Global GS1 Healthcare Conference Highlights: "When supply chain meets eHealth"

A record number of more than 320 delegates attended the event, which was hosted by GS1 Australia in conjunction with the GS1 Global Office, with the National E-Health Transition Authority (NEHTA) as the Industry Partner.

Healthcare professionals from 33 countries gathered for the 21st Global GS1 Healthcare Conference in Sydney, Australia on 20-22 March, to advance the implementation of global supply chain standards and ultimately raise the bar on patient safety.
Conference attendees heard first-hand how GS1 Standards work and how they ultimately improve the way they are used in the Healthcare sector, especially to improve patient safety. Clinicians, suppliers, regulators, public and private Healthcare buyers, and supply chain experts took to the podium to share their experiences and expertise on traceability, medical device identification, electronic messaging, electronic product catalogues and global data synchronisation.

The Global GS1 Healthcare Conference was the ideal platform to share information with suppliers and providers as they look to improve and standardise their business processes.

“Immediate actions required for the safety of medical devices”

Confirming the need to address the medical devices legislative framework, Jay Crowley further emphasised the instrumental role GS1 Standards play as enabler of the Unique Device Identification (UDI) system. “This GS1 Healthcare conference provides a very interesting focus on supply chain efficiency. We are trying to achieve a globally secure supply chain which is one of FDA’s primary missions and the foundation elements that GS1 provides us with are critical to the success of this project.”

Jay Crawley, US FDA

NEHTA hosted an international Government Healthcare Supply Chain Think Tank to examine best practice in electronic Healthcare supply chain reform from global public sector agencies. 55 attendees from 15 countries including governmental bodies and regulators, Healthcare providers, pharmacists, manufacturers, distributors and wholesalers, logistics providers, and industry associations were invited.

“As a result of the collaboration between GS1 Australia, healthcare providers, manufacturers, distributors and trading partners, the healthcare industry has achieved great momentum towards the adoption of GS1 standards for supply chain efficiency and improved patient safety,” said Maria Palazzolo, CEO of GS1 Australia.

“Immediate actions required for the safety of medical devices”

Confirming the need to address the medical devices legislative framework, Jay Crowley further emphasised the instrumental role GS1 Standards play as enabler of the Unique Device Identification (UDI) system. “This GS1 Healthcare conference provides a very interesting focus on supply chain efficiency. We are trying to achieve a globally secure supply chain which is one of FDA’s primary missions and the foundation elements that GS1 provides us with are critical to the success of this project.” This message was echoed by the industry when Volker Zeinar from B.Braun, proposed a very clear and stepwise implementation project plan for UDI, with one key message: Start Now!
At the Berlaymont, in Brussels last February John Dalli, Commissioner for Health and Consumer Policy, made a strong statement to focus his work on better guaranteeing the safety of medical devices and to restore patient confidence in the EU law that protects them, in the wake of the PIP breast implant incident. Commissioner Dalli said “Patients’ health is the priority in this situation. I have proposed to the Health Ministers a set of the most urgent and important actions which should be implemented under the current legislative framework in the course of this year. At the same time we are taking on board the lessons learned from the PIP case in the upcoming revision of the Medical Devices legislation to be tabled before the summer. In particular, we will strengthen the legislation in relation to market surveillance, vigilance and functioning of notified bodies.”

Commissioner Dalli called on Member States for immediate actions to be taken at national level to ensure full and stringent implementation of the current EU legislation on medical devices. Amongst other initiatives, the Commission and Member States have been invited to co-operate together to support the development of traceability tools for medical devices, such as Unique Device Identification (UDI).

**New Zealand moving forward with GS1 Standards**

Health Information Standards Organisation (HISO) chairman, Dr Richard Medlicott, discussed why HISO has endorsed GS1 Standards for New Zealand Healthcare. In August 2011, the New Zealand Health Information Standards Organisation, a part of the New Zealand Ministry of Health, endorsed GS1 Standards for automated product identification for all pharmaceutical products and supplies and for all medical devices and equipment with reference to decisions made by the U.S. FDA. They also support the use of GS1 Standards in a National Product Catalogue. This move will be the groundwork for two major initiatives: the National Health IT Plan (with the eMedication Programme as one of its constituents) and the National Medication Safety Programme led by the Health Quality and Safety Commission.

