## **FHIMS Lab Domain:**

Order, Perform, Observe, Interpret, Store, Report, Receive

Meeting Minutes (June 20<sup>th</sup>)

Agenda for the next meeting (June 27<sup>th</sup>)



### Date/time of call:

Monday, June 20<sup>th</sup> 2011, 10-11:30 AM (EST) **Call:** 1-800-767-1750, **Passcode:** 84287 Microsoft Office Live Meeting

# **Leadership team**

Neelima Chennamaraja, Kosta Makrodimitris, Galen Mulrooney, Cindy Vinion, Website: https://www.projects.openhealthtools.org/sf/projects/fhims/

# **Attendees**

David Bass, VA
Neelima Chennamaraja, VA
Mike Fitch, DoD
Kosta Makrodimitris, FDA
Galen Mulroony, VA
Anand Shukla, VA
Cindy Vinion, NG/CDC
Steve Wagner, ONC

# **Agenda**

- ALL: Milestones-Plans-Risks for modeling & cases (4th iteration), 15'
- ALL-Galen: Information Modeling and mapping report update(C36 etc)15'
- ALL-Kosta-Steve Terminology Lab 5'
- ALL-Kosta-Cindy-Neelima-Galen S&I LRI communication, F2F on June 14-15, 5'
- All Kosta Public Health reporting and Lab (new domain FHIMS-S&I)

<u>Guiding principal</u>: FHIM Lab-OO will distinguish and categorize lab tests and results, and reports based upon the data needed to:

- (1) Order the test,
- (2) Perform or process the test,
- (3) Obtain, interpret and store data/results of the test,
- (4) Report and/or release the (full/partial) results,
- (5) Receive, interpret and process the report.

**Actors:** Hospital, Clinic, Lab types, Public Health Agency (fed-state-local), Patient, Physician, Nurse

# **Summary of Discussion**

# **Information Mapping**

- Galen Due to the S&I meeting last week, Neelima and Galen have not been able to get together. They are working on mapping HITSP C36 to FHIMS Lab. Steve Wagner would like to take that mapping to the S&I LRI group so they can use it for their purposes.
  - Kosta I think that a draft version been submitted to S&I LRI http://wiki.siframework.org/FHIM+Lab+Mapping+to+S%26I+Data+Elements
  - Neelima Yes, but some things have changed in the FHIMS model, so the spreadsheets need to be changed.
  - Kosta Are we mapping to the implementation guides that LRI is working with?
  - Cindy & Neelima HITSP C36 & the LRI guides are using the same HL7 message types and version, ORU R01 v2.5.1. We do not need to map separately since everything is the same.
  - Galen FHIMS Lab has more information than what LRI is working with;
     however, there are still some fields being used by LRI that are not included in FHIMS. This will be taken care of in the future.
  - Kosta- One thing to keep in mind is that since FHIM Lab domain is a superset of what S&I LRI is, we may make suggestions and inform them in the future
  - o Galen and Neelima will continue working on the mapping this week.

#### **S&I LRI Communication**

- Kosta The regular S&I meetings will continue this week.
- Kosta There is an architecture group (Galen appears to be interested).
- Kosta There is a use case simplification WG(Gary Dickinson) that focuses on ToC of now but they'll work on LRI cases soon and they seek feedback (EHR mapping, drill down cases etc)
  - Kosta will work with Steve Hufnagel and others in S&I, FHIMS for EHR-FM mapping to lab and other domains (med priority), Participation is encouraged for those interested.

# **Terminology**

- Kosta The Terminology group will probably be meeting this Wednesday. Who will be available? Mike, Galen, Neelima (possible), Cindy (no).
  - o Terminology group didn't meet finally because the terminologists were absent.
- Steve To prepare for the Terminology group, all coded attributes need a good definition; examples and already-selected value sets are also useful.
  - Cindy Will Terminology be providing guidance on how to use the value sets at the FHIM level in US implementation guides? It would be helpful, to have

vocabulary/value set guidance & their use in US Realm implementation guides, especially constrainable guides. These guides are being used to measure conformance (such as Meaningful Use). However, there is debate on providing value sets on an optional field from HL7 experts who are participating.

