

FHIMS Lab Domain:

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

Meeting Minutes (July 11th)

Agenda for the next meeting (July 18th)



Date/time of call:

Monday, July 11th 2011, 10-11:30 AM (EST)

Call: 1-800-767-1750, **Passcode:** 84287

Microsoft Office Live Meeting

Leadership team

Kosta Makrodimitris, Galen Mulrooney, Cindy Vinion,

Website: <https://www.projects.openhealthtools.org/sf/projects/fhims/>

Attendees

Robert Crawford, VA
Mike Fitch, DoD
Ira Lubin, CDC
Kosta Makrodimitris, FDA
Galen Mulroony, VA
Anand Shukla, VA
Cindy Vinion, NG/CDC
Steve Wagner, ONC

Agenda

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

Guiding principal: 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

Planning

- Kosta - please share your vacation plans(regular attendees) with the group in order to coordinate all together about our meetings.
- SOA in Healthcare Conference (July 13 through July 15) presentations will be available on-line approximately 6 weeks after the conference. See <http://www.omg.org/news/meetings/HC-WS/index> for more information.
- Kosta will be finalizing the 3rd iteration report that is posted on [OHT Tools](#) which includes plans for this 4th iteration and timeline
- Kosta - FHIMS Lab will be presenting at the PHI Conference August 22 - 24. Cindy, Nikolay, Kosta me to prepare some slides for the presentation <http://cdc.confex.com/cdc/phi2011/webprogram/Session12682.html>
- Ira - The CLIA Conference (CLIAC) is in the planning stages and slated for August or September. There are some challenges with identifying and appropriately presenting topics that need meaningful discussion and input by CLIAC.

Information Mapping

- Galen - Mike, Cindy, & Galen met last Friday to discuss definitions for Terminology purposes. However, in discussing the definitions, we found classes within the model that have not been completed reviewed or understood. For example, AnabioticSensitivityObservationEvent and BateriaologyTiter.
 - In BateriaologyTiter, we found that as currently modeled, this class included 2 observations and can be removed from the model as a separate class and the information can be supported by the more generic MicrobiologyResult class. However, MicrobiologyResult could use some review and refinement.
 - BateriaologyTiter.PeakTrough started the conversation since that attribute describes the condition of the patient at the time of specimen collection as does acute/convalescent, creatinine clearance, and other specimens that require multiple collected specimens as well as multiple performed tests in order to appropriately interpret the test rules.
 - Supporting the ability to tie various test results/observations together would need to be supported in the FHIM. This support is not currently part of the FHIM.
 - Other detailed classes, AnabioticSensivtiveObservationEvent and StainResult may also be able to be removed as separate classes. These classes came from the VIM which is a physical model which is optimized for the use of the VIM and VIM's code (Mumps). FHIM-Lab is a logical model and does not need to be optimized for physical processing.
 - Anne - You may have something that is ordered by the physician and an observation, not necessarily related to the ordered test, but, often related to the specimen. These observations need to be reported. Examples include bright yellow serum or fasting samples with a layer of lipids on it.
 - Mike - The lab may also order a test in order to confirm results or other reflex testing.
 - Anne - AntibioticSensitivity may make more sense as a separate class since this test has been standardized and accreditation agencies are using the standardization to measure lab performance.
 - Cindy - Peak/tough, acute/convalescent, etc are determined by some kind of analysis - either comparing the specimen collection time with a substance administered time (and information about the substance - time it takes to reach peak, dissipation time of the substance) (peak/trough) or disease phase as determined by the disease the patient has.
 - Anne - These kind of analytical attributes are perfect locations where FHIM Lab needs to interface with other FHIM models such as Pharmacy.

- Mike - A specimen collection represents a snapshot of the patient at a moment in time and the clinical status of the patient.
- Galen - How do we model this in the FHIM?
- Anne/Cindy - Do we need to model it directly or is this where information in other FHIM models are needed?
- Mike - We need to decide if these analytical fields need to be in FHIM-Lab.
- Anne/Mike - An observation made in view of relevant analytical information does need to be included in a lab report.
- Cindy - I would model it as a separate RelevantInformation class with a name/value pair as attributes (and appropriate information) attached to various classes as needed (ordered test, test promise, performed test, test result/observation, etc) to contain the needed data. We can describe the class as analytical information which may be determined by knowledgeable people, another system/package, a decision support algorithm, and/or other means.
- Galen - Galen will mention the RelevantInformation class to the Orders domain to see if it is useful to them.
- Kosta- I can see in the future other domains may have a similar RelevantInformation class that can be a starting point for interfaces

Genetics Use Case

- Kosta- The information from Ira is in the June 27th notes. Ira and Mike collaborated on the content & both of their comments are represented in these notes. Kosta forwarded to discuss a CDA/GENETIC test case presented at IHIC2011
- After mapping to C36, we may want to validate the model need to ensure the model is complete and accurate.