From July 1st 2012, every Australian can choose to register for an eHealth record

Facing soaring Healthcare costs, the Australian National E-Health Transition Authority (NEHTA) has made significant progress in designing, operating and enhancing the essential foundations required to enable eHealth.

“The ability to store and share accurate, complete and up-to-date data on Healthcare products traded between suppliers and Healthcare delivery organisations is a critical, foundational component for Australia’s transition to an electronic health system” said Peter Fleming, CEO of NEHTA. Australia’s world-leading National Product Catalogue (NPC) was a highlight on the agenda of the Sydney Conference. The system is one of the first in the world to focus exclusively on the needs of the Healthcare industry and is endorsed by all state, territory and federal health departments. It is a single repository for product data about medicines, medical equipment and consumables.

Aligned with the Global Data Synchronisation Network (GDSN) standards, the NPC uses GS1’s standard identifier, the Global Trade Item Number (GTIN), as the globally unique primary product identifier for every NPC record.

NEHTA anticipates that full implementation of the NPC will save the public Healthcare sector up to A$200 million per annum by ensuring accurate, valid and up-to-date product data and improved communications and supply chain operations.

“It is currently about implementation of GTINs, and catalogue management tools but certainly in the future we will be looking to do more on the e-commerce side.” (Richard Bowen, Director Information at Health Purchasing Victoria, Australia)

NEHTA eProcurement solution, based on global electronic messaging standards (GS1XML) will improve the efficiency of procurement processes, increasing the accuracy of purchasing information, with the end goal of ensuring we get the right product, at the right price, for the right person, in the right location, at the right time.
Supply chain modernisation for pharmaceutical products in Asia-Pacific Region

Major patient safety initiatives are underway in hospitals in Hong Kong, Taiwan, Thailand, to improve the Supply Chain Management and patient safety in Healthcare institutions. The Asia-Pacific region is progressing with several actions already underway in order to adopt Global Trade Item Numbers (GTINs) as the main product identification code.

Following a report published in the New England Journal of Medicine (NEJM), showing a medication error reduction of 50% with the introduction of bar codes, Taiwan Society of Health-System Pharmacists (TSHP) is participating in a project aiming at standardising and implementing the medication bar code content.

In Thailand, eleven organisations came together to form the Thailand Healthcare Cluster to encourage stakeholders to adopt the Global Trade Item Number (GTIN) as identifier for all pharmaceutical products supplied to hospitals. The hospitals also require that by May 31st, 2012, this data be uploaded in a data pool called ‘Drug Net’, including name, ingredient, date of manufacture, and lot number. In addition, by June 2012, the cluster will only order medicines from suppliers who have adopted GTINs for their products.

Likewise, the Hospital Authority in Hong Kong has launched the Supply Chain Modernisation of Pharmaceutical Products initiative, which should enable to track and trace the product from suppliers to the pharmacy stores, using GS1 unique identification keys (GTINs and SSCCs). “We have the responsibility to ensure that we adopt the best practices, to engage our vendors and the technology to enable the process to be efficient as well as meet patient safety goals” said Mrs. SC Chiang, Senior pharmacist, at Hospital Authority, Hong Kong.

In Japan, early this year, the NTT Medical Center in Tokyo, has implemented a state-of-the-art traceability project, enabling the identification of endoscopes used in the operating room after surgery. A real accomplishment as endoscopes are made of 26 different small parts, all marked with GS1 DataMatrix symbols as small as 1mm by 1mm. Using MNEXT technology for marking and reading GS1 DataMatrix has enabled us to optimize inventory management as well as ensure patient safety, said Dr Ochiai, Chief Executive of NTT Medical Center Tokyo.

