

Activity Report of Asia-Pacific Medical Network Project in Kyushu University Hospital : Vol.3

Shimizu, Shuji
Kyushu University Hospital

Nakashima, Naoki
Kyushu University Hospital

<https://doi.org/10.15017/8304>

出版情報 : 「超高速ネットワークを利用したアジア遠隔医療プロジェクト」 TEMDEC活動報告. 3, pp.1-144, 2007-04. AQUA事務局

バージョン :

権利関係 :

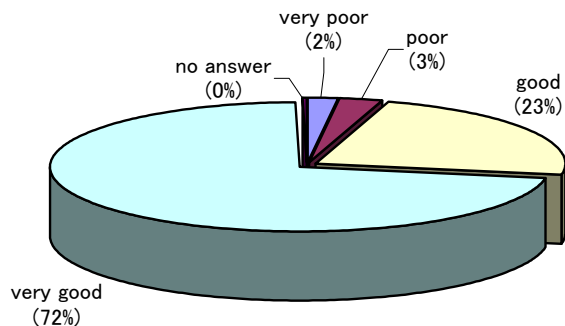
4) Results of questionnaires

#60 The 94th Annual Meeting of the Japanese Urological Association 2006.4.13

(1) About the quality of teleconference (Select one.)

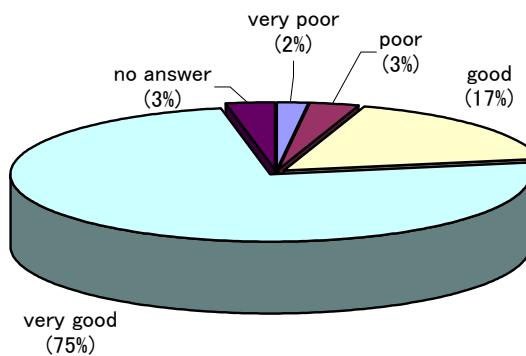
◆ Quality of moving image

very poor	8
poor	11
good	95
very good	295
no answer	1



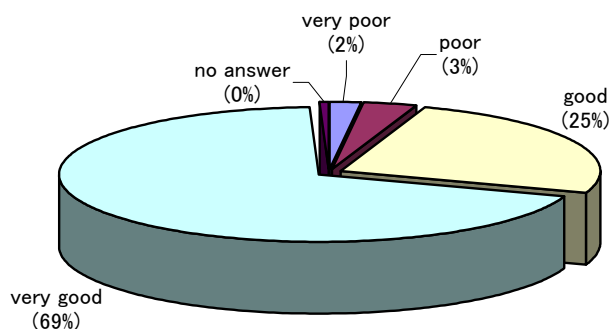
◆ Quality of voice

very poor	8
poor	12
good	71
very good	307
no answer	12



(2) About the quality of live surgery (Select one.)

very poor	8
poor	14
good	102
very good	284
no answer	2

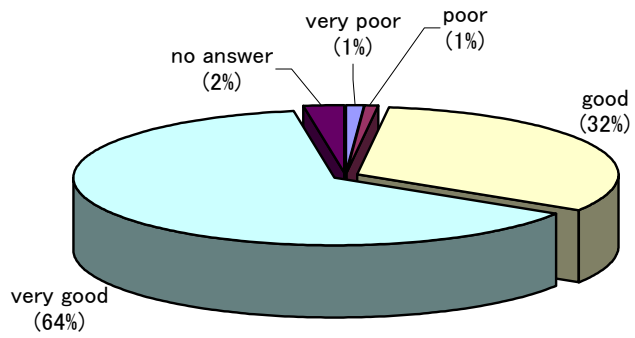


4) Results of questionnaires

(3) About the session of live surgery (Select one.)

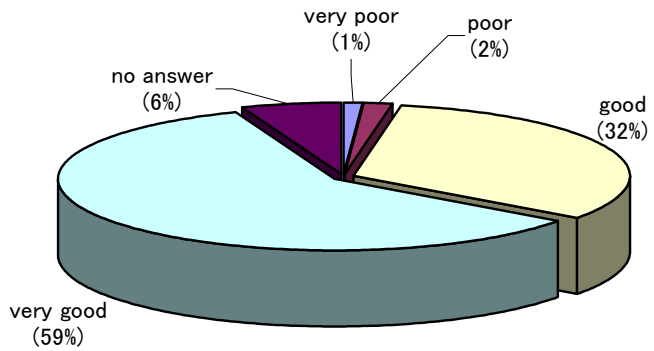
◆ Theme

very poor	4
poor	4
good	131
very good	261
no answer	10



◆ Contents

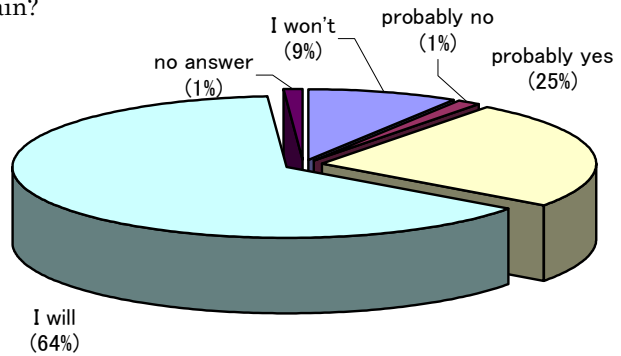
very poor	4
poor	7
good	133
very good	242
no answer	24



(4) Your interest in international live surgery (Select one.)

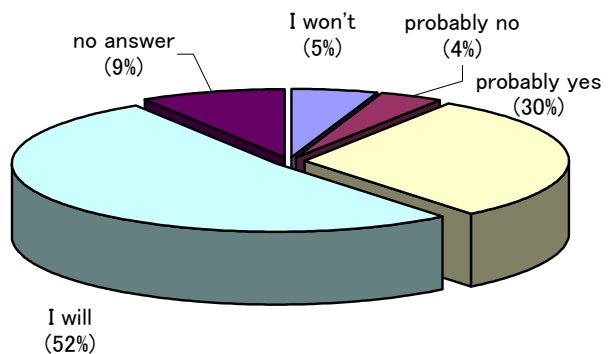
◆ Will you attend the live surgery session again?

I won't	36
probably no	6
probably yes	101
I will	262
no answer	5



◆ If you plan a session, would you like to have a teleconference like this session?

I won't	22
probably no	16
probably yes	123
I will	212
no answer	37



(5) If you found any problems in the teleconference, please write any comments you have.

◆ System performance

- Listening was strenuous because of sound delays.
- It would be better yet if there could be two monitors; one showing the operation room and the other one showing the peritoneum.
- The sound was sometimes hard to hear.
- The colours didn't show well. (Red didn't come out and it was a little yellowish). The monitor's definition was rather bad.
- The image was good, but the operation room being rather dark, the staff didn't show well.
- The images from the endoscope were great, but I wish the overall image quality (such as outside of the operative field) were better.

◆ Procedure of the teleconference, etc.

