I'm Mathieu, CTO of **Syadem**.

Syadem is a company dedicated to building digital solutions for vaccination.

# OUR PROJECTS INCLUDE

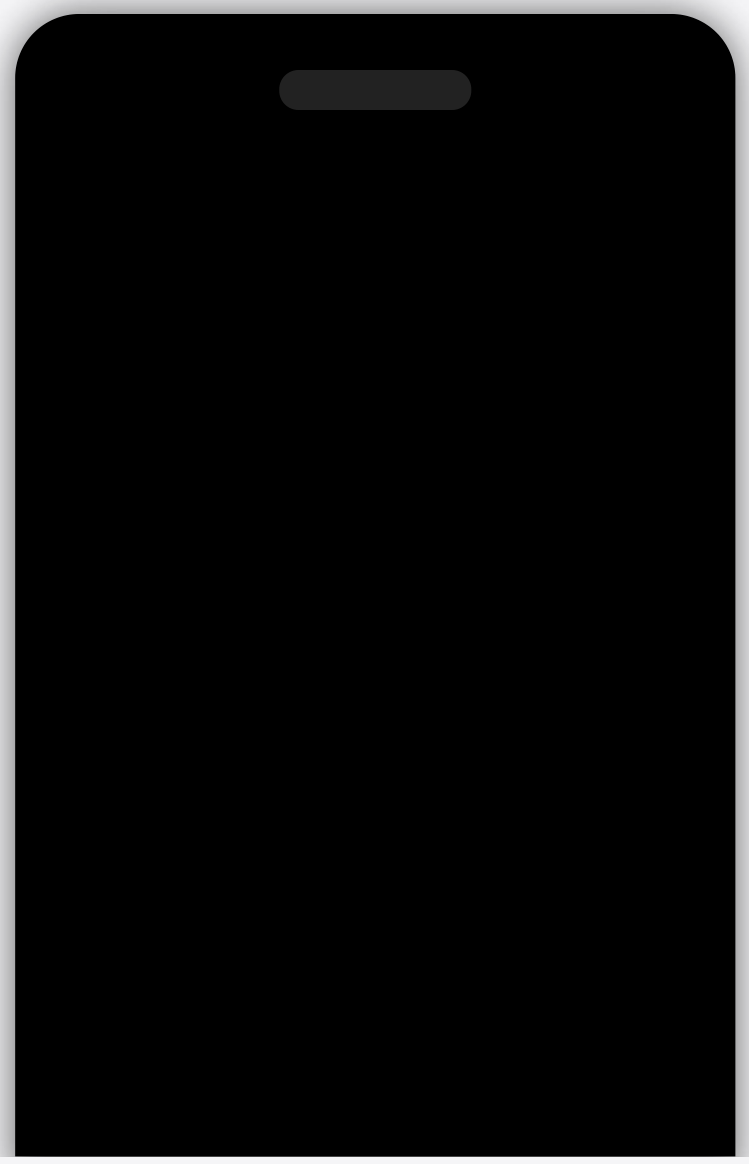
- **Colibri** – Vaccination center software
- **NUVA** – A vaccination nomenclature
- **MesVaccins** – An electronic vaccination record
- **SADV** – A decision support tool for vaccination
- Dashboards for vaccination monitoring
- **Champollion** – Proof of concept for digitizing vaccination booklets