Ensuring Healthcare supply chain traceability and safer medicines supplies

Argentina’s fight against counterfeit drugs has become a reality, following the implementation by ANMAT (National Drug, Food and Medical Technology Administration) of their National Traceability System. The primary objective of the program is to counteract the distribution and supply of illegitimate drugs and guarantee patient safety. The programme is based on the unambiguous identification of products through the IT systems and the use of a harmonised language: GS1 Standards (GTINs and Serial Number). All drug movements are then recorded real-time in a central database managed by ANMAT using Global Location Numbers (GLNs) to identify the various agents involved in the supply chain.

EFPIA (European Federation of Pharmaceutical Industries and Associations) is also actively working to meet the requirements of the EU Falsified Medicines Directive and is supporting a globally harmonised coding solution that will enable medicine packs to be verified at the point of dispensing. The system: the European Medicines Verification System (EMVS) will ensure optimal patient safety and is based on GS1 DataMatrix including GTIN, Serial Number, Expiry Date and Batch Number. The solution, which was tested in Sweden in 2009, has been developed the major pharmaceutical stakeholders: European Association Euro Pharmaceutical Companies, European Association of Pharmaceutical Full-Line Wholesalers (GIRP), European Association Representing Community Pharmacists (PGEU).
Johnson & Johnson roll out of GS1 Standards making progress

Mike Rose, Vice President of Supply Chain Visibility, Johnson & Johnson, shared the business case behind the company’s decision to adopt GS1 Standards for identification and product marking across their product range. The GS1 labelling project is underway with already 100,000 GTINs implemented and by the end 2012, all Medical Devices and Diagnostics products will be identified by GS1 Standards. J&J is currently sending data through the Global Data Synchronisation Network (GDSN) to 54 retailers worldwide and has begun sending data to the U.S. Department of Defense.

Bounce Forward

To conclude the Sydney Conference, Sam Cawthorn, Young Australian of the Year in 2009, inspired the audience and embarked on a journey encouraging them to be resilient, overcome fears, and achieve goals and dreams that might seem unachievable.

Read his Bounce Theory

To download the presentations from the Sydney Conference visit our GS1 Healthcare website

GOVERNMENT & REGULATORY

USA: FDA reviews 2004 bar code rule

Last October the FDA announced a review of the “Bar Code Final Rule,” published in 2004, which requires manufacturers to put a linear barcode with the National Drug Code of the product on most unit of use packages.

While medical errors in hospitals are still a concern, in recent years FDA has become concerned by the invasion of counterfeit drugs in the legitimate US distribution channel. However, finding the leaks would require implementing “track & trace systems”, which cannot be done with linear barcodes. Yet, serialising products using GS1 DataMatrix bar codes would allow “track & trace”. In addition, serialisation not only reduces the chance of “bad product” reaching patients, it also reduces the time and costs in complying with a recall.

“For the past three years, many pharmaceutical manufacturers have implemented GS1 DataMatrix in response to the California Pedigree and FDA SNI guidance,” said Mark J. Goldberger M.D., M.P.H., divisional Vice President, Regulatory Policy & Intelligence, Abbott Laboratories. “Globally, GS1 DataMatrix is the preferred data carrier for encoding variable data on the unit of sale due to the small size of the data carrier” (Packaging serialization update, www.contractpharma.com).

GS1 US and GS1 Healthcare provided comments to the US FDA in its retrospective review of bar code technologies for drugs and biological products. The information submitted will help FDA to reassess the costs and benefits of the rule and to identify any relevant changes in technology that have occurred since it went into effect. The FDA will use the information received to assess whether the Bar Code Final Rule is achieving its intended benefits as effectively as possible or should be modified.

Read more
Sanofi Pasteur launches 2D bar coding for paediatric vaccines

The American Academy of Pediatrics (AAP) and Sanofi Pasteur, the vaccines division of Sanofi, recently announced the adoption of 2D barcodes including lot numbers and expiration dates to improve patient care and office efficiencies. The new technology is meant to reduce medical errors and provide better visibility across the supply chain by documenting vaccine information in patient records with greater accuracy.

“The 2D bar-code technology is available because of the work by a collaborative group of stakeholders and the forward thinking of many AAP members,” says Edward Zissman, MD, FAAP, co-chair of the AAP Vaccine Barcoding project.

Other vaccine manufacturers are expected to begin launching products with 2D bar codes later in the year.

