387$ not sufficient to really identify.

NOTE Confidence: 0.81305254

 $00{:}07{:}19{.}390 \dashrightarrow 00{:}07{:}22{.}006$ The breadth and complexity of clinical

NOTE Confidence: 0.81305254

00:07:22.006 --> 00:07:24.120 diagnosis within the electronic health

NOTE Confidence: 0.81305254

 $00{:}07{:}24.120 \dashrightarrow 00{:}07{:}26.560$ record and I can give the use case

NOTE Confidence: 0.81305254

 $00{:}07{:}26.560 \dashrightarrow 00{:}07{:}29.043$ example on covid for that in a little bit.

NOTE Confidence: 0.81305254

 $00{:}07{:}29.050$ --> $00{:}07{:}31.346$ We are also layering on from software to NOTE Confidence: 0.81305254

 $00{:}07{:}31{.}346$ --> $00{:}07{:}33{.}871$ try to integrate some of our biobanking NOTE Confidence: 0.81305254

 $00:07:33.871 \longrightarrow 00:07:36.177$ capacity both from a physical and

NOTE Confidence: 0.81305254

 $00{:}07{:}36.177 \dashrightarrow 00{:}07{:}37.917$ infrastructure capacity as well as

00:07:37.917 --> 00:07:39.992 from a tooling and informatics capacity.

NOTE Confidence: 0.81305254

 $00{:}07{:}39{.}992 \dashrightarrow 00{:}07{:}41{.}356$ On top of that,

NOTE Confidence: 0.81305254

00:07:41.360 --> 00:07:44.318 use leveraging tool called Freezer Works. NOTE Confidence: 0.81305254

 $00{:}07{:}44.320 \dashrightarrow 00{:}07{:}46.091$ We are also building in some additional

NOTE Confidence: 0.81305254

00:07:46.091 --> 00:07:47.900 entry points using different applications.

NOTE Confidence: 0.81305254

00:07:47.900 --> 00:07:48.776 C bio portal,

NOTE Confidence: 0.81305254

00:07:48.776 $-\!\!\!>$ 00:07:50.820 which I'll speak about a little bit

NOTE Confidence: 0.81305254

 $00{:}07{:}50.880 \dashrightarrow 00{:}07{:}52.928$ as well as some API based access to

NOTE Confidence: 0.81305254

00:07:52.928 --> 00:07:55.167 be able to get slightly more direct

NOTE Confidence: 0.81305254

 $00:07:55.167 \dashrightarrow 00:07:57.616$ access to data through tools such as NOTE Confidence: 0.81305254

 $00:07:57.616 \rightarrow 00:07:59.944$ R and Python for investigators and

NOTE Confidence: 0.81305254

 $00:07:59.944 \rightarrow 00:08:02.200$ researchers who have that experience.

NOTE Confidence: 0.81305254

00:08:02.200 --> 00:08:02.812 So sorry,

NOTE Confidence: 0.81305254

 $00:08:02.812 \longrightarrow 00:08:04.954$ but you know talked about on a

NOTE Confidence: 0.81305254

 $00{:}08{:}04{.}954 \dashrightarrow 00{:}08{:}06{.}368$ couple of these slides.

NOTE Confidence: 0.81305254

 $00{:}08{:}06{.}370 \dashrightarrow 00{:}08{:}09{.}034$ OMAP is the common data model that we

- NOTE Confidence: 0.81305254
- $00:08:09.034 \rightarrow 00:08:11.374$ really leverage to try to push forward

 $00{:}08{:}11.374 \dashrightarrow 00{:}08{:}13.632$ a more accessible data model for our

NOTE Confidence: 0.81305254

 $00{:}08{:}13.632 \dashrightarrow 00{:}08{:}15.697$ clinical an EHR data OMAP is managed

NOTE Confidence: 0.81305254

 $00{:}08{:}15.697 \dashrightarrow 00{:}08{:}17.610$ by an organization called the Odyssey.

NOTE Confidence: 0.81305254

 $00:08:17.610 \longrightarrow 00:08:18.306$ The observation,

NOTE Confidence: 0.81305254

 $00{:}08{:}18.306 \dashrightarrow 00{:}08{:}19.002$ ULL health,

NOTE Confidence: 0.81305254

 $00{:}08{:}19{.}002 \dashrightarrow 00{:}08{:}20{.}742$ data Sciences and informatics organization

NOTE Confidence: 0.81305254

 $00:08:20.742 \rightarrow 00:08:22.421$ and what the script really formed

NOTE Confidence: 0.81305254

 $00{:}08{:}22{.}421 \dashrightarrow 00{:}08{:}24{.}447$ as several years ago with a private

NOTE Confidence: 0.81305254

 $00:08:24.447 \rightarrow 00:08:26.187$ public partnership between the number

NOTE Confidence: 0.81305254

 $00:08:26.187 \longrightarrow 00:08:27.561$ of different pharmaceutical companies

NOTE Confidence: 0.81305254

 $00{:}08{:}27{.}561 \dashrightarrow 00{:}08{:}29{.}487$ as well as some academic partners,

NOTE Confidence: 0.81305254

 $00:08:29.490 \longrightarrow 00:08:31.305$ this is now primarily led

NOTE Confidence: 0.81305254

00:08:31.305 --> 00:08:32.394 by Columbia University.