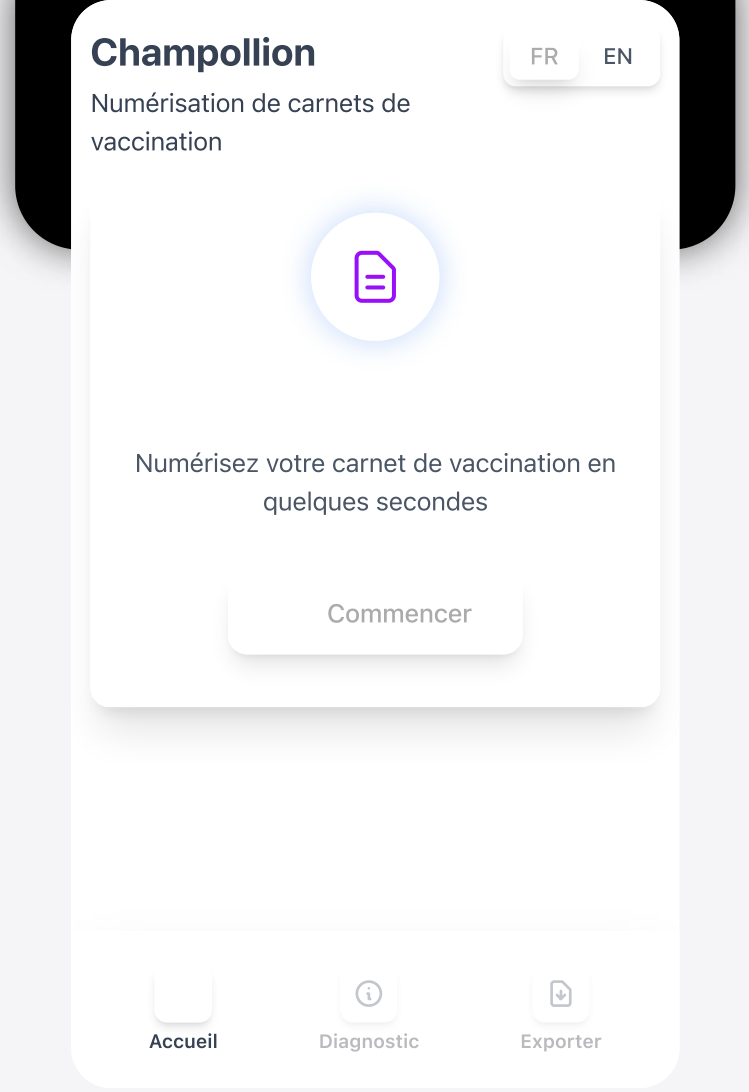
# 1 - A SMALL DEMO

# 2- WHAT IS UNDER THE HOOD?

## 2.1 TOOLS

## 2.2 SIMILARITY SEARCH AND EXAMPLE




Champollion
FR
EN
Numérisation de carnets de vaccination
Numérisez votre carnet de vaccination en quelques secondes
Commencer
Accueil
Diagnostic
Exporter

Nom : MORICEAU Prénoms : Louis

Né(e) le 3 | 1 | 0 | 1 | 2 | 0 | 0 | 3

## Vaccinations antipoliomyélitique antidiphtérique - antitétanique anticoquelucheuse - antihaemophilus - antihépatite B

| Date | Vaccin - Dose - Lot | Signature et cachet du médecin |
|---|---|---|
| 19 JAN 2004 | Infanrix Q | Docteur DOPPELT Evelyne PEDIATRE CONVENTIONNÉE 17, Rue Saint-Benoît 22000 SAINT-BRIEUC 22 1 01949 0 0 1 25 1 |
| 18/02/04 | Pentacoq W1571 | Docteur Lefeure Centre de Vaccination |
| 23 MAR 2004 | Infanrix Q A20CA004A | Docteur DOPPELT Evelyne PEDIATRE CONVENTIONNÉE 17, Rue Saint-Benoît 22000 SAINT-BRIEUC 22 1 01949 0 0 1 25 1 |
| | A20CA274A | |
| 2 12 06 | INFANRIX QUINTA | |
| 2011 | | |



Nom : MORICEAU Prénoms :