## **Planning**

- Kosta We have 9 meetings remaining for the rest of the summer (next 2 months).
   What do we want to complete in that time?
- Kosta The FHIMS Lab Domain abstract has been accepted as part of a PHIN-CDC panel

http://cdc.confex.com/cdc/phi2011/webprogram/Session12682.html . Kosta present in August in ATLANTA.

- Galen has been approached by the MITA people (reference) & the effort has been going well.
- Cindy Since we only have 9 meetings left in this iteration, some of the bullets listed as part of this iteration must be moved out of this iteration. If we have started it yet, it should not be in this iteration.
  - Galen Other efforts, such as S&I LRI, have cut into the time available to do FHIMS modeling.
  - Kosta I also spent significant time working and coleading with S&I LRI and Public Health efforts. It seems that S&I and FHA have started coordination and alignment
- Kosta NIEM has also become a "hot topic". We should start looking at this effort and how FHIMS Lab can or should participate in it. NIEM is more about government agencies efforts and we need to discuss FHA strategies on it. Currently DHHS has committed to NIEM(Health domain) but DoD, VA are still discussing.
  - Cindy Early on in the FHIMS work, Steve Wagner stated that NIEM has given the Health domain to FHIMS.
  - Galen This is a good thing; DOD & VA have been able to generate some NIEM outputs. Using FHIMS to generate these would be great usage of the FHIM for NIEM.
  - Kosta We should have a meeting about NIEM; it covers so many domains.
  - Cindy This sounds like a great topic for a Friday meeting, but not a Lab meeting this iteration.
  - Kosta (to Steve) Do the domains need to get involved with NIEM?
  - Steve I don't know if the domains need to do anything with NIEM at this time.
     These decisions are still to be made by Doug. Currently, when Doug talks about NIEM, he is discussing the NIEM process, not NIEM information domains.
- Cindy I am not trying to say that the remaining items are unimportant; we just do not have enough time in this iteration to do everything on the list. (Galen, Mike, & Neelima agreed.) They should be moved to another iteration or phase of Lab domain modeling.
  - Kosta I don't know if there will be any more iterations. In any case we need to
    provide compelling reasons and interest to have another iteration. It seems that
    lab and reporting is important for GOV.
  - Cindy Then any remaining items will need to be listed for a future phase/iteration and that list needs to go to Steve Wagner and the Steering Committee as information to them that more work still needs to be done on the Lab domain.
    - Kosta There are items that are really important for lab that need more iteration, interest and involvement. It seems that the team of 7-8 people of the lab domain that meet regularly can't afford all these deliverables.
- Galen It may be helpful to align our agency-specific work (our day jobs) with the efforts on FHIMS. This would help with the competing requirements and topics.

- Kosta what remains to be done?
  - Galen After mapping to C36, we may want to validate the model (Cindy, Neelima, & Mike agree). We have spent a lot of time talking about specimen, anatomic pathology, and various results (titers, microbiology, etc); we need to ensure the model is complete and accurate.
  - Galen There are very few definitions in the model. This also needs to be updated. It may be able to be done during the week off-line rather than on-line during the meetings.
  - Kosta another item is terminology efforts for lab domain that some of participate (Kosta, Neelima, Mike, Galen).
  - Steve Yes this is priority for lab now. It will take a month approximately depending on the terminologists participation
  - Kosta Another item that we started is cases development, alignment and mapping: Ira-genetics, Nikolay-lab PH report, Vijay-anatomic pathology, Mitra, Kosta-Sentinel. As we promised we'll spent some time in the meetings for updates and relevant work.
  - Kosta We should have some documentation describing the model. Galen and Kosta agreed that this is important to work together and it will be helpful to communicate models and cases to FHISM, S&I, agencies and other stakeholders
  - We'll work for the presentation(with Nikolay) for the CDC PHIN conference in August(med priortity) <a href="http://www.cdc.gov/phiconference/">http://www.cdc.gov/phiconference/</a>
  - Kosta and Steve and Steve will dedicate some time to explore CDA and relevant lab capability (HITSP, document, message. Participation is encouraged for those interested.
  - Kosta- We should complete this report this iteration. I uploaded the report with high-med-low(for this iteration items) in OHT wiki space. Please edit and share. <a href="https://www.projects.openhealthtools.org/sf/docman/do/downloadDocument/projects.fhims/docman.root.information\_domain\_documentation.docf1105/doc1745">https://www.projects.openhealthtools.org/sf/docman/do/downloadDocument/projects.fhims/docman.root.information\_domain\_documentation.docf1105/doc1745</a>
- Kosta –Ira wasn't able today to present updates on genetics case(family emergency). He
  promised to update next Monday. Vijay is out for business trip(1 month) and when he'll
  be back he'll help with anatomic pathology case. Mitra mentioned that lab standards
  tests are a major focus of the current Sentinel project (drugs-devices) which is a possible
  case for our domain.