NOTE Confidence: 0.84208035

 $00{:}08{:}32{.}400 \dashrightarrow 00{:}08{:}34{.}731$ But forms and more really simplified data

 $00{:}08{:}34{.}731$ --> $00{:}08{:}37{.}250$ model to access the clinical information.

NOTE Confidence: 0.84208035

 $00{:}08{:}37{.}250 \dashrightarrow 00{:}08{:}40{.}022$ So rather than having the 22,000 tables

NOTE Confidence: 0.84208035

 $00{:}08{:}40.022 \dashrightarrow 00{:}08{:}42.298$ of clarity simplifies a majority of

NOTE Confidence: 0.84208035

00:08:42.298 --> 00:08:44.326 clinical data down into about 12:00

NOTE Confidence: 0.84208035

00:08:44.326 --> 00:08:46.582 or so clinical domains all centered

NOTE Confidence: 0.84208035

 $00:08:46.582 \rightarrow 00:08:48.810$ around the person or the individual.

NOTE Confidence: 0.84208035

 $00{:}08{:}48.810 \dashrightarrow 00{:}08{:}51.030$ So the person table maintains the

NOTE Confidence: 0.84208035

 $00:08:51.030 \rightarrow 00:08:52.934$ demographics and then around that

NOTE Confidence: 0.84208035

 $00{:}08{:}52{.}934 \dashrightarrow 00{:}08{:}54{.}478$ we have observations, providers,

NOTE Confidence: 0.84208035

 $00:08:54.478 \longrightarrow 00:08:55.822$ cohorts, drugs, observations,

NOTE Confidence: 0.84208035

 $00:08:55.822 \dashrightarrow 00:08:58.062$ measurements and by linking those NOTE Confidence: 0.84208035

 $00{:}08{:}58.062 \dashrightarrow 00{:}09{:}00.593$ we can much more rapidly on board NOTE Confidence: 0.84208035

 $00:09:00.593 \rightarrow 00:09:02.363$ analysts and researchers to really

NOTE Confidence: 0.84208035

 $00:09:02.363 \dashrightarrow 00:09:04.505$ work with these real world datasets.

NOTE Confidence: 0.84208035

 $00{:}09{:}04.510 \dashrightarrow 00{:}09{:}06.238$ In addition to this more simplified

NOTE Confidence: 0.84208035

 $00:09:06.238 \longrightarrow 00:09:07.770$ aspect of the data model,

 $00:09:07.770 \longrightarrow 00:09:09.730$ this is the same data model that's being

NOTE Confidence: 0.84208035

 $00{:}09{:}09{.}730 \dashrightarrow 00{:}09{:}11.608$ used by many genomics initiatives,

NOTE Confidence: 0.84208035

00:09:11.610 --> 00:09:12.775 including emerged the UK Biobank

NOTE Confidence: 0.84208035

 $00:09:12.775 \longrightarrow 00:09:14.703$ in the all of US initiative and

NOTE Confidence: 0.84208035

 $00:09:14.703 \rightarrow 00:09:16.468$ then more recently the National

NOTE Confidence: 0.84208035

 $00{:}09{:}16.468 \dashrightarrow 00{:}09{:}17.527$ Covid Cohort Collaborative.

NOTE Confidence: 0.84208035

 $00:09:17.530 \longrightarrow 00:09:18.418$ Because of this,

NOTE Confidence: 0.84208035

 $00{:}09{:}18{.}418 \dashrightarrow 00{:}09{:}20{.}194$ individuals who learn the data model

NOTE Confidence: 0.84208035

 $00{:}09{:}20{.}194 \dashrightarrow 00{:}09{:}21{.}943$ for any of those initiatives will

NOTE Confidence: 0.84208035

 $00{:}09{:}21.943 \dashrightarrow 00{:}09{:}23.704$ already know some of the intricacies

NOTE Confidence: 0.84208035

00:09:23.704 --> 00:09:25.528 of working with our EHR data.

NOTE Confidence: 0.84208035

 $00:09:25.530 \longrightarrow 00:09:27.300$ How do you find an encounter?

NOTE Confidence: 0.84208035

00:09:27.300 --> 00:09:29.365 How do you find a pulse rate?

NOTE Confidence: 0.84208035

 $00:09:29.370 \dashrightarrow 00:09:31.449$ How do you find a creatinine value?

NOTE Confidence: 0.84208035

 $00{:}09{:}31.450 \dashrightarrow 00{:}09{:}33.562$ All of that is a transferable skill skill

 $00:09:33.562 \rightarrow 00:09:35.587$ between all of those different databases.

NOTE Confidence: 0.84425914

00:09:37.770 --> 00:09:39.884 And now we did, you know, really,

NOTE Confidence: 0.84425914

 $00:09:39.884 \dashrightarrow 00:09:41.648$ start to build this computational health NOTE Confidence: 0.84425914

00:09:41.648 --> 00:09:43.549 platform with a focus on generations.