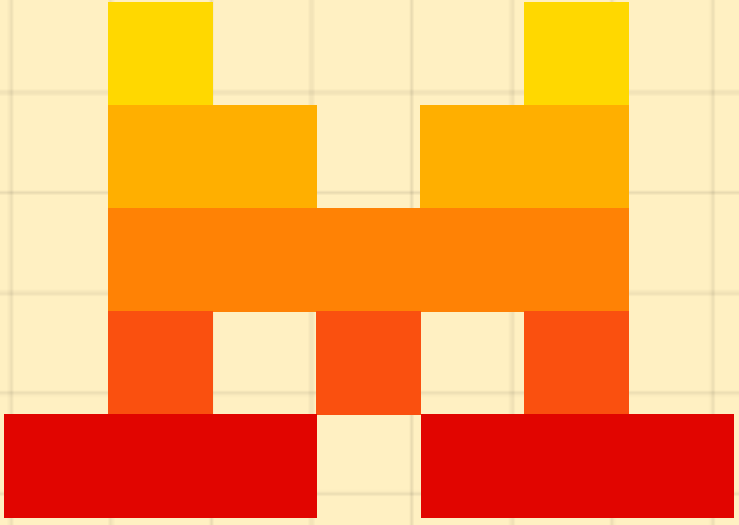
Né(e) le 3 | 1 | 0 | 1 | 2 | 0 | 0 | 3

## Vaccinations antirougeo antirubéolique - antiourli Autres vaccinations

| Date | Vaccin - Dose - Lot | Signature et cachet du médecin |
|---|---|---|
| 11 JUI 2005 | PRIORIX AG9CA135A | Docteur DOPPELT PEDIATRE CONVENTIONNÉE Rue Saint-Benoît SAINT-BRIEUC 22 1 01949 0 0 1 25 1 |

# VLM

## VISION-LANGUAGE MODEL



Our goal is not just to perform OCR.

Traditional OCR methods are not suitable due to the high variability of vaccination documents.

Traditional OCR methods are not suitable due to the high variability of vaccination documents.

cerfa

Nom : .....

Prénom : ..... Né(e) le : ..... (jour / mois / an)

N°12594*01

Certificat de vaccination n°1

## Vaccination antituberculeuse : B.C.G.

| Date | Intradermoréaction prévaccinale à la tuberculine | Lot | Date de lecture | Résultat (En mm d'induration) | Signature et identification du vaccinateur (nom, cachet) |
|---|---|---|---|---|---|
| | | | | | |

| Date | Vaccin | Dose | Lot | Signature et identification du vaccinateur (nom, cachet) |
|---|---|---|---|---|
| | | | | |

## Vaccination contre la diphtérie, le tétanos, la poliomyélite, la coqueluche (*pertussis*), *l'Haemophilus influenzae* b*

| Date | Vaccin | Lot | Signature et identification |
|---|---|---|---|
| 1.9.14 | Infanrix Hexa | A21CC071A | Doc Médecine Générale - Homéopathe |
| 10.10.14 | Infanrix Hexa | A21CC164A | Médecine Générale - Homéopathe |
| 1.6.16 | Infanrix Hexa | A21CC700A | Médecine Générale - Homéopathe |

* En cas d'utilisation d'un vaccin hexavalent, inscrire la valence hépatite B page 92.



## Vaccination contre la diphtérie, le tétanos, la poliomyélite, la coqueluche (*pertussis*), *l'Haemophilus influenzae* b* Rappels

Le 1er rappel est effectué à l'âge de 16-18 mois, tous les cinq ans jusqu'à l'âge de 16-18 ans, puis tous les 10 ans.**

| Date | Vaccin | Lot | Signature et identification du vaccinateur (nom, cachet) |
|---|---|---|---|
| | 21 | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

* en cas d'utilisation d'un vaccin hexavalent, inscrire la valence hépatique B page 92

** voir calendrier vaccinal page 88

Les vaccinations contre la diphtérie, le tétanos, la poliomyélite et la tuberculose (BCG) sont obligatoires. Un certificat de vaccination vous sera demandé lors de l'entrée de votre enfant dans une collectivité (crèche, école...).

**La photocopie de cette double page a valeur de certificat de vaccination.**

Traditional OCR methods are not suitable due to the high variability of vaccination documents.

cerfa

Nom: .....

Prénom: .....

## Vaccinations antipoliomyélitique Antidiphtérique — Antitétanique Anticoquelucheuse

| Date | Vaccin — Dose |
|---|---|
| 28/03/94 | Pentacoq |
| 22/04/94 | Pentacoq |
| 30/05/94 | Pentacoq |
| 2/06/95 | Pentacoq lot K0169 |
| 13/06/2000 | DT Polio |
| 17 VIII 2005 | Infanrix Hexa Lot A21CH0 |
| 4 IX 2010 | Revaxis |
| 25 Juin 2015 2025 | Boostrix Tetra |

Lot: T5235-2 A ut. av.: 05-2001

Lot E0400-4 EXP 03-2012

Lot: AC39B070AM

*Les mentions portées sur cette page ont valeur de certificats de vaccination. A remplir lisiblement et complètement.*