# FHIMS & S&I (LRI) Mapping

- Approximately 80 90% of the elements requested by S&I LRI are in the FHIMS Lab model.
- Next steps: Neelima will get with Galen to review the mapping and update the FHIMS elements to reflect the latest model.

#### HITSP C32/C36 and C80/C83, CDA & EHR-FM XML

 Steve Hufnagel recommends that FHIPS lab review the HITSP documents CAP99, CAP126, CAP127, C36, C37, C80, & C83 (for the specimen and lab components) for information that may need to be included in the FHIM lab model or for references to other documents that will need to be reviewed to locate information that may need to be included in the FHIM lab model. www.hitsp.org

#### **ANNOUNCEMENTS**

- Pathology Informatics 2011 October www.pathinformatics.pitt.edu
- Visualizing the 21st Century of Healthcare Today http://www.govhealthitconference.com/
- Public Health Informatics conference this summer in Atlanta: Engaging, Empowering, Evolving...Together Aug 2011 http://www.cdc.gov/phiconference/index.html
- SOA in Healthcare conference <a href="http://www.omg.org/news/meetings/HC-WS/index.htm">http://www.omg.org/news/meetings/HC-WS/index.htm</a> July 2011
- CLIA conference in July 2011

# Agenda Next Call: June 27th 2011

- ALL: Milestones-Plans-Risks for modeling & cases (4th iteration), 15'
- ALL-Galen: Information Modeling and mapping report update(C36 etc)15'
- ALL-Ira: genetics use case, breast cancer 15'
- ALL-Kosta-Steve Terminology Lab 5'
- ALL-Steve-Galen FHA report 5'
- ALL-Kosta-Cindy-Neelima-Galen S&I LRI, 5'
- All Kosta Public Health reporting and Lab (new domain FHIMS-S&I)

Action Items-(NEED UPDATE after planning 4<sup>th</sup> iteration)

