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Public telecommunication network - Technical requirements of telemedicine system

公众电信网 远程医疗系统技术要求

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Foreword

This document is in accordance with the provisions of GB/T 1.1-2020 "Guidelines for Standardization Work Part

1.Structure and Drafting Rules of Standardization Documents" drafted. Please note that some content of this document may be patented. The issuing agency of this document assumes no responsibility for identifying patents. This document is proposed by the Ministry of Industry and Information Technology of the People's Republic of China. This document is under the jurisdiction of the National Communication Standardization Technical Committee (SAC/TC485). This document is drafted by: China Academy of Information and Communications Technology, China United Network Communications Group Co., Ltd., Potevio Information Technology Research Institute Co., Ltd., Peking University, Peking University People's Hospital, Chinese People's Liberation Army General Hospital, ZTE Corporation, Huawei Technologies Co., Ltd. company. The main drafters of this document. Du Jiatong, Jia Xueqin, Liu Jingwen, Huang Anpeng, Deng Shizhou, Li Mei, Yang Kun, Gao Linyi. Technical requirements for telemedicine system of public telecommunication network

1 Scope

GB/Z 41820-2022 is the Chinese national standard on public telecommunication network - technical requirements of telemedicine system, in the field of information technology. The /Z suffix marks it as a guiding technical document: it does not prescribe requirements that can be certified against, but sets out the technique, the method or the state of the art that the standards bodies recommend following. It was issued on 14 October 2022 by the State Administration for Market Regulation; Standardization Administration of China. As a guiding technical document it carries no separate date of entry into force: it applies from publication. Classification: ICS 35.240.80, CCS L 67. This page is published from the official record of the standard held by the Chinese standards administration: the identification, the dates, the classification and the issuing body are taken from there. The clause text, the tables and the numeric limits are in the document itself, which is delivered complete in English translation.

This document proposes the network architecture of the telemedicine system, and gives the

technical requirements of the perception layer, network layer and application layer. This document applies to telemedicine systems in a web-based environment.

2 Normative references

There are no normative references in this document.

3 Terms and Definitions

The following terms and definitions apply to this document.

3.1 The telemedicine system is used between medical institutions and online interaction is used to analyze patients, their medical history, and examinations, and to complete the disease diagnosis. Diagnose and determine treatment options.

3.2 The telemedicine system is used between medical institutions to analyze patients and their medical history and examinations in an offline way to complete the diagnosis of the disease. and determine treatment options.

3.3 Higher-level medical institutions organize relevant personnel to remotely review the clinical data and images of patients provided by primary medical personnel or medical institutions. The data are analyzed, diagnosed, and the corresponding diagnostic report is given.

3.4 Remote ECGdiagnosis Higher-level medical staff or medical institutions in different places or in the same area conduct remote Electrodiagnosis application and patient clinical data and ECG data are used for diagnosis, and consultation opinions and reports are given.

3.5 remote monitoring Provide remote real-time, continuous and dynamic monitoring services for critically ill patients in primary hospitals and chronic patients at home, so that doctors can Know the patient's condition in time and make targeted diagnosis.

3.6 The higher-level medical experts conduct remote consultation according to the application content of the primary medical and health institutions and the medical record materials provided, and give a consultation Opinion.

3.7 Through remote consultation and video technology, the whole process of real-time recording and remote transmission and sharing of clinical diagnosis or surgical scene images can be used