US Centers for Disease Control (CDC) published guidelines stating that GS1 Datamatrix or barcode should be applied on each vaccine's packaging. A pilot with two manufacturer's has been agreed and will be implemented in two hospitals from August 2012 to April 2013.

Europe: Public consultation of the EU concept paper for the delegated acts

The European Commission published in November 2011 a concept paper for public consultation in preparation for the delegated act on the detailed rules for a Unique Identifier for medicinal products for human use, and its verification as required by Directive 2011/62/EU. The consultation ended on 27 April 2012. GS1 in Europe and GS1 Healthcare submitted a joint contribution to this public consultation in which GS1 applauded the European Commission and the European Parliament for its ongoing commitment to increase the security of the pharmaceutical supply chain and prevent the entry into the legal supply chain of falsified medicinal products. In particular, as the European Commission moves forward, GS1 Healthcare recommended a harmonised approach across the European Union, and even worldwide, as well as the adoption of GS1 Standards by the European Commission, providing a framework to fulfil the needs of various applications, including authentication/verification as required by Directive 2011/62/EU.

GS1 also encouraged setting a framework for the industry, which will allow it to move towards the use of GS1 Standards across the European Union by 2022, by mandating that all systems be able to use GS1 Standards.

Algeria: GS1 DataMatrix endorsed for Pharma products serialisation

GS1 DataMatrix has been incorporated in the new Algerian proposal on legal requirements for Pharma serialisation. As from mid-March 2012, the Ministry of Health, together with relevant stakeholders, will draft a Roadmap to provide guidance to the industry on implementing GS1 DataMatrix. The new legal requirements on Pharma serialisation including the incorporation of GTIN, Batch Number, Expiry Date and Serial Number, into the GS1 DataMatrix bar code, for all medicines are expected to be adopted by end 2012 / early 2013.

Updated information on this topic will be provided within the GS1 Healthcare Public Policy Work Team and via the Public Policy Database (GS1 Healthcare Members only. To become a Global Member: http://www.gs1.org/healthcare/about/memberships
Europe: EFPIA and GS1 join forces and agree on a shared vision for
product identification

In December 2011, EFPIA and GS1 Healthcare agreed on a Shared Vision, to provide the Healthcare community with a direction on how to best tackle the threat of counterfeit medicines and enhance patient safety by securing the pharmaceutical supply chain.

The suggested direction outlines the following key features in order to achieve this:
- Globally unique codes for interoperability;
- A cost-effective and already proven solution;
- Flexible and future compatible standards.

It will enable relevant stakeholders to comply with the requirements of the EU Falsified Medicines Directive whilst at the same time allowing existing national systems to adapt and evolve with technical advancements of the future.

1. What is the Shared Vision…?
The purpose of this joint paper is to explain the EFPIA / GS1 Healthcare Shared Vision for product identification and marking/coding of pharmaceutical products in Europe as well as some of the key reasons behind the Vision. It is not intended to define the specific route, which a country should take to achieve the desired end-state; it does, however, lay out potential options. Which of these should be adopted will need to be agreed upon on a case-by-case basis between all impacted stakeholders.

2. …and how to use it?
The Shared Vision provides practical guidance when implementing product identification and marking/coding.

USA: Mercy/ROI and BD collaborate to improve quality of care and reduce costs

The Perfect Order in Healthcare Industry

Mercy/ROI and BD (Becton, Dickinson and Company) collaborated to achieve the first known instance where GS1 Standards, including bar codes, were integrated across the medical device supply chain from manufacturing to bedside.

Perfect Order is more than just getting the right product to the right place at the right time. The Perfect Order process enables effective use of available resources by eliminating errors and maximizing the use of technology.

Perfect Order is an ideal in Healthcare that represents true electronic order processing, from order placement to delivery and payment, without human intervention.

“GS1 data standards enable Healthcare trading partners to speak the same language when it comes to product or location information, saving valuable time and resources, as well as reducing costs and enhancing patient safety” said Ewald Parolari, Senior Director Supply Chain Operations, BD. “GS1 data standards also enable Healthcare providers to track products when treating patients, which can help reduce medical errors while improving patient care.”

