**Fetch + Push Use Case**

# **Use Case: Fetch + Push**

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| Version | Approval Date |
| 1.0 | March 11, 2021 |

## Overview

The MN EAS “Fetch + Push” use case defines a process where an event, such as a hospital admission or discharge, triggers a query back to the hospital (or related care provider) to fetch additional clinical information (such as a continuity of care document or discharge summary), which is pushed with the alert. This feature improves care coordination during transitions of care and reduces the administrative burden for the querying and responding providers.

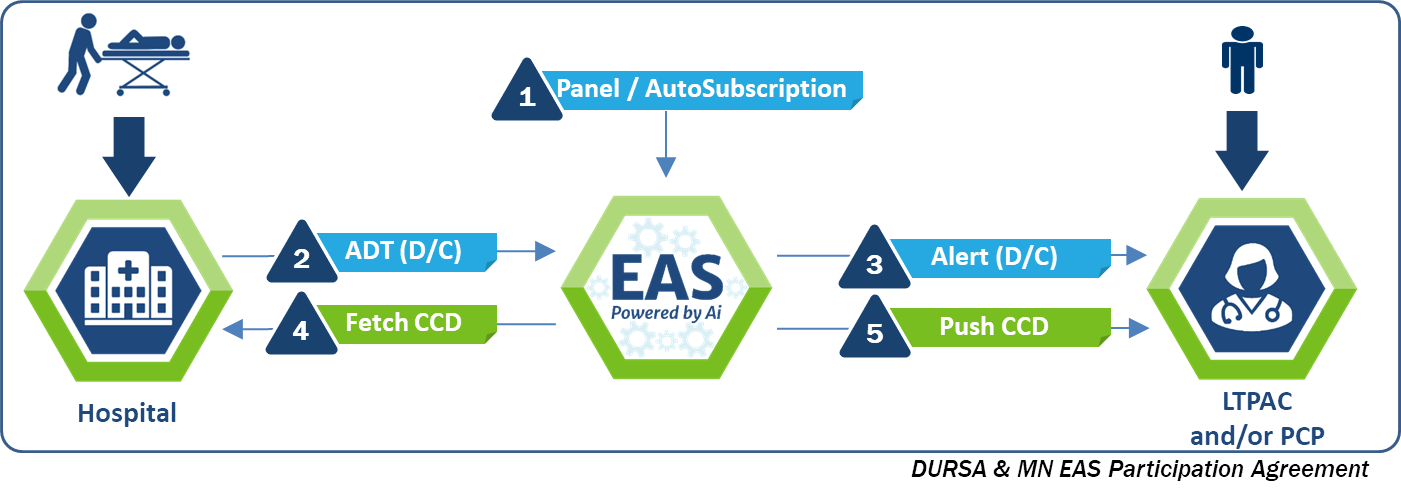
## Permitted Purposes

The permitted purpose for this use case is Treatment as permitted by Applicable Law.

## Use Case Description

The following steps correspond to the diagram below.

1. Pre-conditions
   1. MN EAS Participants are also members of a national network (e.g. eHealth Exchange).
   2. Care Team members, with patient consent, can subscribe for attributed patient.
2. Triggers
   1. A hospital discharge (D/C) can be the trigger for a D/C alert and query for a D/C summary.
   2. A hospital or LTPAC admission can be a trigger for a query of providers for historical data.
3. Alert
   1. An alert is generated if there’s a patient match between the trigger event and panel.
4. Fetch
   1. Given a subscribed event, and MN EAS directory information, a set of queries are triggered to fetch clinical data over the national networks (Patient Discovery, Query for Documents, Retrieve Documents). Once retrieved, the clinical data can be kept in HL7 CDA XML format, or transformed into a human-readable HTML document using a style-sheet.
5. Push
   1. Similar to the alert, the clinical data are pushed to the subscriber, in the preferred format (XML or HTML) and transport mechanism (HL7 MLLP, sFTP, Direct, or via other secure webservice mechanisms).



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