NOTE Confidence: 0.84425914

 $00:09:43.550 \rightarrow 00:09:45.266$ When we started what we've shifted

NOTE Confidence: 0.84425914

 $00:09:45.266 \rightarrow 00:09:47.390$ to over the last year is really

NOTE Confidence: 0.84425914

 $00{:}09{:}47{.}390 \dashrightarrow 00{:}09{:}48{.}622$ supporting covid analytics and

NOTE Confidence: 0.84425914

 $00:09:48.622 \rightarrow 00:09:50.838$ we had to do this quite rapidly.

NOTE Confidence: 0.84425914

 $00{:}09{:}50{.}840 \dashrightarrow 00{:}09{:}52{.}700$ This has been a tremendous collaboration

NOTE Confidence: 0.84425914

 $00:09:52.700 \rightarrow 00:09:54.788$ between the number of groups you know,

NOTE Confidence: 0.84425914

 $00:09:54.790 \dashrightarrow 00:09:56.918$ especially our joint data and analytics team,

NOTE Confidence: 0.84425914

00:09:56.920 --> 00:09:58.440 which Charlie Tori also leads,

NOTE Confidence: 0.84425914

 $00{:}09{:}58{.}440 \dashrightarrow 00{:}10{:}00{.}673$ and being able to integrate this with

NOTE Confidence: 0.84425914

 $00:10:00.673 \rightarrow 00:10:02.327$ our other clinical and operational

NOTE Confidence: 0.84425914

 $00:10:02.327 \longrightarrow 00:10:04.560$ data assets has really allowed us to

NOTE Confidence: 0.84425914

 $00{:}10{:}04{.}560 \dashrightarrow 00{:}10{:}06{.}772$ one drive how we can acquire data in

 $00:10:06.772 \rightarrow 00:10:08.416$ real time for operational planning.

NOTE Confidence: 0.84425914

 $00{:}10{:}08{.}416 \dashrightarrow 00{:}10{:}10{.}984$ But to build out really integrated

NOTE Confidence: 0.84425914

 $00{:}10{:}10{.}984 \dashrightarrow 00{:}10{:}13{.}017$ research platforms that can go from NOTE Confidence: 0.84425914

00:10:13.017 --> 00:10:14.691 bench to bedside and back again,

NOTE Confidence: 0.84425914

00:10:14.700 --> 00:10:16.405 one of these integrated informatics

NOTE Confidence: 0.84425914

 $00{:}10{:}16{.}405 \dashrightarrow 00{:}10{:}18{.}455$ pipelines that we've used as help

NOTE Confidence: 0.84425914

 $00{:}10{:}18.455 \dashrightarrow 00{:}10{:}20.471$ drive research with a lot of our

NOTE Confidence: 0.84425914

 $00:10:20.471 \longrightarrow 00:10:21.932$ fantastic immuno biologist across

NOTE Confidence: 0.84425914

00:10:21.932 --> 00:10:23.563 the organization Icoi, Wisocky,

NOTE Confidence: 0.84425914

 $00:10:23.563 \rightarrow 00:10:24.712$ Ehrenring and others.

NOTE Confidence: 0.84425914

 $00{:}10{:}24.712 \dashrightarrow 00{:}10{:}27.387$ The way that we've implemented this is

NOTE Confidence: 0.84425914

 $00{:}10{:}27.387 \dashrightarrow 00{:}10{:}29.578$ really by using chip to help monitor

NOTE Confidence: 0.84425914

00:10:29.578 --> 00:10:31.502 our real-world data feeds for COVID-19

NOTE Confidence: 0.84425914

 $00{:}10{:}31{.}502 \dashrightarrow 00{:}10{:}33{.}645$ testing as well As for visits across

NOTE Confidence: 0.84425914

 $00:10:33.645 \rightarrow 00:10:35.415$ the health system to potentially to

 $00:10:35.415 \rightarrow 00:10:37.244$ or rather to identify potentially

NOTE Confidence: 0.84425914

 $00{:}10{:}37{.}244 \dashrightarrow 00{:}10{:}39{.}464$ eligible patients in clinical trials.

NOTE Confidence: 0.84425914

 $00{:}10{:}39{.}470 \dashrightarrow 00{:}10{:}41{.}426$ And then integrate that with tools NOTE Confidence: 0.84425914

00:10:41.426 --> 00:10:44.145 like Red Cap where we can do more

NOTE Confidence: 0.84425914

 $00{:}10{:}44{.}145 \dashrightarrow 00{:}10{:}45{.}497$ protocol driven data capture.