“What we were trying to do is enable the Healthcare provider to get benefits from the bar codes that we put on product packages” said Dennis Black, BD’s director, e-Business, who was instrumental in the collaborative effort with Mercy/ROI.
"As more and more Healthcare providers and manufacturers partner to implement GS1 Standards, one notion is resoundingly clear - these critical data standards can be implemented now to achieve benefits in supply chain efficiency and potential contributions to clinical care," said case study co-author Alex Zimmerman, Director of Integrated Business Solutions, ROi. "We hope the case study will provide a useful primer for those who want to understand the benefits of evolving their business processes and transacting with GS1 Standards at each step of the supply chain."

The case study documents improvements in several supply chain metrics, for example:

- 30% reduction in days payable outstanding.
- 73% reduction in discrepancies on purchase orders.
- Improved sourcing of products by use of a bar code to determine the right product and to reorder.
- Fewer stock outs due to the inherent simplicity offered to nursing staff for scanning bar codes at the bedside.

The greater transparency in inventory control helps to lower costs. Beyond accelerating the recall procedures, wider cost efficiencies have been achieved, for example reduced inventory levels by 20%, obsolete stocks diminished by 80% and more.

It is anticipated that this clear-cut business case will be the rationale for many, if not all, hospital boards to implement improved systems based upon GS1 Standards in the Netherlands and other countries.

Japan: Bedside automatic verification using RFID: Pilot underway

Dr. Katsuyuki Kondo, Akita University Hospital, Japan, developed an advanced Bedside Verification System, by which every Intravenous injection could be automatically verified in real time. In this system, each dose of the medication, prepared in accordance with the doctor’s prescription, bears an RFID label with HRI (Human Readable Interpretation) indicating patient name, name of the drug, date/time of administration, etc. When a nurse hangs the medication on the newly developed IV pole equipped with RFID reader at the bedside, the identification of the medication, the nurse (name tag) and the patient (wristband) are captured and verified automatically by communicating with the hospital information system. If the verification fails, the display on the pole instantly shows a warning signal. This system is still in the pilot stage and will be refined by employing newly developed GS1 Standards, for example the ‘patient & caregiver ID’.

The Netherlands: How hospitals are able to save more than €100 million

There is increasing government pressure for both higher quality (patient safety must improve) and lower costs in the Healthcare system. This business case demonstrates that implementing the GS1 Global Traceability Standard for Healthcare (GTSH) contributes to both improving patient safety by guaranteeing traceability of products as well as reducing costs substantially when applied to medical devices used in operating theatres and treatment rooms.

This case study demonstrates the advantages of using the GS1 Global Traceability Standard for Healthcare, enhancing visibility of medical devices in the supply chain, specifying which patient has received which medical device and under whose responsibility. Recall procedures are thereby simplified. The application of the GS1 Standards also leads to confidence in the operation planning: there is a clear view of inventories, to ensure the right products and materials will be available. Furthermore, the reimbursement costs per operation can be estimated more accurately.
**SAP and Oracle move to support GS1 Standards**

*SAP* Solutions Support GS1 Standards to Improve Supply Chains

A new Supply Chain Solution Overview has been released to help SAP end users understand the benefits of using GS1 Standards along with SAP supply chain solutions. By implementing GS1 Standards using supply chain solution from SAP, organisations can respond to the challenges of the global supply chain by increasing efficiency, effectiveness and transparency.

Oracle announced enhancements to its PeopleSoft Financial and Supply Chain Management products to support GS1 Standards

Updates to PeopleSoft Mobile Inventory Management include the ability to capture digital signatures on deliveries for “chain of custody” tracking of controlled substances and expensive materials or samples. The implementation and use of GS1 Global Location Number (GLN) has also been expanded to support current global standards outlined in GS1 Standards for Healthcare in the PeopleSoft eProcurement and PeopleSoft Purchasing modules. In addition, mobile transactions have been enhanced to recognize the Global Trade Item Number (GTIN) when scanned in lieu of a PeopleSoft Item ID.