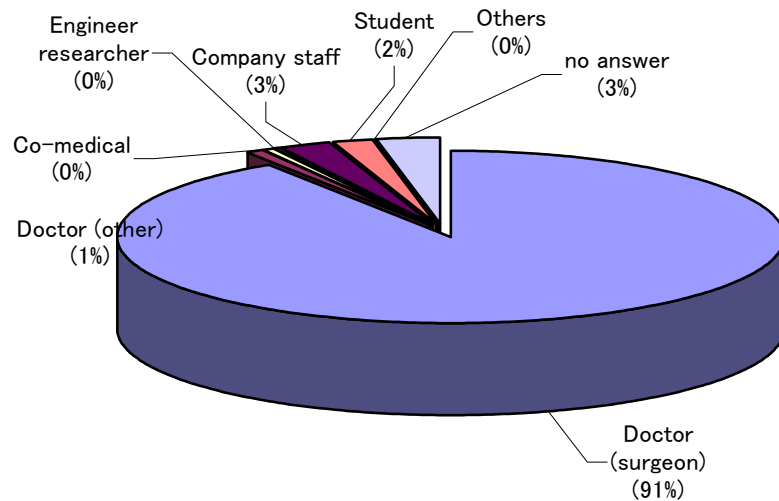
- I'm concerned that this type of operation might place unnecessary burden on patients.
- It was good that there weren't any noise problems or fuzzy images.
- It would be much better if there could be a simultaneous translator or someone explaining what is happening on the spot.
- It is a pity that Dr. Gill, the operator, couldn't make out of what was said to him from Fukuoka.
- I learned a lot from this experience. The image was excellent!
- The discussion shouldn't take place between the chairman and the audience. The flow of the discussion would be much smoother if 4 or 5 specialists were selected to represent the audience.
- I wish this type of operation were done in Japan too.
- I wish the time could be extended.
- It was not interactive.
- I don't really see the purpose of showing this live.
- There are no major differences from videos generally shown at lectures. I don't really see the necessity of showing it live.
- Excellent. Response to the operator's directions in English was rather slow.

(6) Please write down any possible programs suitable for the teleconference.

- If the operation is shown live, why not do it in Japan?
- Would it be possible to have a program whereby a doctor, who hasn't been certified yet but has a certain level of skills, performs a live operation while receiving guidance from the panels? (It could be the Japanese Society of Endourology and ESWL).
- Operation for T2 renal cancer (laparoscopic surgery).
- It would be nice if the conference was made into a video or a DVD.
- RRP, TUKP
- Donor nephrectomy and pyeloplasty
- Total prostatectomy and total nephroureterectomy with PLES (portless endoscopic surgery)
- I would like to see the system connected with the States or Europe.
- I would like to see operations using the latest technology and cutting-edge equipment.
- Total cystectomy and urinary diversion.
- The same type of surgery is good. (Especially laparoscopic surgeries are good since the operative field can be clearly seen.)
- I also would like to see a retroperitoneal approach.

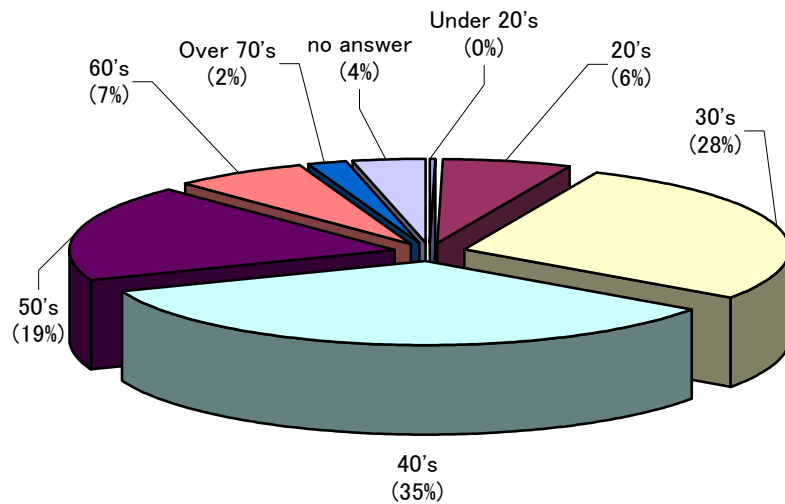
(7) What is your occupation?

Doctor (surgeon)	372
Doctor (other)	4
Co-medical	2
Engineer researcher	1
Company staff	11
Student	7
Others	1
no answer	12



(8) Which is your generation?

Under 20's	1
20's	26
30's	115
40's	142
50's	76
60's	27
Over 70's	8
no answer	15



#77 ELSA2006 in Seoul: Live Demonstration 2006.10.18-19

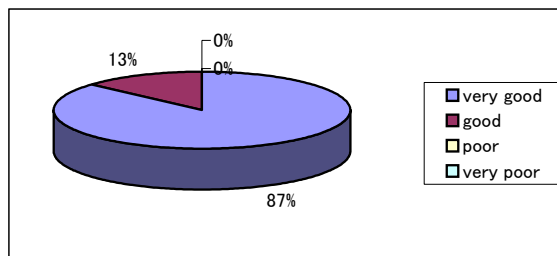
ELSA 2006

laparoscopic surgery

18-Oct

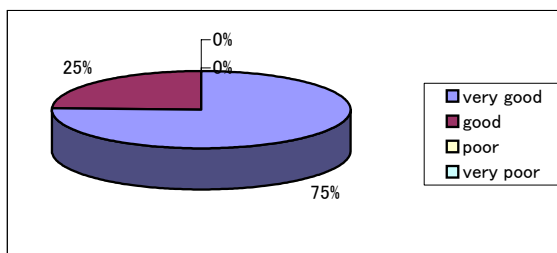
1. About the quality of live surgery

Answer	#
very good	46
good	7
poor	0
very poor	0



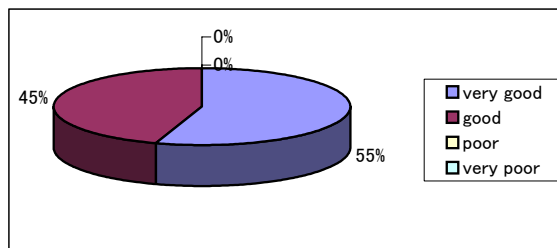
2. About the quality of teleconference image

Answer	#
very good	40
good	13
poor	0
very poor	0



voice

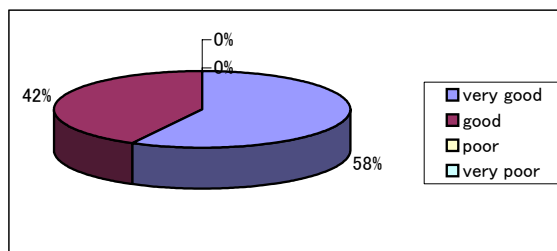
Answer	#
very good	27
good	22
poor	0
very poor	0