NOTE Confidence: 0.84425914

 $00{:}10{:}45{.}500 \dashrightarrow 00{:}10{:}47{.}348$ So what this lets us do is balance

NOTE Confidence: 0.84425914

 $00:10:47.348 \longrightarrow 00:10:49.046$ out and acquire real-world outcomes

NOTE Confidence: 0.84425914

 $00{:}10{:}49{.}046 \dashrightarrow 00{:}10{:}51{.}392$ from the HR where people hospitalized

NOTE Confidence: 0.84425914

 $00{:}10{:}51{.}392 \dashrightarrow 00{:}10{:}53{.}390$ where they intimated what medications

NOTE Confidence: 0.84425914

 $00:10:53.390 \longrightarrow 00:10:54.884$ did they receive, receive,

NOTE Confidence: 0.84425914

 $00{:}10{:}54.884 \dashrightarrow 00{:}10{:}56.888$ and what were the results of

NOTE Confidence: 0.84425914

00:10:56.888 --> 00:10:57.556 laboratory testing.

NOTE Confidence: 0.84425914

 $00{:}10{:}57{.}560 \dashrightarrow 00{:}10{:}59{.}678$ And then if patients are consented

NOTE Confidence: 0.84425914

 $00{:}10{:}59.678 \dashrightarrow 00{:}11{:}01.763$ with the appropriate IRB's and all

NOTE Confidence: 0.84425914

 $00:11:01.763 \rightarrow 00:11:03.587$ of the regulatory pieces in place,

NOTE Confidence: 0.84425914

 $00:11:03.590 \longrightarrow 00:11:05.486$ we can combine those clinical data

- NOTE Confidence: 0.84425914
- $00{:}11{:}05{.}486 \dashrightarrow 00{:}11{:}07{.}476$ with protocol driven data that we
- NOTE Confidence: 0.84425914
- 00:11:07.476 --> 00:11:09.136 acquire through Redcap and provide
- NOTE Confidence: 0.84425914
- $00:11:09.136 \dashrightarrow 00:11:10.720$ back integrated data resources.
- NOTE Confidence: 0.84425914
- $00:11:10.720 \longrightarrow 00:11:11.366$ For investigators,
- NOTE Confidence: 0.84425914
- 00:11:11.366 --> 00:11:13.627 we've been pretty successful in terms of
- NOTE Confidence: 0.84425914
- $00:11:13.627 \rightarrow 00:11:15.699$ being able to advance science with this.
- NOTE Confidence: 0.84425914
- $00:11:15.700 \rightarrow 00:11:17.560$ Throughout the course of the pandemic.
- NOTE Confidence: 0.84425914
- 00:11:17.560 --> 00:11:17.838 Again,
- NOTE Confidence: 0.84425914
- $00{:}11{:}17.838 \dashrightarrow 00{:}11{:}19.784$ a lot of this fantastic work that's
- NOTE Confidence: 0.84425914
- 00:11:19.784 --> 00:11:21.546 really being driven by our immuno
- NOTE Confidence: 0.84425914
- $00:11:21.546 \rightarrow 00:11:22.986$ biologist looking at things from
- NOTE Confidence: 0.84425914
- $00:11:22.986 \longrightarrow 00:11:24.829$ the immune response to developing
- NOTE Confidence: 0.84425914
- $00{:}11{:}24.829 \dashrightarrow 00{:}11{:}25.954$ out predictive models.
- NOTE Confidence: 0.84425914
- $00{:}11{:}25{.}960 \dashrightarrow 00{:}11{:}27{.}720$ With clinical informatics in our
- NOTE Confidence: 0.84425914
- $00{:}11{:}27.720$ --> $00{:}11{:}29.480$ emergency Department and looking at
- NOTE Confidence: 0.84425914

 $00:11:29.534 \rightarrow 00:11:31.564$ outcomes in our cohort and now changes

NOTE Confidence: 0.84425914

 $00:11:31.564 \rightarrow 00:11:33.727$ in mortality over time and the other area,

NOTE Confidence: 0.84425914

00:11:33.730 --> 00:11:36.098 then that I'm just going to hop back

NOTE Confidence: 0.84425914

 $00:11:36.098 \rightarrow 00:11:38.330$ to really quickly since we're a little

NOTE Confidence: 0.84425914

 $00{:}11{:}38{.}330 \dashrightarrow 00{:}11{:}41{.}257$ bit short on time is how we've also been.

NOTE Confidence: 0.84425914

 $00{:}11{:}41{.}260 \dashrightarrow 00{:}11{:}43{.}264$ Leveraging Chip to advance genomic research

NOTE Confidence: 0.84425914

00:11:43.264 --> 00:11:45.040 primarily focused around Cymatic mutation.

NOTE Confidence: 0.84425914

00:11:45.040 --> 00:11:45.714 To date,

NOTE Confidence: 0.84425914

 $00{:}11{:}45{.}714 \dashrightarrow 00{:}11{:}48{.}073$ hematology is really one of the first

NOTE Confidence: 0.84425914

 $00:11:48.073 \dashrightarrow 00:11:50.546$ areas that we're working on this with.