**GS1 HEALTHCARE UPDATE**

**McKinsey to report on global standards for healthcare supply chains**

![McKinsey&Company](image)

The healthcare industry is today facing a number of issues: counterfeiting, ineffective product recall, medication errors, need for linking product data to treatments in EHR and ever increasing costs. Many governments and stakeholders are advocating the implementation of programs to improve patient safety. Consequently, the regulatory landscape will continue to evolve. Expected new regulations will have a direct impact on healthcare supply chains, requiring manufacturers to implement automatic identification technologies, electronic product catalogues, serialisation (a unique serial number on each package or product), and traceability systems.

The globalisation of pharmaceutical and medical devices supply chains have created unique opportunities, but also challenges for the industry and regulators. Three major industry players — Johnson & Johnson, Merck, and B.Braun — initiated collaborative work between GS1 Healthcare, the consulting firm of McKinsey & Company, and other key stakeholders of the healthcare industry. As part of this work, McKinsey will author a research report outlining and quantifying the benefits of improved supply chain standards in the healthcare industry with the ultimate goal of raising the bar on patient safety, clinical outcomes, and effectiveness. McKinsey will lead the research, with collaboration from industry stakeholders, GS1 Member Organisations and GS1 Global Office staff.

The report will be presented at the next GS1 Global Healthcare conference in Lisbon, next 23-25 October 2012. For more information, please contact: Ulrike.kreysa@gs1.org

**GS1 Healthcare part of the EU eHealth Stakeholder Group**

GS1 Healthcare has been nominated to the EU eHealth Stakeholder Group. Christian Hay, with Ulrike Kreysa as deputy, will be representing GS1 Healthcare in this Group. This group will provide a platform for stakeholders for contributing to the development of legislation or policy related to eHealth. It is for example expected that the Stakeholder Group will deliver reports, opinions and any relevant information to support the European Union’s efforts for eHealth interoperability. This group is composed of 30 high level representatives, appointed for 3 years, from European umbrella organisations/ associations, responsible for developing policy relevant to ICT for health.
Announcing the National Healthcare Reimbursement Number (NHRN) Application Identifier (AI)

New GS1 Application Identifier offers a way to associate national numbers with GS1 standards as a path of migration

GS1 Healthcare, firmly believes that all Healthcare products should be identified through the use of a GS1 GTIN (Global Trade Item Number). However, currently in some countries, there are national schemes being used for pharmaceutical product identification. These are generally referred to as “national numbers”. Often these are used to facilitate reimbursement processes and are embedded within regional/local IT systems, business processes and even legislation, which presents challenges for these countries to move to the global solution of identification via the GS1 GTIN. These national numbers are also sometimes required on the product packaging in a machine-readable format such as in a bar code.

To address the business need of global Healthcare supply chain partners faced with the application of national numbers, GS1 has developed and approved a new standard creating a GS1 Application Identifier for use with national numbers, the “National Healthcare Reimbursement Number” (NHRN) AI.

With this new Application Identifier, it is possible to associate the national number with the global GTIN identification number within data carriers (e.g. GS1 BarCodes) and related databases in a GS1 compliant way. This will allow, where necessary, a GTIN and national number to be held in the same bar code symbol so that both can be captured with a single scan. Like all other Application Identifiers, the NHRN AI must always be used in combination with a GTIN.

For more information on the National Healthcare Reimbursement Number Application Identifier, contact GS1 Healthcare or your local GS1 Member Organisation: www.gs1.org/healthcare/about/contact

securPharm Pilot project allows the parallel use of two codings: IFA-PPN and GS1-NTIN

securPharm e.V., GS1 and IFA jointly clarify the coding to be used in the securPharm Pilot project:

The EU Falsified Medicines Directive published on the 1st July, 2011 obliges medicinal product manufacturers in the future to mark any medicinal product with an individualized safety feature with which the authenticity of the product packages can be verified. The technical requirements of the safety feature system will be formulated in a delegated act which is planned to be issued prior to 2014.

The pharmaceutical industry, pharmaceutical wholesalers and pharmacies, in the joint initiative securPharm advocate a randomized serialization of medicinal product packaging as the safety feature which would then provide verification by checking their authenticity against a database. In addition certain product information would be applied to the packages in a machine-readable Data Matrix Code.