3. About the session of live surgery

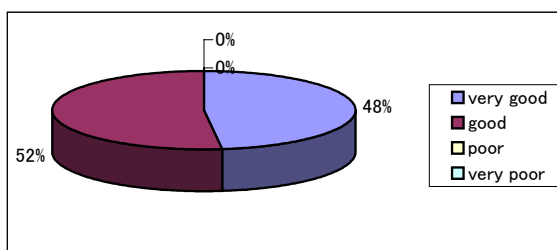
Theme

Answer	#
very good	30
good	22
poor	0
very poor	0



Contents

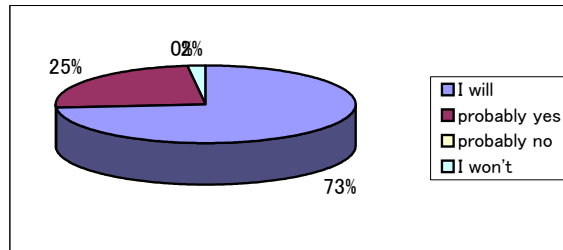
Answer	#
very good	23
good	25
poor	0
very poor	0



4. Your interest in international live surgery

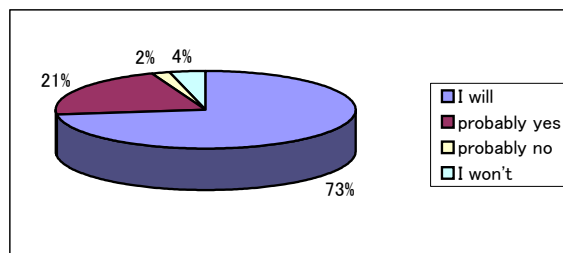
Will you attend the live surgery session again?

Answer	#
I will	39
probably yes	13
probably no	0
I won't	1



If you plan a session, would you like to have a teleconference like this session?

Answer	#
I will	38
probably yes	11
probably no	1
I won't	2



5. If you found any problems in the teleconference, please write any comments you have.

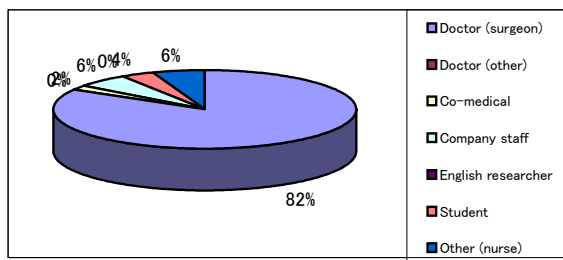
- Excellent arrangement
- Excellent
- It was good, but it would be better if I can see the operator's posture and the endoscopic camera on the same screen. Then, I can see how the operator manipulates the devices.

6. Please write down any possible programs suitable for the teleconference.

- GB Cancer Surgery
- Endoscopic Surgery
- Lap colon resection(for exasample sigmoidectomy)
- Thoracic Surgery Lung resection

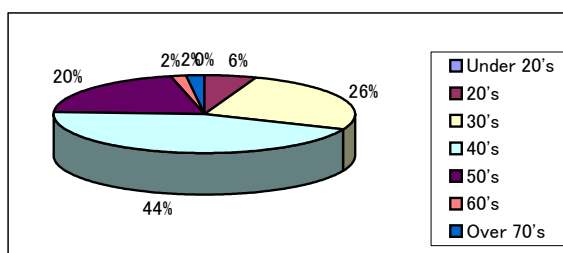
7. What is your occupation?

Answer	#
Doctor (surgeon)	45
Doctor (other)	0
Co-medical	1
Company staff	3
English researcher	0
Student	2
Other (nurse)	3



8. Which is your generation?

Answer	#
Under 20's	0
20's	3
30's	14
40's	24
50's	11
60's	1
Over 70's	1



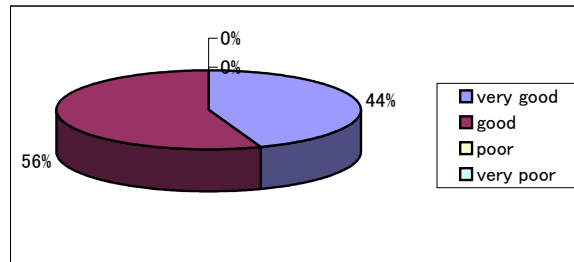
ELSA 2006

colon surgery Live

19-Oct

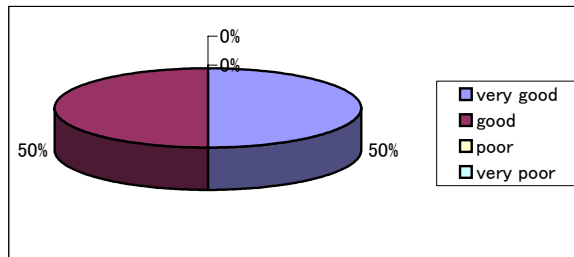
1. About the quality of live surgery

Answer	#
very good	4
good	5
poor	0
very poor	0



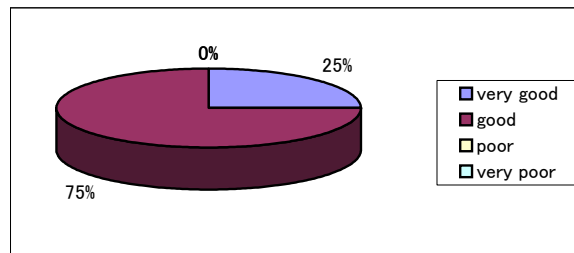
2. About the quality of teleconference image

Answer	#
very good	4
good	4
poor	0
very poor	0



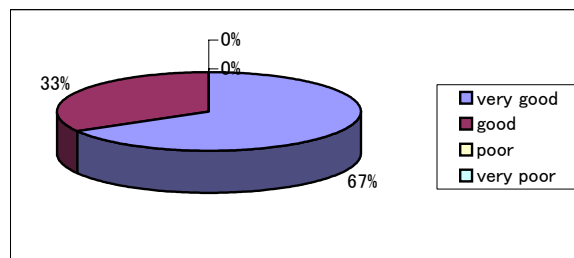
voice

Answer	#
very good	2
good	6
poor	0
very poor	0



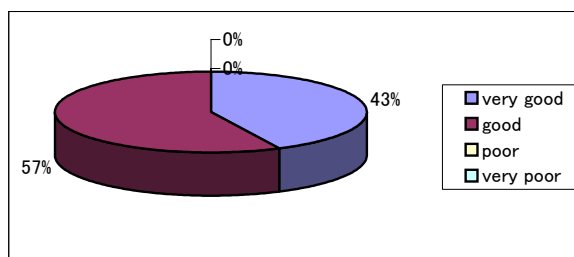
3. About the session of live surgery Theme

Answer	#
very good	6
good	3
poor	0
very poor	0



Contents

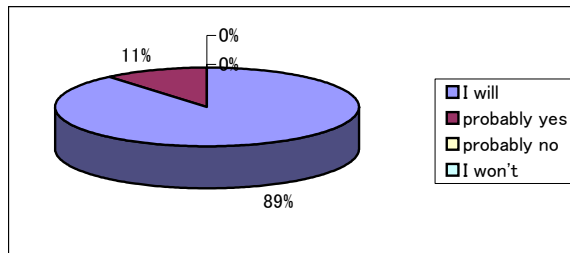
Answer	#
very good	3
good	4
poor	0
very poor	0



4. Your interest in international live surgery

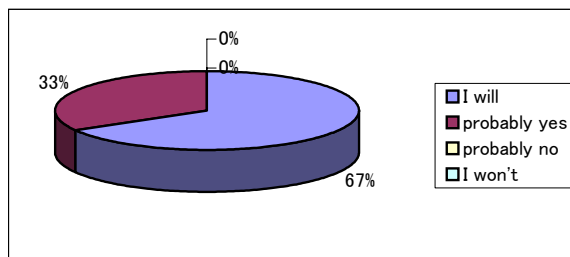
Will you attend the live surgery session again?

