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Potential (Theoretical) Utilities of Telepathology for the Air Force

- Quality Assurance
- Intraoperative consultations
- Case load sharing (already used in Radiology)
- Continuing Medical Education
- Field Operations ("Readiness")
Field Operations

• Probably the most appealing of uses to the military
• Preserves troops in deployed locations in Iraq with other uses and potential during humanitarian efforts
• Savings to the military of resources, troops
  – Already in current use by the Army
  – Active consultations are reviewed by the AFIP in the form of whole slide imaging
  – Improved efficiency of medical care
History of Telepathology in the Air Force

- Association with UPMC, IMITS
- Pioneering work by Col. Robert Zalme
- Purchase of Trestle Systems
- Some Research Participation with University of Pittsburgh Medical Center
- Recent Approval for Activation of Trestle Systems
History of Telepathology in the Air Force, Continued

- Large efforts by small numbers
- Difficulty obtaining Air Force pathology-wide consensus for vision or use of telepathology technology
- Need to include a larger number of end-users (pathologists) in planning
- Need to formalize evaluations and recommendations
Formation of AFTAC

- AFTAC (Air Force Telepathology Advisory Council)
- Formed in September 2007; charter pending
- Members: Interested Air Force Pathologists
- Primary Goal: Provide Direction and Advice to the Air Force for Implementation of Telepathology Technology
AFTAC Format

- End user evaluation and recommendation system
- Use of official end-user coalition to maximize impact of recommendations
- Voluntary participation to help ensure membership engagement
- Goal: facilitate decision making and evaluation process for telepathology technology
AFTAC Format, continued

• “No strings attached” format, freeing group from external pressure
  – No pressure to follow an external administrative agenda
  – No corporate ties
Primary AFTAC Recommendations

• Implementation and training in the Trestle systems
  – Successful training in the use of Trestle systems in March
  – Implementation of the Trestle systems by June, 2008
• To begin evaluation of the utility of these Trestle systems
• Exploration of other possible telepathology technologies and uses
Conclusion

• Current live evaluation of Trestle systems is just beginning
• AFTAC can facilitate agreements between primary pathologists and consultant participants
• Provide assurance that roles are acceptable and well defined
• Further recommendations will depend largely on the experience of the users
Conclusion Continued

• Telepathology will eventually, in some way, become part of daily practice as technology improves
• AFTAC will shape implementation of technologies within the Air Force
• AFTAC has the potential to guide developers and manufacturers of telepathology technology
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