NOTE Confidence: 0.84425914

 $00{:}11{:}50{.}550 \dashrightarrow 00{:}11{:}52{.}265$ With Stephanie Haleine and others

NOTE Confidence: 0.84425914

 $00{:}11{:}52.265 \dashrightarrow 00{:}11{:}53.294$ in our hematology,

NOTE Confidence: 0.84425914

 $00{:}11{:}53{.}300 \dashrightarrow 00{:}11{:}55{.}604$ and he he monk groups and what we use

NOTE Confidence: 0.84425914

00:11:55.604 --> 00:11:57.390 chip for the computational Hellpop

NOTE Confidence: 0.84425914

 $00{:}11{:}57{.}390 \dashrightarrow 00{:}11{:}59{.}586$ platform is to build out these

NOTE Confidence: 0.84425914

 $00:11:59.651 \rightarrow 00:12:01.235$ analysis pipelines and integrate

- NOTE Confidence: 0.84425914
- $00{:}12{:}01{.}235 \dashrightarrow 00{:}12{:}03{.}611$ data from all of these different

 $00{:}12{:}03.620 \dashrightarrow 00{:}12{:}06.264$ clinical sources so the EHR, the LIS,

NOTE Confidence: 0.84425914

 $00:12:06.264 \rightarrow 00:12:08.574$ the imaging system and others.

NOTE Confidence: 0.84425914

 $00:12:08.580 \longrightarrow 00:12:10.452$ We can then also integrate our

NOTE Confidence: 0.84425914

 $00:12:10.452 \rightarrow 00:12:12.413$ biospecimen data so we can actually

NOTE Confidence: 0.84425914

 $00:12:12.413 \longrightarrow 00:12:14.357$ track our populations in real time

NOTE Confidence: 0.84425914

 $00{:}12{:}14.357 \dashrightarrow 00{:}12{:}16.673$ and for patients who have consented

NOTE Confidence: 0.84425914

00:12:16.673 --> 00:12:18.678 or for excess specimens acquire

NOTE Confidence: 0.84425914

 $00{:}12{:}18.678 \dashrightarrow 00{:}12{:}20.118$ clinical specimens through the

NOTE Confidence: 0.84425914

 $00:12:20.118 \longrightarrow 00:12:21.848$ clinical laboratory and then integrate

NOTE Confidence: 0.84425914

 $00:12:21.848 \longrightarrow 00:12:23.280$ those with freezer works.

NOTE Confidence: 0.82425916

00:12:23.280 --> 00:12:26.250 Our BIOSPECIMEN data management software.

NOTE Confidence: 0.82425916

 $00{:}12{:}26.250 \dashrightarrow 00{:}12{:}27.410$ From our sequencing laboratories.

NOTE Confidence: 0.82425916

 $00{:}12{:}27{.}410 \dashrightarrow 00{:}12{:}29{.}562$ So right now that's primarily our molecular

NOTE Confidence: 0.82425916

 $00:12:29.562 \rightarrow 00:12:31.367$ diagnostics laboratory and lab medicine,

00:12:31.370 --> 00:12:33.610 but also with YCGA&R tumor profiling groups.

NOTE Confidence: 0.82425916

 $00{:}12{:}33.610 \dashrightarrow 00{:}12{:}36.090$ We can integrate our genomic data as well

NOTE Confidence: 0.82425916

00:12:36.090 --> 00:12:38.406 as registry data from Redcap and others,

NOTE Confidence: 0.82425916

 $00{:}12{:}38{.}410 \dashrightarrow 00{:}12{:}40{.}720$ and push those back to different data

NOTE Confidence: 0.82425916

 $00{:}12{:}40.720 \dashrightarrow 00{:}12{:}42.832$ analysis tools so it believes Doctor

NOTE Confidence: 0.82425916

00:12:42.832 --> 00:12:44.956 Murray was mentioning a little bit

NOTE Confidence: 0.82425916

 $00{:}12{:}44.956 \dashrightarrow 00{:}12{:}47.218$ about Nomad is one of the options that

NOTE Confidence: 0.82425916

00:12:47.218 --> 00:12:49.226 we have and are working to deploy

NOTE Confidence: 0.82425916

 $00{:}12{:}49{.}226 \dashrightarrow 00{:}12{:}51{.}050$ or others are working to deploy

NOTE Confidence: 0.82425916

 $00{:}12{:}51{.}117 \dashrightarrow 00{:}12{:}53{.}127$ for germ line for tumor sequencing.

NOTE Confidence: 0.82425916

 $00{:}12{:}53{.}130 \dashrightarrow 00{:}12{:}55{.}342$ We're really looking at C bio portal NOTE Confidence: 0.82425916

 $00{:}12{:}55{.}342 \dashrightarrow 00{:}12{:}58{.}255$ as being one of the entry points for

NOTE Confidence: 0.82425916

 $00{:}12{:}58.255 \dashrightarrow 00{:}13{:}00.155$ investigators to access these data.