S&I LRI Communication

- Kosta - S&I LRI is in the final stages of developing the implementation guide.
- Kosta – S&I F public health reporting initiative had first meeting and charter presentation

Terminology

- Kosta - lab domain was discussed at the Terminology meeting last Wednesday. Feedback was to refine the class and attribute list as well as there definitions.
 - Galen - Cindy, Galen, and Mike met to discuss the model; especially the classes that we have not fully fleshed out. We will be meetings on a regular basis to refine the model and the definitions. Details will be presented to the larger group during the Information Modeling agenda item on each week's call.

S&I LRI Communication

- Kosta – The S&I LRI focus on implementation guides and vocabulary issues to meet the deadlines(leadership minutes)
- Kosta – Participated in consensus meeting for use case simplification WG(Gary Dickinson,EHR mapping, drill down cases etc)

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 <http://www.omg.org/news/meetings/HC-WS/index.htm> July 2011 (last week)
- Clinical Information Modeling- Stan Huff's- last week-Galen attended
- CLIA conference in aug-sep 2011

Agenda Next Call: July 18th 2011

- ALL- Galen: Information Modeling, definitions and mapping (C36 etc)25'
- ALL- Ira: genetics use case, breast cancer 20'
- ALL- Milestones-Plans-Risks for modeling & cases (4th iteration), 5'
- ALL- Kosta-Save Terminology Lab 5'
- ALL- Kosta-Cindy-Galen S&I LRI , 5'
- ALL- PHI-CDC presentation in August
- ALL- Kosta Public Health reporting and Lab (new domain FHIMS-S&I)

Action Items-(NEED UPDATE after planning 4th iteration)

Start Date	Priority	Action Item	Status
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 specs from DICOM (Supplement 122, specimen, accession number, etc) in workflow.	In process
11/22/10	Low	8) Kosta-Steve Hufnagel: Services Aware Interoperability Framework and Lab-OO 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 lab - filler order number, placer order number, group number, test identifier, etc.	In process
11/8/10	Med	10) Need to discuss different scenarios involving different people (ward clerk, nurses, physicians, physician's assistants, interns, etc) and people in a data exchange.	Not started
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 participation in the FHIMS Lab calls when we start doing Chain of Custody, phase 2.	Not started
11/1/10	Low	15) Kosta/Cindy to transform flowchart of outpatient scenario to BPMN. The first BPMN 1.2 draft is done and need to review and add data objects.	In process
10/25/10	Low	16) Keep in touch with Ted Klein and get material and links Update 11/1: Ted waiting for approval to release draft version of volume V	In process
10/25/10	Med	17) Cindy- Contact laboratory experts, LIMS admins, HL7 OO WG Update 11/1: HL7 OO WG information shared with interested participants	In process
11/09/10	Med	18) Kosta to present relevant material for Automated Laboratory Management, FERN, eLEXNET, Sentinel and Medical Countermeasures (FDA/contractors/partners)	In process
11/08/10	Med	19) Galen to update weekly the FHIMS Lab-OO html model and collaborate with Kosta to update about changes from baseline(map .xls-overview)	In process (recurring)
11/17/10	Low	21) Kosta to invite CFSAN statisticians, lab experts to present possible scenario for Lab collaboration with CDC (sample hygiene-diseases)	In process
11/17/10	Low	22) Kosta to prepare sample business case for FDA/ORA ALM lab automation and model (draft). Organize library of BPMN cases, EHR functional mapping	In process
03/4/11	High	28) ALL Business cases diagrams, EHR functional model mapping, robustness model 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 domain and learn more about the modeling efforts at ONC/FHA	In process
03/25/2011	High	30) Maps to our classes, domains, agencies(strategy, framework, spreadsheets)	In process
03/25/2011	High	31) Galen will send email to Vijay-Mike to research isUrineScreenPositive" and "sputumScreenResult" attributes	In process
04/04/2011	High	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 nd iteration. Schedule the 3 rd 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