Answer	#
I will	8
probably yes	1
probably no	0
I won't	0



If you plan a session, would you like to have a teleconference like this session?

Answer	#
I will	6
probably yes	3
probably no	0
I won't	0



5. If you found any problems in the teleconference, please write any comments you have.

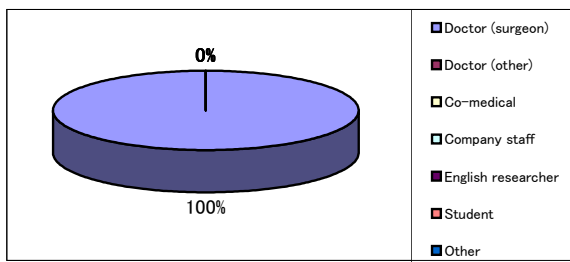
- particularly for taiwan
- Image from taiwan not as clear as that from Korea.
- There is quite time delay to get voice data.
- There may be some limitation to transfer moving image between two countries.
- Quality of video from distance

6. Please write down any possible programs suitable for the teleconference.

- Robotic Surgery

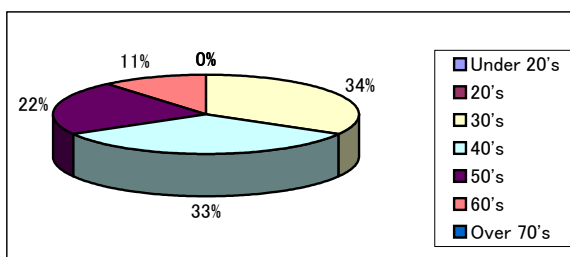
7. What is your occupation?

Answer	#
Doctor (surgeon)	9
Doctor (other)	0
Co-medical	0
Company staff	0
English researcher	0
Student	0
Other	0



8. Which is your generation?

Answer	#
Under 20's	0
20's	0
30's	3
40's	3
50's	2
60's	1
Over 70's	0



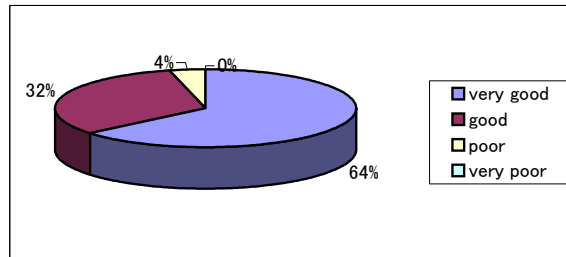
ELSA 2006

gastric surgery Live

20-Oct

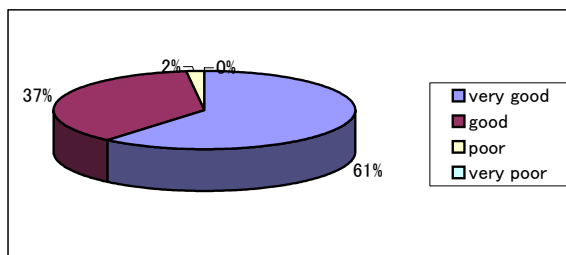
1. About the quality of live surgery

Answer	#
very good	32
good	16
poor	2
very poor	0



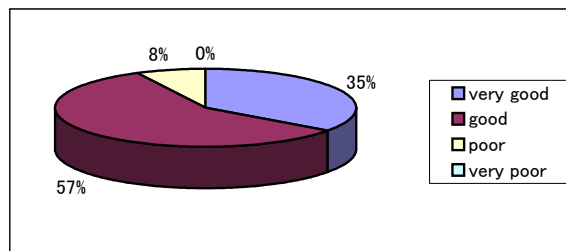
2. About the quality of teleconference image

Answer	#
very good	30
good	18
poor	1
very poor	0



voice

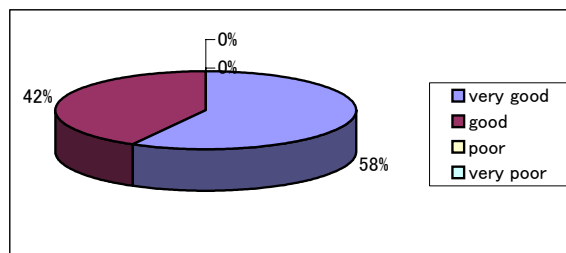
Answer	#
very good	14
good	23
poor	3
very poor	0



3. About the session of live surgery

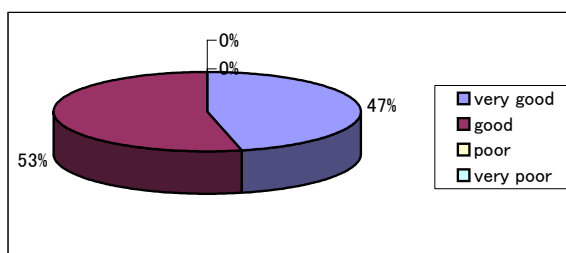
Theme

Answer	#
very good	29
good	21
poor	0
very poor	0



Contents

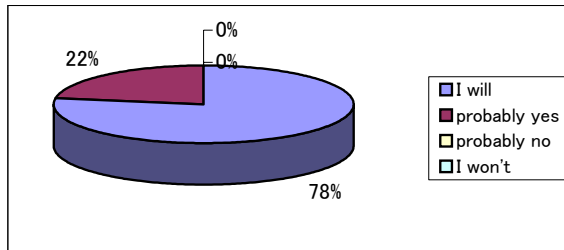
Answer	#
very good	20
good	23
poor	0
very poor	0



4. Your interest in international live surgery

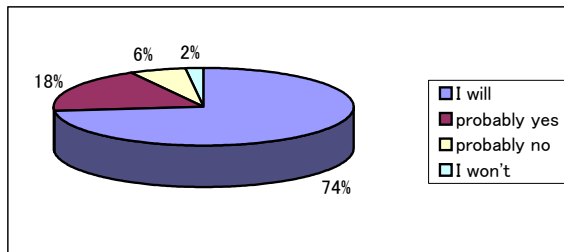
Will you attend the live surgery session again?