NOTE Confidence: 0.82425916

00:13:00.160 --> 00:13:02.428 C bio portal is actually open source

NOTE Confidence: 0.82425916

00:13:02.428 --> 00:13:04.486 software that was developed at Memorial

NOTE Confidence: 0.82425916

 $00:13:04.486 \rightarrow 00:13:06.880$ Sloan Kettering as well as a couple

00:13:06.940 --> 00:13:08.800 of different consulting groups,

NOTE Confidence: 0.82425916

00:13:08.800 --> 00:13:10.244 but provides the investigator

NOTE Confidence: 0.82425916

 $00:13:10.244 \rightarrow 00:13:12.410$ driven ability to have really used

NOTE Confidence: 0.82425916

00:13:12.467 --> 00:13:14.679 user interface to start to look at

NOTE Confidence: 0.82425916

 $00:13:14.679 \longrightarrow 00:13:16.360$ outcomes across these populations.

NOTE Confidence: 0.82425916

 $00:13:16.360 \rightarrow 00:13:18.160$ So using our computable phenotypes,

NOTE Confidence: 0.82425916

00:13:18.160 --> 00:13:20.320 we can identify patients with AML,

NOTE Confidence: 0.82425916

00:13:20.320 --> 00:13:20.948 AML, CML,

NOTE Confidence: 0.82425916

 $00{:}13{:}20{.}948 \dashrightarrow 00{:}13{:}22{.}518$ integrate the genomic data that

NOTE Confidence: 0.82425916

 $00:13:22.518 \rightarrow 00:13:24.640$ we've done for clinical sequencing,

NOTE Confidence: 0.82425916

 $00:13:24.640 \longrightarrow 00:13:26.754$ and provide this back in these drivable

NOTE Confidence: 0.82425916

00:13:26.754 --> 00:13:28.135 interfaces to start investigation

NOTE Confidence: 0.82425916

 $00:13:28.135 \rightarrow 00:13:30.255$ and hypothesis testing while still

NOTE Confidence: 0.82425916

 $00{:}13{:}30{.}255 \dashrightarrow 00{:}13{:}31{.}951$ providing more advanced analytics.

NOTE Confidence: 0.82425916

 $00{:}13{:}31{.}960 \dashrightarrow 00{:}13{:}34{.}005$ And integration capacity through data

 $00:13:34.005 \rightarrow 00:13:36.536$ driven API's to extract the underlying

NOTE Confidence: 0.82425916

 $00{:}13{:}36{.}536 \dashrightarrow 00{:}13{:}39{.}504$ genomic data for investigators who need it.

NOTE Confidence: 0.82425916

 $00{:}13{:}39{.}510 \dashrightarrow 00{:}13{:}41{.}449$ As we move forward and continue to

NOTE Confidence: 0.82425916

 $00:13:41.449 \rightarrow 00:13:43.289$ expand our work with generations,

NOTE Confidence: 0.82425916

 $00{:}13{:}43{.}290 \dashrightarrow 00{:}13{:}45{.}794$ just the one area I wanted to highlight

NOTE Confidence: 0.82425916

 $00{:}13{:}45{.}794 \dashrightarrow 00{:}13{:}48{.}328$ which might get talked about a little bit.

NOTE Confidence: 0.82425916

 $00{:}13{:}48{.}330 \dashrightarrow 00{:}13{:}50{.}090$ Is the pharma cogenetic genetics

NOTE Confidence: 0.82425916

 $00:13:50.090 \rightarrow 00:13:51.850$ aspect of this program.

NOTE Confidence: 0.82425916

 $00{:}13{:}51{.}850 \dashrightarrow 00{:}13{:}53{.}518$ For this which is really being

NOTE Confidence: 0.82425916

 $00{:}13{:}53{.}518 \dashrightarrow 00{:}13{:}55{.}170$ led by Rebecca Vulcan Pharmacy,

NOTE Confidence: 0.82425916

 $00{:}13{:}55{.}170 \dashrightarrow 00{:}13{:}57{.}002$ is that we've got an EHR order that

NOTE Confidence: 0.82425916

 $00{:}13{:}57{.}002 \dashrightarrow 00{:}13{:}59{.}401$ we can use to order pharmaco genomic

NOTE Confidence: 0.82425916

00:13:59.401 - > 00:14:00.905 testing directly on individuals.

NOTE Confidence: 0.82425916

 $00:14:00.910 \longrightarrow 00:14:03.854$ Or we can get it as part of

NOTE Confidence: 0.82425916

 $00:14:03.854 \rightarrow 00:14:05.200$ the generations panel.

NOTE Confidence: 0.82425916

 $00:14:05.200 \rightarrow 00:14:06.850$ Once the specimens are obtained,

 $00:14:06.850 \rightarrow 00:14:09.490$ those specimens go to why CGA for sequencing.

NOTE Confidence: 0.8389803

 $00{:}14{:}12.070 \dashrightarrow 00{:}14{:}14.149$ Within the EHR, we've got a third

NOTE Confidence: 0.8389803

 $00{:}14{:}14{.}149 \dashrightarrow 00{:}14{:}16{.}536$ party vendor called Act X that can

NOTE Confidence: 0.8389803

 $00:14:16.536 \rightarrow 00:14:17.968$ provide integrated decision support.

