

Personalized and Regeneration Medicine require a Coagulum-OMICs Model

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Background: In 2017, a program on patient blood management was posted to the National External Quality Assurance Scheme conference for hemostasis and thrombosis. This subsequent coagulum-OMIC framework is a standard for predictive value within personalized and regeneration medicine. An OMIC model is a foresight by the author of this program to achieve OMIC flow. This model sustains the success of Coagulum-OMICs when supported with the ISO 9000 series.

Study: ISO 9001 and 9004 are powerful tools to identify and define good practice in an OMIC model. ISO 9001 is a process based standard and an ideal standard for OMIC interfaces. The greater challenge in haemostasis and thrombosis is the end to end process involves several parts of healthcare under different clinical management or vendor arrangements. The flexibility of ISO 9004 makes it an ideal tool to access Coagulum-OMICs and sustain the success of personalised and regeneration medicine.

Program Development: A strategy for Research, Family, Organ and Acute Coagulum-OMICs commences biphasic policy objectives for genomics as a primary care with viscoelastic science, coagulum and platelet proteomics [Fig. 2]. Model OMIC development, resources, performance review and innovation, become learned. OMIC teams self-assess the Coagulum-OMICs to identify conformity with the model. Regional committees are supported by a joint working group on quality assurance to manage or improve OMICs

Conclusion: A model for blood coagulum-OMICs is a benchmark to sustain excellence in the future of biological systems. The agility of Coagulum-OMICs to transverse primary and secondary care with genomic [pharma] pre-exams and viscoelastic or proteomic exams makes it a perfect learning initiative, selfassessment tool and governance program. The caveat is a need for expertise to

sustain the success of coagulum-OMICs, in situ, with personalised and regeneration medicine.