Start Date Priority Action Item Status				
	Priority			
11/22/10	Low	7) Wendy-Kosta-Galen-Cindy: Clarify Specimen-Sample filler and placer order nr, test identifier, placer group number and universalServiceIdentifier. The Pathology Lab uses	In process	
		specs from DICOM (Supplement 122, specimen, accession number, etc) in workflow.		
11/22/10	Low	8) Kosta-Steve Hufnagel: Services Aware Interoperability Framework and Lab-OO	In process	
11/22/10	LOW	FHIMS relevance (Lab-OO HI7 domain has done some work, Cindy)	in process	
11/15/10	High	9) Mike, Cindy, Galen: Finalize definitions for and use of different identifiers & numbers	In process	
11/13/10	riigii	in lab - filler order number, placer order number, group number, test identifier, etc.	III process	
11/8/10	Med	10) Need to discuss different scenarios involving different people (ward clerk, nurses,	Not started	
11/0/10	Wiod	physicians, physician's assistants, interns, etc) and people in a data exchange.	140t Startou	
11/8/10	Low	11) Tim (ICLN) to determine if they would like to participate in FHIMS.	In process	
11/1/10	Low	12) Cindy will update sample accessioning scenarios.	In process	
11/1/10	Med	13) Anne will write up lab processes to include as additional scenarios.	In process	
11/1/10	Low	14) Cindy to identify and contact FBI person from LRN National Meeting for	Not started	
		participation in the FHIMS Lab calls when we start doing Chain of Custody, phase 2.		
11/1/10	Low	15) Kosta/Cindy to transform flowchart of outpatient scenario to BPMN. The first BPMN	In process	
		1.2 draft is done and need to review and add data objects.		
10/25/10	Low	16) Keep in touch with Ted Klein and get material and links	In process	
		Update 11/1: Ted waiting for approval to release draft version of volume V		
10/25/10	Med	17) Cindy- Contact laboratory experts, LIMS admins, HL7 OO WG	In process	
		Update 11/1: HL7 OO WG information shared with interested participants		
11/09/10	Med	18) Kosta to present relevant material for Automated Laboratory Management, FERN,	In process	
		eLEXNET, Sentinel and Medical Countermeasures (FDA/contractors/partners)		
11/08/10	Med	19) Galen to update weekly the FHIMS Lab-OO html model and collaborate with Kosta	In process	
	<u> </u>	to update about changes from baseline(map .xls-overview)	(reccuring)	
11/17/10	Low	21) Kosta to invite CFSAN statisticians, lab experts to present possible scenario for	In process	
44/47/40	<del>  .                                     </del>	Lab collaboration with CDC (sample hygiene-diseases)		
11/17/10	Low	22) Kosta to prepare sample business case for FDA/ORA ALM lab automation and	In process	
03/4/11	Lliab	model (draft). Organize library of BPMN cases, EHR functional mapping  28) ALL Business cases diagrams, EHR functional model mapping, robustness model	In process	
03/4/11	High	and data exchange elements to standardize	In process	
03/18/2011	High	29) Dr. Varma introduced by W.Scharber communicated with Lab-FHIMS to join the	In process	
03/10/2011	riigii	domain and learn more about the modeling efforts at ONC/FHA	iii piocess	
03/25/2011	High	30) Maps to our classes, domains, agencies(strategy, framework, spreadsheets)	In process	
00/20/2011	g	wapo to our stateous, asmaine, agentico(strategy, numework, oproadentous)	III process	
03/25/2011	High	31) Galen will send email to Vijay-Mike to research isUrineScreenPositive" and	In process	
	3	"sputumScreenResult" attributes		
04/04/2011	High	•	In process	
	_	32) Galen-Neelima evaluate and report on HL7 2.X c36, c37 coverage so far	In process	
04/04/2011	High	33)Kosta reports on FHIM-EHR mapping and coverage	In process	
04/04/2011	High	34) Anne reports on CLIA conformance	In process	
04-14-2011	High	37) Cindy-Kosta-Galen- prepare presentation for PHI-CDC conference in August	In process	

**Completed/Not Tracked Action Items** 

Start Date	Priority	Action Item	Status
11/8/10	Low	6) Tim (ICLN) to discuss with DHS the sharing of the Actionable Data Elements spreadsheets with definition.	Completed
11/1/10	Low	5) Cindy to share meeting information for the next meeting when it is sent by the co- chairs (ICLN).	Completed
11/17/10	Low	20) Kosta-Galen-Cindy-Steve-Neelima to prepare and design AND PRESENT a FHIMS-Lab-OO poster accepted for AAAS meeting in DC(Feb-20th 2011)	Completed
2/28/11		25) Kosta - Develop definitions for structured and unstructured data (S& LRI WG)	Completed
2/28/11	High	27) Develop overview and plan for Lab domain using the Report of 2010 document. Deliver to Steve 3/18/11	Completed
03/4/11	High	24) Kosta-Galen Create space for 6 sub-WG under Lab domain(HITSP-EHR, FERN, Sentinel, cancer-pathology, genetics, lab report exchanges)	Completed
11/17/10	High	23) Kosta-Cindy-Galen-Steve: Plans and documentation of modeling and cases during the last 3 meetings the 2 <sup>nd</sup> iteration. Schedule the 3 <sup>rd</sup> iteration Jan-April 2011	Completed
04-14-2011	High	36) Cindy-Kosta-Galen-Nikolay prepare abstract for PHI-CDC conference in August	Completed
04/04/2011	High	35) Cindy-Anne prepares definitions and document on ambiguous terms (ELR, EHR)	Completed