## Vaccinations antirougeoleuse — Antirubéolique Antiourlienne — Antityphoparatyphoïdique Autres vaccinations

| Date | Vaccin — Dose |
|---|---|
| | - ROR vacc 14/18 mois |
| 25 VIII 95 | ROR Lot J0377 |
| 17 Juil 2005 | Infanrix Hexa Lot A21CH0 |
| 12 IX 2005 | Engerix B20 Lot M8AB |
| 1 III 2006 | Engerix B20 Lot AHBV007 |

*Les mentions portées sur cette page ont valeur de certificats de vaccination. A remplir lisiblement et complètement.*

Traditional OCR methods are not suitable due to the high variability of vaccination documents.

N° 12594

# Vaccinations obligatoires

## Vaccination contre la diphtérie, le tétanos, la poliomyélite, la coqueluche (*pertussis*), l'*haemophilus influenzae* b et l'hépatite B*

| Date | Vaccin | Lot | Signature et identification du vaccinateur |
|---|---|---|---|
| 22/11/21 | Hexyon® | Lot T3M062V | Dr I BOUTEILLE-FONTANET Pédiatre 33370 TRESSES 33.1.10312.7 / 10002775913 |
| 27/12/2021 | Hexyon® | Lot T3M495V | |
| 21/9/2022 | Hexyon® Sanofi Pasteur Europe | Lot U3N231V | |

* Si le vaccin contre l'hépatite B est effectué à l'aide d'un vaccin monovalent, le reporter page 100.
Si utilisation d'un vaccin autre que le vaccin hexavalent, préciser le nom du vaccin.

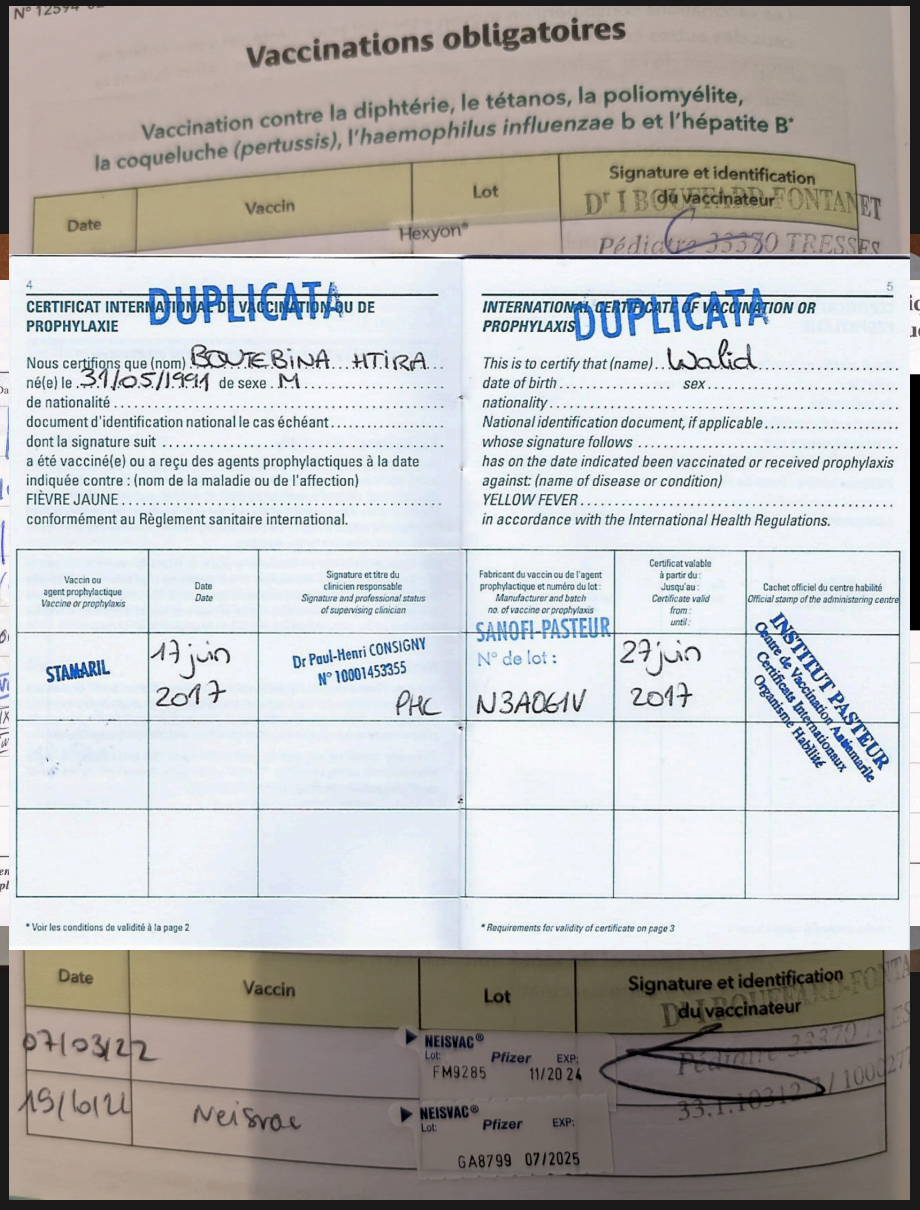
## Vaccination contre les infections à pneumocoque