Answer	#
I will	38
probably yes	11
probably no	0
I won't	0



If you plan a session, would you like to have a teleconference like this session?

Answer	#
I will	36
probably yes	9
probably no	3
I won't	1

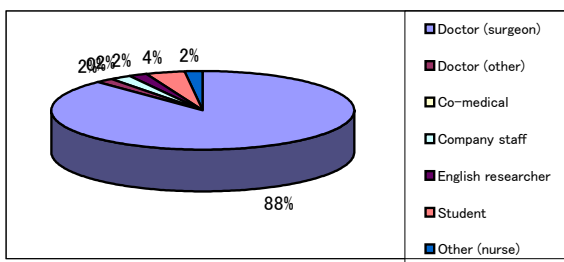


5. If you found any problems in the teleconference, please write any comments you have.

6. Please write down any possible programs suitable for the teleconference.

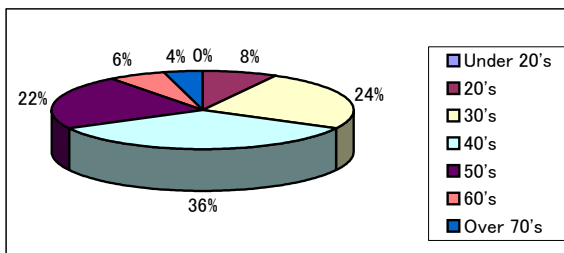
7. What is your occupation?

Answer	#
Doctor (surgeon)	43
Doctor (other)	1
Co-medical	0
Company staff	1
English researcher	1
Student	2
Other (nurse)	1



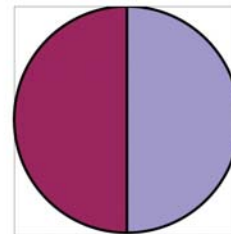
8. Which is your generation?

Answer	#
Under 20's	0
20's	4
30's	12
40's	17
50's	11
60's	3
Over 70's	2



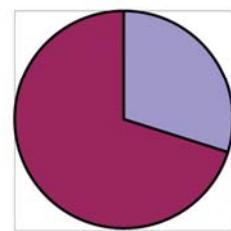
APAN-Meeting in Manila – Jan.24, 2007 (1/5)

◆ About the quality of moving image
- *Conference image*



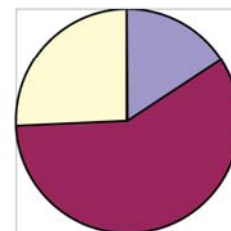
16-16-0-0

◆ About the quality of moving image
- *Slide image*



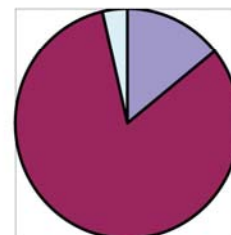
9-21-0-0

◆ About the quality of sound
- *Quality of voice*



5-18-8-0

◆ About the quality of sound
- *Sound of delay*



4-23-0-1

Image, Voice, Theme, Contents

□ = Verv poor

□ = Poor

■ = Good

■ = Verv aood

Delay

□ = Verv small

□ = Small

■ = Bia

■ = Verv bia

Complexity

□ = Verv complicated

□ = Complicated

■ = Simple

■ = Verv simple

Preparation

□ = Verv difficult

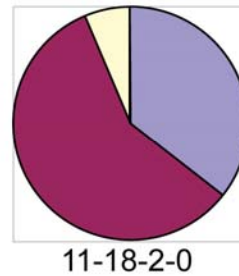
□ = Difficult

■ = Easv

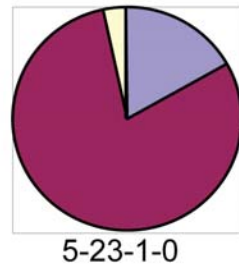
■ = Verv easv

APAN-Meeting in Manila – Jan.24, 2007 (2/5)

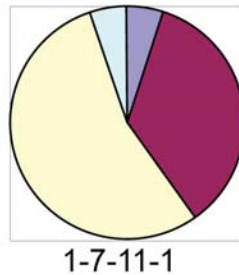
◆ About the problem
- Theme



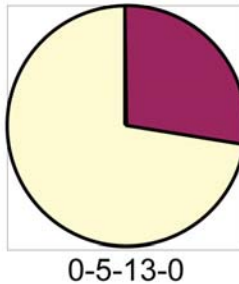
◆ About the problem
- Contents



◆ About the system set-up
(For engineers)
- Complexity



◆ About the system set-up
(For engineers)
- Preparation



Image, Voice, Theme, Contents

□ = Very poor □ = Poor □ = Good □ = Very good

Delay

□ = Very small □ = Small □ = Big □ = Very big

Complexity

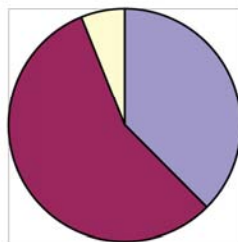
□ = Very complicated □ = Complicated □ = Simple □ = Very simple

Preparation

□ = Very difficult □ = Difficult □ = Easy □ = Very easy

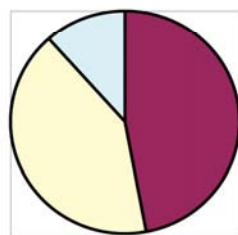
APAN-Meeting in Manila – Jan.24, 2007 (3/5)

◆ About necessary equipments
(For engineers)
- Availability



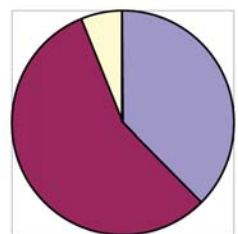
2-5-11-1

◆ About necessary equipments
(For engineers)
- Cost



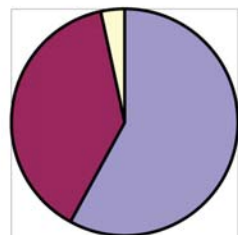
0-8-7-2

◆ Will you attend the session of infectious diseases next time again?



12-18-2-0

◆ Would you like to use this broadband technology actively in the future?



18-12-1-0

Availability

- | | | | |
|------------------|---------------|----------------|--------------|
| = Very difficult | = Difficult | = Easy | = Very easy |
| = Very expens | = Expensive | = Cheap | = Very cheap |
| = I won't | = Probably no | = Probably yes | = I will |

APAN-Meeting in Manila – Jan.24, 2007 (4/5)

◆If you found any problems in the teleconference, please write any comments you have.