NOTE Confidence: 0.8389803

 $00:14:17.970 \longrightarrow 00:14:20.266$ So at the time of medication order,

NOTE Confidence: 0.8389803

00:14:20.270 --> 00:14:22.886 if we enter in order into the EHR,

NOTE Confidence: 0.8389803

 $00{:}14{:}22{.}890 \dashrightarrow 00{:}14{:}24{.}836$ we can actually provide back in real

NOTE Confidence: 0.8389803

 $00{:}14{:}24.836 \dashrightarrow 00{:}14{:}26.872$ time a BPA that provides individuals

NOTE Confidence: 0.8389803

00:14:26.872 --> 00:14:29.146 with some feedback of whether a

NOTE Confidence: 0.8389803

 $00{:}14{:}29{.}146 \dashrightarrow 00{:}14{:}31{.}158$ person has a genetic interaction with

NOTE Confidence: 0.8389803

 $00{:}14{:}31{.}158 \dashrightarrow 00{:}14{:}33{.}069$ the drug that is being prescribed.

NOTE Confidence: 0.8389803

 $00{:}14{:}33.069 \dashrightarrow 00{:}14{:}35.781$ And this is for the handful of drugs NOTE Confidence: 0.8389803

 $00:14:35.781 \longrightarrow 00:14:37.975$ that we have on that panel today.

NOTE Confidence: 0.8389803

00:14:37.980 --> 00:14:40.086 How we're leveraging Chip and the

NOTE Confidence: 0.8389803

 $00{:}14{:}40.086$ --> $00{:}14{:}41.139$ computational health platform.

 $00:14:41.140 \rightarrow 00:14:43.975$ Is that once why SGA is done with sequencing?

NOTE Confidence: 0.8389803

 $00{:}14{:}43{.}980 \dashrightarrow 00{:}14{:}45{.}560$ We pulled those genetic variants

NOTE Confidence: 0.8389803

 $00{:}14{:}45{.}560 \dashrightarrow 00{:}14{:}47{.}140$ across and integrate that within

NOTE Confidence: 0.8389803

 $00{:}14{:}47.195 \dashrightarrow 00{:}14{:}49.121$ the Actex database so that those

NOTE Confidence: 0.8389803

00:14:49.121 --> 00:14:50.756 pharma
co genomic interactions can be

NOTE Confidence: 0.8389803

 $00:14:50.756 \rightarrow 00:14:51.944$ immediately available to providers

NOTE Confidence: 0.8389803

 $00:14:51.944 \longrightarrow 00:14:53.730$ while also on the other side,

NOTE Confidence: 0.8389803

 $00{:}14{:}53.730 \dashrightarrow 00{:}14{:}55.230$ providing researchers with access to

NOTE Confidence: 0.8389803

 $00{:}14{:}55{.}230 \dashrightarrow 00{:}14{:}56{.}890$ not only those clinical variants,

NOTE Confidence: 0.8389803

 $00{:}14{:}56{.}890 \dashrightarrow 00{:}14{:}58{.}798$ but also every other variant that

NOTE Confidence: 0.8389803

 $00{:}14{:}58.798 \dashrightarrow 00{:}15{:}00.670$ we have available on the chip.

NOTE Confidence: 0.8389803

 $00:15:00.670 \longrightarrow 00:15:02.784$ So this provides us with the very

NOTE Confidence: 0.8389803

 $00{:}15{:}02{.}784 \dashrightarrow 00{:}15{:}04{.}746$ rich environment to be able to

NOTE Confidence: 0.8389803

 $00{:}15{:}04.746 \dashrightarrow 00{:}15{:}06.401$ capture data integrated and really

NOTE Confidence: 0.8389803

 $00:15:06.401 \dashrightarrow 00:15:08.547$ provide real time feedback to the EHR,

NOTE Confidence: 0.8389803

 $00:15:08.550 \longrightarrow 00:15:12.378$ not just in a research capacity.

- NOTE Confidence: 0.8389803
- 00:15:12.380 --> 00:15:13.274 So in summary,
- NOTE Confidence: 0.8389803
- 00:15:13.274 --> 00:15:15.062 you know Chip is really focused
- NOTE Confidence: 0.8389803
- $00:15:15.062 \longrightarrow 00:15:17.856$ on how can we link all of these
- NOTE Confidence: 0.8389803
- 00:15:17.856 --> 00:15:18.897 different datasets together,
- NOTE Confidence: 0.8389803
- $00:15:18.900 \longrightarrow 00:15:20.755$ but with that ultimate goal of really
- NOTE Confidence: 0.8389803
- $00{:}15{:}20.755 \dashrightarrow 00{:}15{:}22.816$ enabling the next generation of healthcare
- NOTE Confidence: 0.8389803
- $00:15:22.816 \rightarrow 00:15:24.440$ analytics and integrated insights,
- NOTE Confidence: 0.8389803
- $00:15:24.440 \longrightarrow 00:15:26.396$ we're trying to move this just,
- NOTE Confidence: 0.8389803
- $00:15:26.400 \longrightarrow 00:15:27.014$ you know,
- NOTE Confidence: 0.8389803
- $00:15:27.014 \rightarrow 00:15:28.549$ beyond thinking about just genomics
- NOTE Confidence: 0.8389803
- $00:15:28.549 \rightarrow 00:15:30.845$ or just the HR data and really
- NOTE Confidence: 0.8389803
- $00{:}15{:}30{.}845 \dashrightarrow 00{:}15{:}32{.}490$ providing this as an integrated
- NOTE Confidence: 0.8389803
- 00:15:32.490 --> 00:15:33.898 repository to advance science,
- NOTE Confidence: 0.8389803
- $00{:}15{:}33{.}900 \dashrightarrow 00{:}15{:}35{.}530$ clinical care and clinical operations.
- NOTE Confidence: 0.8389803
- $00:15:35.530 \rightarrow 00:15:37.497$ Ship has been integral to providing real
- NOTE Confidence: 0.8389803