| Date | Vaccin | Lot | Signature et identification du vaccinateur |
|---|---|---|---|
| 22/11/21 | Prevenar 13® | Lot/EXP EJ3020 07/2023 PAA103288 | Dr I BOUTEILLE-FONTANET Pédiatre 33370 TRESSES |
| 4/1/2022 | Prevenar 13® | Lot/EXP EJ3020 07/2023 PAA103288 | 33.1.10312.7 / 10002775913 |
| 21/9/2022 | Prevenar 13® | Lot FX5964 EXP 03/2024 PAA129373 | |

## Vaccination contre les infections invasives à méningocoque de sérogroupe C

| Date | Vaccin | Lot | Signature et identification du vaccinateur |
|---|---|---|---|
| 07/03/22 | NEISVAC® | Lot: FM9285 Pfizer EXP: 11/2024 | Dr I BOUTEILLE-FONTANET Pédiatre 33370 TRESSES 33.1.10312.7 / 10002775913 |
| 19/6/22 | Neisvac | NEISVAC® Lot: GA8799 Pfizer EXP: 07/2025 | |

Traditional OCR methods are not suitable due to the high variability of vaccination documents.



## Vaccinations obligatoires

Vaccination contre la diphtérie, le tétanos, la poliomyélite, la coqueluche (*pertussis*), l'*haemophilus influenzae* b et l'hépatite B*

| Date | Vaccin | Lot | Signature et identification du vaccinateur |
|---|---|---|---|
| | Hexyon® | | Dr I BOUHEDJA-FONTANET Pédiatre 33370 TRESSES |

4

**CERTIFICAT INTERNATIONAL DE VACCINATION OU DE PROPHYLAXIE**

DUPLICATA

Nous certifions que (nom) BOUTEBINA HTIRA
né(e) le 31/05/1991 de sexe M
de nationalité
document d'identification national le cas échéant
dont la signature suit
a été vacciné(e) ou a reçu des agents prophylactiques à la date indiquée contre : (nom de la maladie ou de l'affection)
FIÈVRE JAUNE
conformément au Règlement sanitaire international.

5

***INTERNATIONAL CERTIFICATE OF VACCINATION OR PROPHYLAXIS***

DUPLICATA

*This is to certify that (name)* Walid
*date of birth* *sex*
*nationality*
*National identification document, if applicable*
*whose signature follows*
*has on the date indicated been vaccinated or received prophylaxis against: (name of disease or condition)*
*YELLOW FEVER*
*in accordance with the International Health Regulations.*

| Vaccin ou agent prophylactique *Vaccine or prophylaxis* | Date *Date* | Signature et titre du clinicien responsable *Signature and professional status of supervising clinician* | Fabricant du vaccin ou de l'agent prophylactique et numéro du lot : *Manufacturer and batch no. of vaccine or prophylaxis* | Certificat valable à partir du : Jusqu'au : *Certificate valid from : until :* | Cachet officiel du centre habilité *Official stamp of the administering centre* |
|---|---|---|---|---|---|
| STAMARIL | 17 juin 2017 | Dr Paul-Henri CONSIGNY N° 10001453355 PHC | SANOFI-PASTEUR N° de lot : N3A061V | 27 juin 2017 | INSTITUT PASTEUR Centre de Vaccinations Internationales Certificats Internationaux Organisme Habilité |
| | | | | | |
| | | | | | |