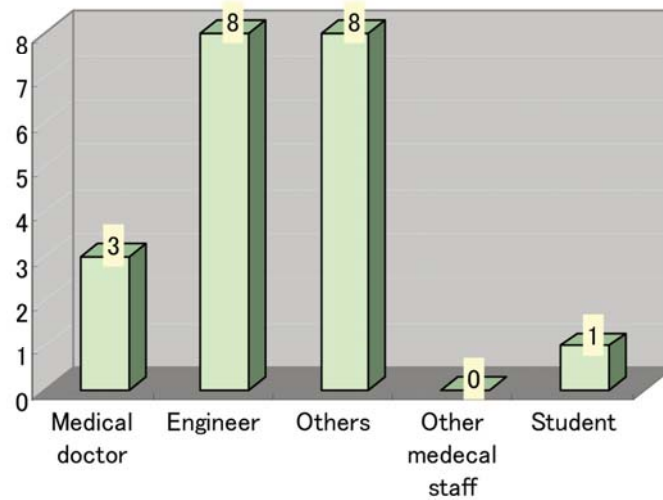
- Should select good topics from each site and make a good program with multimedia data.
- Much better than the last 10-station teleconference.
- Sound problems to be improved. Noise at Indonesia. Echo canceling.
- I have a problem getting NTSC camera, since this mode is not standard in our country. And this is my first experience's setup
- video conference using DVTS and I still have lack information about audio (loop back noise)problem.
- We experienced audio problems from Vietnam and Indonesia.

◆Please write down any possible programs suitable for the medical teleconference.

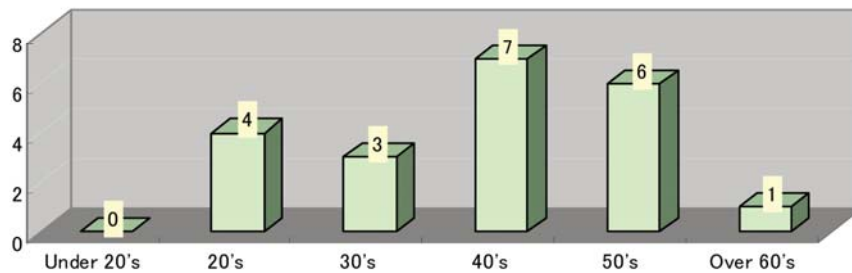
- Protein conformational disorders.
- I am an engineer and I thinks it is better if you ask this matter to a doctor.
- Has noise & loop back audio from Vietnam & Indonesia.

APAN-Meeting in Manila – Jan.24, 2007 (5/5)

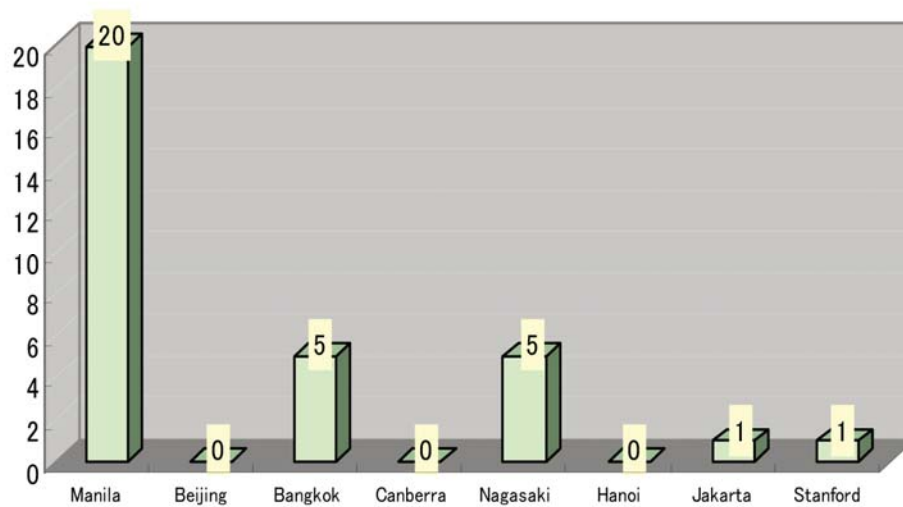
◆What is your occupation?



◆Which is your generation?



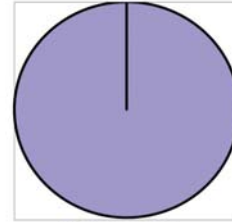
◆Which station did you attend?



#84 The 23rd APAN Meeting - Live Demonstration I & II 2007.1.25

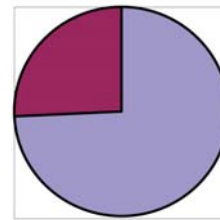
APAN-Meeting in Manila – Jan.25, 2007 (1/5)

◆ About the quality of moving image
- *Conference image*



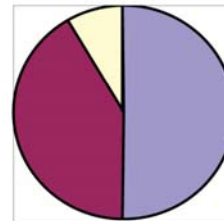
34-0-0-0

◆ About the quality of moving image
- *Slide image*



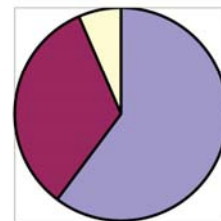
18-15-3-0

◆ About the quality of sound
- *Quality of voice*



23-8-0-0

◆ About the quality of sound
- *Sound of delay*



18-10-2-0

Image, Voice, Theme, Contents

□ = Very poor

□ = Poor

■ = Good

■ = Very good

Delay

□ = Very small

□ = Small

■ = Big

■ = Very big

Complexity

□ = Very complicated

□ = Complicated

■ = Simple

■ = Very simple

Preparation

□ = Very difficult

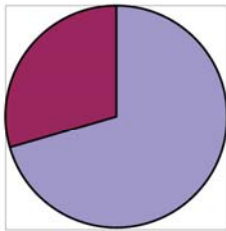
□ = Difficult

■ = Easy

■ = Very easy

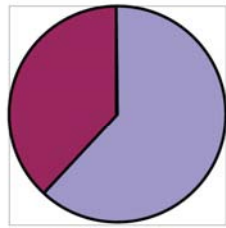
APAN-Meeting in Manila – Jan.25, 2007 (2/5)

◆ About the problem
 - Theme



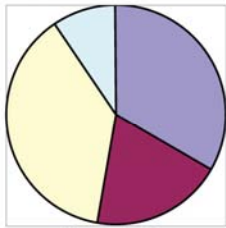
24-10-0-0

◆ About the problem
 - Contents



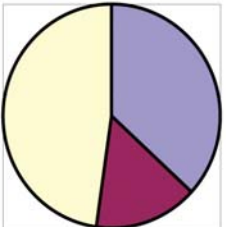
19-12-0-0

◆ About the system set-up
 (For engineers)
 - Complexity



7-4-8-2

◆ About the system set-up
 (For engineers)
 - Preparation



7-3-9-0

Image, Voice, Theme, Contents

= Very poor
 = Poor
 = Good
 = Very good

Delay

= Very small
 = Small
 = Big
 = Very big

Complexity

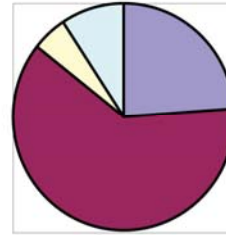
= Very complicated
 = Complicated
 = Simple
 = Very simple

Preparation

= Very difficult
 = Difficult
 = Easy
 = Very easy

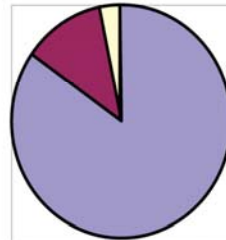
APAN-Meeting in Manila – Jan.25, 2007 (3/5)

- ◆ About necessary equipments
(For engineers)
- *Availability*



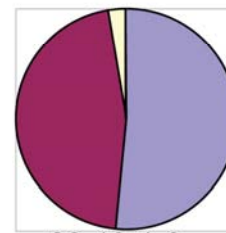
5-13-1-2

- ◆ About necessary equipments
(For engineers)
- *Cost*



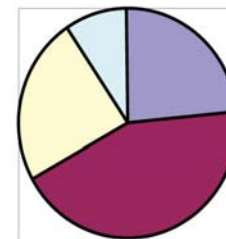
5-9-5-2

- ◆ Will you attend the session of infectious diseases next time again?