The securPharm e.V. supporting organizations ABDA, BAH, BPI, PHAGRO and vfa are planning to run a pilot project at the beginning of 2013. In this Germany-wide field trial, two competing approaches for coding the PZN or their transformation in a unique form for use outside of Germany, will be tested in all levels of the supply chain.

The IFA acting as the registering and data clearing center for pharmacy-customary products in the German market, assigns the PZN (Pharmacy Central Number) to medicinal products. The PZN is the German identification number for medicinal products.

The securPharm steering committee decided at its meeting on 30th March 2012, to allow in addition to the IFA and the PPN solution the NTIN solution from GS1 for the identification of pharmaceutical products in the upcoming pilot project. The PZN is to be extended by a prefix assigned by GS1 Germany.
Health Minister James Reilly opens the GS1 Ireland Healthcare Conference

Opening the GS1 Ireland Healthcare Conference last April, James Reilly, Minister for Health, said that the time had come to create more efficient models for healthcare, underlining that e-Health solutions based on recognised global standards were central to this debate. He further stated that Ireland will be responsible for introducing a crucial legislation on medical devices during its EU Presidency (first half of 2013).

Read more

GS1 Global Data Synchronisation Network (GDSN): A Major Release underway

GS1 will reach a significant milestone this year when the GDSN Major Release project engages the user community. This Major Release will feature a new architecture that will enhance user experience, increase flexibility, reduce complexity and boost system validation capabilities. The release is the fruit of community work on more than 120 user-submitted work requests relating to the Trade Item, Price Sync and Catalogue Item Sync Standards, among others. It also incorporates the Modular Item Architecture, an important project on which GS1 has been working for several years.

Introducing ‘Context’

One key change to both the network and its associated business practices will be the introduction of context, which provides attribute usage customization by Industry.
Information Exchange Standards meet supply chain standards

Joint HL7 / GS1 workshop at Medical Informatics Europe 2012, Pisa, Italy 26-29 August 2012

Building on the experience gathered in previous joint workshops, HL7 International and GS1 join forces again for this workshop at MIE 2012 to demonstrate achievements in addressing core challenges of quality and safety in health information exchange and interoperability.

The workshop will focus on adoption of standards to facilitate information exchange between the global supply chain and the Healthcare providers worldwide and the relevance of interoperability of standards. This taps into some of the most relevant questions for example:

- What is the most important information needed to support integrated care, e.g. emergency care, public health, emergency and social care? How is this information translated into GS1 and HL7 Standards and how can these standards interoperate?

Anne Moen will set the scene by explaining the needs from a clinical standpoint. Short presentations by Catherine Chronaki, Christian Hay and Charles Jaffe will address the sharing of the information bridging the clinical and supply chain worlds. The workshop will be moderated by Bernd Blobel and Ulrike Kreysa.

Come and join us in Pisa!

Registrations are now open at: www.mie2012.it

Local GS1 Conferences

US GS1 Connect 2012
Moving Forward in Healthcare
Check the agenda: www.gs1connectevent.org

GS1 Austria Healthcare Day 2012
19 September 2012, Vienna, Austria

Healthcare live! organized by GS1 Germany GmbH
25 - 26 September 2012, University Hospital, Düsseldorf

Global GS1 Healthcare speaking at the following events

Nordic Pharmaceutical Supply Chain Forum 2012
29 - 31 May, 2012, Scandic Glostrup, Copenhagen, Denmark

European Medical Device Regulation Conference
11-12 June, 2012, Brussels, Belgium

Pharmaceutical Packaging and Labelling Summit 2012
26 - 27 June, 2012, Grand Hotel Les Trois Rois, Basel, Switzerland

Global Pharmaceutical Distribution 2012
18 - 19 September, 2012, Amsterdam, The Netherlands
Global: GS1 Portugal to host the upcoming Global GS1 Healthcare Conference 23-25 October 2012

22nd Global GS1 Healthcare Conference
23-25 October 2012

Invitation to Lisbon, Portugal