* Voir les conditions de validité à la page 2

* *Requirements for validity of certificate on page 3*

| Date | Vaccin | Lot | Signature et identification du vaccinateur |
|---|---|---|---|
| 07/03/22 | | NEISVAC® Pfizer EXP: FM9285 11/2024 | |
| 19/6/22 | Neisvac | NEISVAC® Pfizer EXP: GA8799 07/2025 | |

Traditional OCR methods are not suitable due to the high variability of vaccination documents.

12'30 - 13 h.

## VACUNACIONES RECIBIDAS

| Fecha | Vacuna | Edad recomendada | Laboratorio | Lote | Reacción | Administrada por |
|---|---|---|---|---|---|---|
| 22-1-03 | DTP 1ª / DTP-Hep B*+HC | 2 meses | | | | Lupe |
| 22-3-01 | DTP 2ª + HB + HC | 4 meses | | | | T. Esk |
| 31/5/01 | DTP 3ª / DTP-Hep B*+HC | 6 meses | | | | Susana |
| 29/5/02 | DTP R | 18 meses | | | | Lupe |
| 22-2-05 | DT (Difteria, tétanos) DTPa | 6 años | | | | Begoña |
| | Td (Tétanos, Difteria adulto) | 14 años | | | | |
| 22-1-03 | Polio oral 1ª | 2 meses | | | | Lupe |
| 22-3-01 | Polio oral 2ª | 4 meses | | | | T. Esk |
| 31/5/01 | Polio oral 3ª | 6 meses | | | | Susana |
| 29/5/02 | Polio oral R | 18 meses | | | | Lupe |
| | Polio oral R | 6 años | | | | |
| 26/2/02 | Triple vírica 1ª | 15 meses | | | | Susana |
| 22-2-07 | Triple vírica R | 11 años | | | | Begoña |
| 22-1-03 | Haemophilus influenzae 1ª | 2 meses | | | | Lupe |
| 22-3-01 | Haemophilus influenzae 2ª | 4 meses | | | | T. Esk |
| 31/5/01 | Haemophilus influenzae 3ª | 6 meses | | [illegible] HBVAXPRO 10 | | Susana |
| | ~~Haemophilus influenzae 4ª~~ | ~~18 meses~~ | | | | |
| 11/12/20 | Hepatitis B 1ª | Nacimiento | | [illegible] HBVAXPRO 10 EXP. [illegible] | | Dr Sylvie MADIGNIER |
| | Hepatitis B 2ª | 0-2 meses | | | | |
| | Hepatitis B 3ª | 6 meses | | | | |
| | Otras | | | | | |
| | Otras | | | | | |
| | Otras | | | | | |
| | Otras | | | | | |
| | Otras | | | | | |

## REACCIONES TUBERCULÍNICAS

| Edad | Resultado (mm) | Observaciones |
|---|---|---|
| 2 a. | (-) | 12 - XII 02 |
| | | |
| | | |

* *Tachar lo que no proceda*

Traditional OCR methods are not suitable due to the high variability of vaccination documents.

12'30 - 13 h.

## VACUNACIONES RECIBIDAS

| Fecha | Vacuna | Edad recomendada | Laboratorio | Lote | Reacción | Administrada por |
|---|---|---|---|---|---|---|
| 22-1-03 | DTP 1ª / DTP-Hep B"+MC | 2 meses | | | | |
| 22-3-03 | DTP 2ª + HB + MC | 4 meses | | | | |
| 3/5/03 | DTP 3ª / DTP-Hep B"+MC | 6 meses | | | | |
| 29/5/02 | DTP R | 18 meses | | | | |
| | DT (Difteria, tétanos) | | | | | |
| | Otras | | | | | |