20-18-1-0

- ◆ Would you like to use this broadband technology actively in the future?



28-4-1-0

Availability

	= Very difficult	= Difficult	= Easy	= Very easy
Cost	= Very expens	= Expensive	= Cheap	= Very cheap
	= I won't	= Probably no	= Probably yes	= I will

APAN-Meeting in Manila – Jan.25, 2007 (4/5)

◆ **If you found any problems in the teleconference, please write any comments you have.**

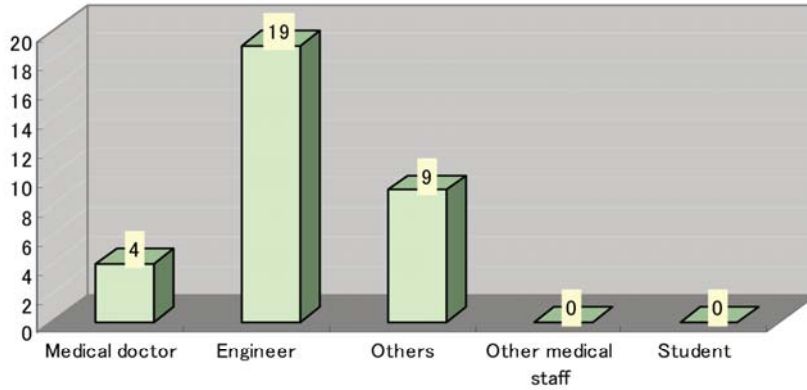
- Video conversation, NTSC-PAL.
- The engineer don't like the content. That the reason I want to be engineer or not doctor.
- The picture are fine but after seeing them my stomach feels not fine.
- NTSC-PAL compatibility. Only quality seems from India.

◆ **Please write down any possible programs suitable for the medical teleconference.**

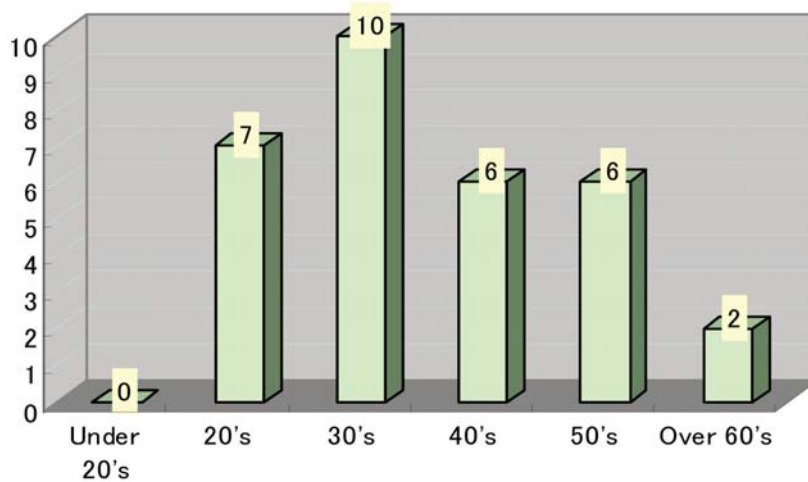
- Primary care/Preventive care for tele-education and telepsychdgy. make a good program with multimedia data.
- Virtual hands-on for medical student? Medical lectures.

APAN-Meeting in Manila – Jan.25, 2007 (5/5)

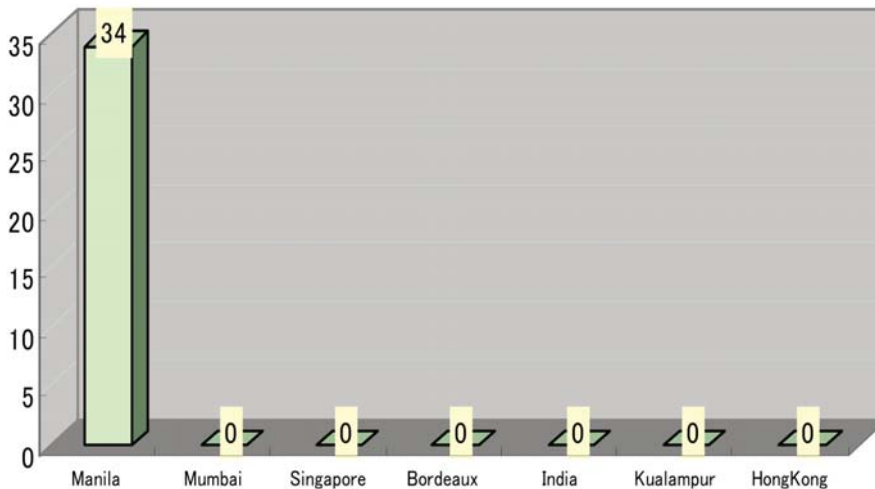
◆What is your occupation?



◆Which is your generation?



◆Which station did you attend?



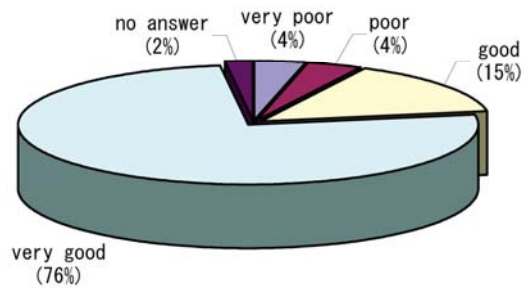
#91 APHPBA Teleconference on endoscopic surgery 2007.3.22

First Biennial congress of the Asian Pacific Hepato Pancreato Biliary Association (APHPBA) 22th ~ 23th Mar.2007

(1) About the quality of teleconference (Select one.)