 $00:15:37.497 \rightarrow 00:15:39.650$ time data for clinical and operational

NOTE Confidence: 0.8389803

 $00{:}15{:}39.650 \dashrightarrow 00{:}15{:}41.318$ dashboards related to COVID-19.

NOTE Confidence: 0.8389803

 $00:15:41.320 \longrightarrow 00:15:43.156$ But now as we're moving more

NOTE Confidence: 0.8389803

 $00:15:43.156 \longrightarrow 00:15:44.380$ into the chronic phases,

NOTE Confidence: 0.8389803

 $00{:}15{:}44{.}380 \dashrightarrow 00{:}15{:}46{.}592$ as we are starting to recruit people

NOTE Confidence: 0.8389803

 $00:15:46.592 \rightarrow 00:15:48.171$ back into generations and opening

NOTE Confidence: 0.8389803

00:15:48.171 --> 00:15:49.887 up more of our research again,

NOTE Confidence: 0.8389803

 $00:15:49.890 \longrightarrow 00:15:51.633$ we do have our ongoing plans to

NOTE Confidence: 0.8389803

00:15:51.633 --> 00:15:53.146 continue to integrate these molecular

NOTE Confidence: 0.8389803

 $00{:}15{:}53{.}146 \dashrightarrow 00{:}15{:}54{.}931$ data with clinical outcomes in

NOTE Confidence: 0.8389803

 $00:15:54.931 \rightarrow 00:15:56.002$ some targeted collaborations,

NOTE Confidence: 0.8389803

 $00{:}15{:}56.010 \dashrightarrow 00{:}15{:}57.837$ and would are also looking to expand

NOTE Confidence: 0.8389803

 $00{:}15{:}57{.}837 \dashrightarrow 00{:}15{:}59{.}745$ that out to several more general

NOTE Confidence: 0.8389803

 $00{:}15{:}59{.}745 \dashrightarrow 00{:}16{:}01{.}515$ populations as we move forward.

NOTE Confidence: 0.8389803

 $00{:}16{:}01.520 \dashrightarrow 00{:}16{:}02.130$ These plans,

NOTE Confidence: 0.8389803

00:16:02.130 --> 00:16:03.350 software deployments including C,

- NOTE Confidence: 0.8389803
- 00:16:03.350 --> 00:16:04.422 Bio Portal no Bad,
- NOTE Confidence: 0.8389803
- $00:16:04.422 \rightarrow 00:16:06.030$ and others will continue to increase
- NOTE Confidence: 0.8389803
- 00:16:06.084 --> 00:16:07.448 Accessibility to both germline
- NOTE Confidence: 0.8389803
- 00:16:07.448 --> 00:16:09.153 Anthem Attic sequencing data across
- NOTE Confidence: 0.8389803
- $00{:}16{:}09{.}153 \dashrightarrow 00{:}16{:}10{.}794$ the organization and with the
- NOTE Confidence: 0.8389803
- $00:16:10.794 \longrightarrow 00:16:12.038$ goal of integrating that.
- NOTE Confidence: 0.8389803
- $00{:}16{:}12.040 \dashrightarrow 00{:}16{:}13.984$ With this oh map data model so that
- NOTE Confidence: 0.8389803
- $00{:}16{:}13.984 \dashrightarrow 00{:}16{:}15.941$ we can also provide clinical outcomes
- NOTE Confidence: 0.8389803
- $00{:}16{:}15{.}941 \dashrightarrow 00{:}16{:}18{.}637$ and clinical data to pair with this
- NOTE Confidence: 0.8389803
- 00:16:18.637 --> 00:16:20.197 generated research information,
- NOTE Confidence: 0.8389803
- $00:16:20.200 \rightarrow 00:16:21.628$ or rather, genomic information.
- NOTE Confidence: 0.8389803
- $00{:}16{:}21.628 \dashrightarrow 00{:}16{:}24.469$ So thank you for the time and if
- NOTE Confidence: 0.8389803
- $00:16:24.469 \longrightarrow 00:16:26.353$ anybody has questions happy to follow
- NOTE Confidence: 0.8389803
- $00:16:26.353 \rightarrow 00:16:28.611$ up by email afterwards as well.