## CERTIFICATE OF OTHER VACCINATIONS
## CERTIFICATS D'AUTRES VACCINATIONS

| Date | Nature of vaccine / Genre de vaccin | Dose | Physician's signature / Signature du médecin | Official position / Fonction officielle | Stamp — Cachet |
|---|---|---|---|---|---|
| 18.III.75 | TAB DT | 1 cc | | Assistant Hospital Purg clamart | |
| 15.IV.75 | 2e injection | 1 cc | | " | |
| 6.V.75 | 3e injection | 1 cc | | " | |
| 27.VIII.76 | Rappel | 1 cc | | " | |
| 6-12-76 | Polio | 1 am | | | |
| 1-2-77 | Salvin | 1 amp | | | |
| 24-2-77 | | 1 amp | | | |

MEDECIN DU PERSONNEL

CENTRE HOSPITALIER RÉGIONAL de BORDEAUX
Infirmerie du Personnel
91, cours d'Albret
BORDEAUX

— 10 —

## REACCIONES TUBERCULÍNICAS

| Edad | Resultado (mm) | Observaciones |
|---|---|---|
| 2 a. | (-) | 12-XII 02 |
| | | |
| | | |

* *Tachar lo que no proceda*

Instead, we use a **VLM** to extract **structured** data that follows a predefined schema.

The VLM can extract relevant fields such as vaccine names, dates, and batch numbers and the context in which they appear.

(Tdap page of a vaccination booklet, the name of the laboratory on the sticker, etc.)

# NUVA

**NUVA** is a vaccination nomenclature that standardizes how vaccines are described.

It is already used by several healthcare applications in France and abroad.

It is as a community extension of **SNOMED CT**.

It is already translated into several languages.

# STATISTICAL TECHNIQUES

Once extracted, data must be matched with entries in the NUVA.

- Similarity search algorithms on vaccine names
- Classical statistical techniques based on data extracted from our vaccination record application, we extract data such as vaccine names, dates, and batch numbers.

# SIMILARITY SEARCH EXPLAINED

## DATA EXTRACTED BY MISTRAL

```
1
2 {
3   "vaccineName": "InfanrixQ",
4   "date": "2004-01-19", //iso 8601 format
5   "batchNumber": "20H227",
6   "categories": [
7     "diphtheria", "tetanus", "polio", "acellular pertussis"
8   ]
9 }
```

# SIMILARITY SEARCH EXPLAINED

## DATA EXTRACTED BY MISTRAL

```
1
2 {
3   "vaccineName": "InfanrixQ",
4   "date": "2004-01-19", //iso 8601 format
5   "batchNumber": "20H227",
6   "categories": [
7     "diphtheria", "tetanus", "polio", "acellular pertussis"
8   ]
9 }
```

# SIMILARITY SEARCH EXPLAINED

## DATA EXTRACTED BY MISTRAL

```
1
2 {
3   "vaccineName": "InfanrixQ",
4   "date": "2004-01-19", //iso 8601 format
5   "batchNumber": "20H227",
6   "categories": [
7     "diphtheria", "tetanus", "polio", "acellular pertussis"
8   ]
9 }
```

# SIMILARITY SEARCH EXPLAINED

## DATA EXTRACTED BY MISTRAL

```
1
2 {
3   "vaccineName": "InfanrixQ",
4   "date": "2004-01-19", //iso 8601 format
5   "batchNumber": "20H227",
6   "categories": [
7     "diphtheria", "tetanus", "polio", "acellular pertussis"
8   ]
9 }
```

Nom : MORICEAU Prénoms : Louis

Né(e) le 3 | 1 | 0 | 1 | 2 | 0 | 0 | 3

## Vaccinations antipoliomyélitique antidiphtérique - antitétanique anticoquelucheuse - antihaemophilus - antihépatite B

| Date | Vaccin - Dose - Lot | Signature et cachet du médecin |
|---|---|---|
| 19 JAN 2004 | Infanrix Q | Docteur DOPPELT Evelyne PEDIATRE CONVENTIONNÉE 17, Rue Saint-Benoît 22000 SAINT-BRIEUC 22 1 01949 0 0 1 25 1 |
| 18/02/04 | Pentacoq W1571 | Docteur Lefeure Centre de Vaccination |
| 23 MAR 2004 | Infanrix Q A20CA004A | Docteur DOPPELT Evelyne PEDIATRE CONVENTIONNÉE 17, Rue Saint-Benoît 22000 SAINT-BRIEUC 22 1 01949 0 0 1 25 1 |
| | A20CA274A | |
| 2 12 06 | INFANRIX QUINTA | |
| 2011 | | |