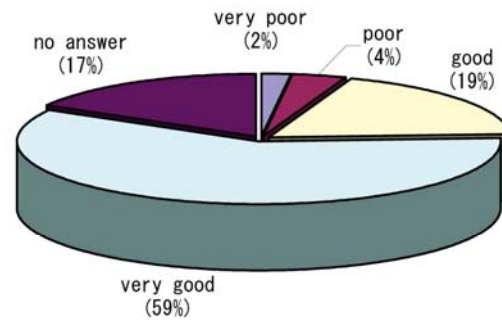
◆ Quality of moving image

very poor	2
poor	2
good	8
very good	41
no answer	1



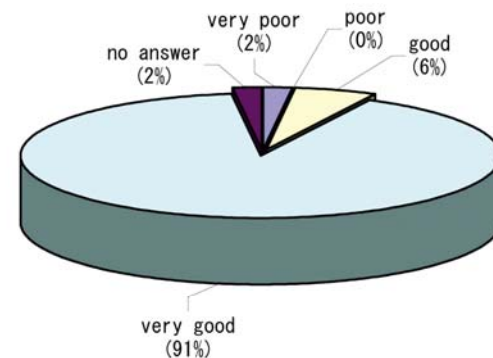
◆ Quality of voice

very poor	1
poor	2
good	10
very good	32
no answer	9



(2) About the quality of live surgery (Select one.)

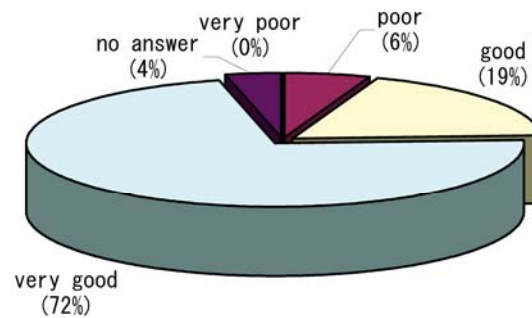
very poor	1
poor	0
good	3
very good	49
no answer	1



(3) About the session of live surgery (Select one.)

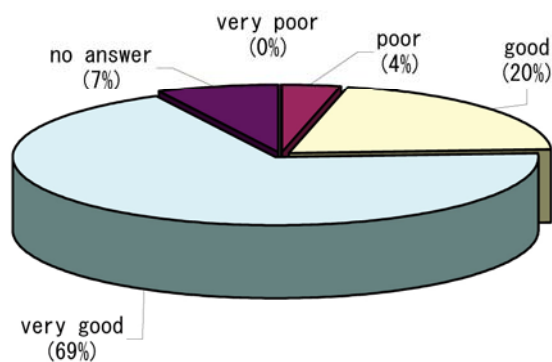
◆ Theme

very poor	0
poor	3
good	10
very good	39
no answer	2



◆ Contents

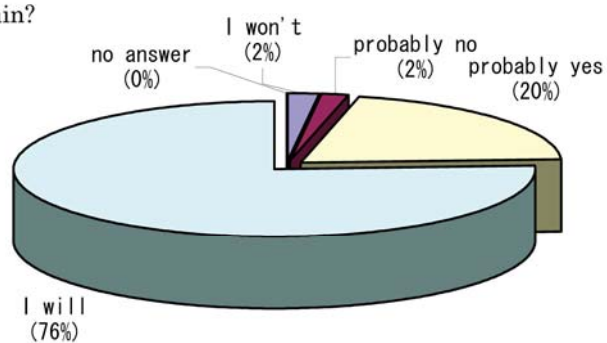
very poor	0
poor	2
good	11
very good	37
no answer	4



(4) Your interest in international live surgery (Select one.)

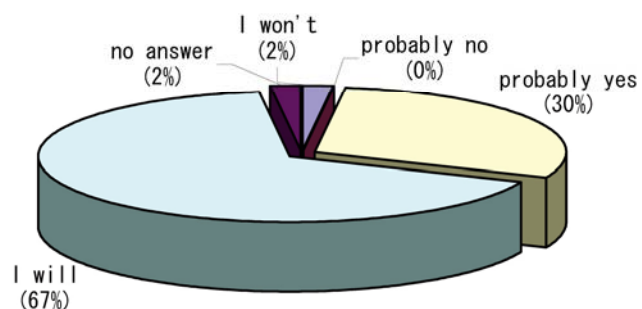
◆ Will you attend the live surgery session again?

I won't	1
probably no	1
probably yes	11
I will	41
no answer	0



◆ If you plan a session, would you like to have a teleconference like this session?

I won't	1
probably no	0
probably yes	16
I will	36
no answer	1



(5) If you found any problems in the teleconference, please write any comments you have.

◆ System performance

- Excellent!
- Hi-vision systems are too expensive and HP recorders are not commonly used yet.
- I didn' t get the background of the operation. I think it would be better to show the background explanation of the operation on the side or at the bottom of the main monitor.

◆ Procedure of the teleconference, etc.

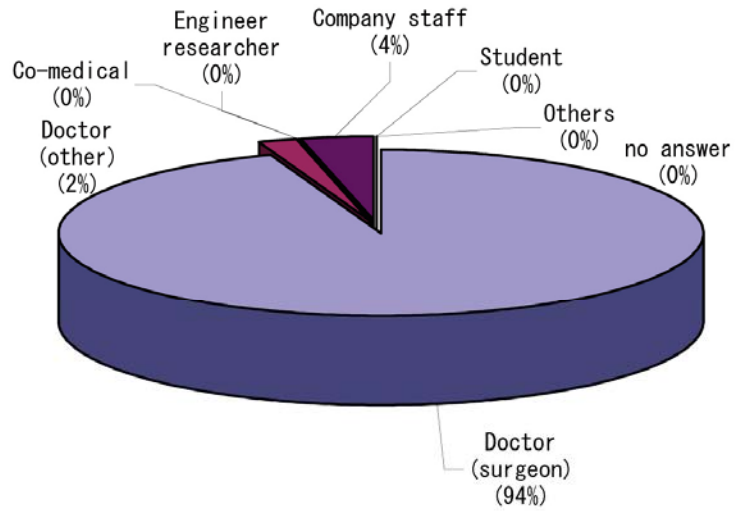
- The dialogues between the chairman and the operator weren' t smooth.
- The patient' s safety should be the primary concern. Nevertheless, time was wasted unnecessarily before the operation actually took place.
- Discussions should be arranged so that the operator' s concentration is not disturbed.
- Operators cannot concentrate on the operation even when bleeding occurs.
- It' s difficult for operators to keep focused on the operation since they have to operate while simultaneously taking part in lectures or discussions. (However, it is really interesting for the audience.)
- Since massive bleeding occurred, the content of the discussion was influenced by it.

(6) Please write down any possible programs suitable for the teleconference.

- The fact that the unexpected incidents actually occurred added to the realism of the experience.
- Any type of laparoscopic surgery would be good.
- I would like the 2nd APHPBA to be held in Bangkok in 2009.
- An easy & typical case would be good for a beginner.

(7) What is your occupation?

Doctor (surgeon)	51
Doctor (other)	1
Co-medical	0
Engineer researcher	0
Company staff	2
Student	0
Others	0
no answer	0



(8) Which is your generation?

Under 20's	0
20's	6
30's	20
40's	19
50's	5
60's	4
Over 70's	0
no answer	0