Nom : MORICEAU Prénoms :

Né(e) le 3 | 1 | 0 | 1 | 2 | 0 | 0 | 3

## Vaccinations antirougeo antirubéolique - antiourli Autres vaccinations

| Date | Vaccin - Dose - Lot | Signature et cachet du médecin |
|---|---|---|
| 11 JUI 2005 | PRIORIX AG9CA135A | Docteur DOPPELT PEDIATRE CONVENTIONNÉE Rue Saint-Benoît SAINT-BRIEUC 22 1 01949 0 0 1 25 1 |

# SIMILARITY SEARCH RESULT

For "InfanrixQ"

| Name | Batch number | Categories | Score |
|---|---|---|---|
| Infanrix Hexa | | | 0.90 |
| InfanrixQuinta | | | 0.90 |

# SIMILARITY SEARCH RESULT

For "InfanrixQ"

| Name | Batch number | Categories | Score | Adjusted score |
|---|---|---|---|---|
| Infanrix Hexa | 20H227 | Tdap | ~~0.90~~ | 1.05 |
| InfanrixQuinta | | | 0.90 | |

# SIMILARITY SEARCH RESULT

For "InfanrixQ"

| Name | Batch number | Categories | Score | Adjusted score |
|---|---|---|---|---|
| Infanrix Hexa | 20H227 | Tdap | ~~0.90~~ | 1.05 |
| InfanrixQuinta | 20H227 | Tdap | ~~0.90~~ | 1.35 |

# SIMILARITY SEARCH RESULT

For "InfanrixQ"

| | Name | Batch number | Categories | Score | Adjusted score |
|---|---|---|---|---|---|
| ❌ | Infanrix Hexa | 20H227 | Tdap | ~~0.90~~ | 1.05 |
| ✅ | InfanrixQuinta | 20H227 | Tdap | ~~0.90~~ | 1.35 |

# BEYOND NUMERIZATION

The goal is not just scanning booklets.

Digitization is only the first step.

The real objective of Champollion is to produce a **structured vaccination history**.

This structured history allows analysis and the generation of personalized recommendations.

# Champollion

Vaccination record digitization

FR EN

## Choose a method to digitize your vaccination record



**Take a photo**

Use your device's camera



**Upload an image**

Select a photo from your gallery

Home Diagnostic Export

# Scan Results

1 vaccinations

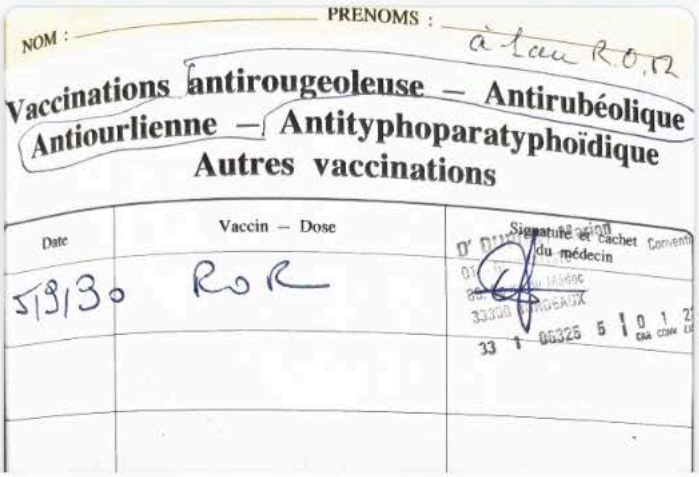
**MMR vaccine, live attenuated, unspecified** ID: d50a6151...

Date: 18/05/1993 Lot: 33106325

Expiration: N/A

View analyzed images (1)

math3.jpg (785 KB)




Home Diagnostic Export

2024.

## Measles-Mumps-Rubella

Late

1 dose received on 18/05/1993

Avoid pregnancy within one month of receiving measles, mumps, and rubella vaccination.

Give a 2nd dose to complete the vaccination schedule and ensure long-term protection.

All doses count, even if the 1st dose was given a long time ago.

## Chickenpox

Late

No dose received

Avoid pregnancy within one month of chickenpox vaccination.