FHIMS Lab-Orders and Observation Domain
Meeting Minutes (December 13th to December 27th**)**
Agenda for the next meeting (January 3rd)

Date/time of call:

Monday, December 13rd , 2010, 10-11:30 AM (EST)
Monday, December 20th , 2010, 10-11:30 AM (EST)
Monday, December 27th, 2010, 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/

Agenda

- ALL: Milestones-Plans-Risks for modeling & use cases/REPORT 2010 2nd 3rd iteration (15')
- ALL-Galen: Modeling HITSP C35/C36/C37 constructs and maps HL7 2.5.1.IG OBR/OBX section, 45'
- ALL-Kosta-Cindy-Anne: Discuss use case and scenarios(UML,BPMN-Visio/RSA),20'
- ALL: Feedback PCAST report Realizing the Full Potential of Health Information Technology (5')
- ALL: HL7 Normative 2010, Lab-OO HL7 updates/membership(5')

December 13, 2010 Meeting Minutes

Attendees

Neelima Chennamaraja, VA
Mike Fitch, DoD
Steve Hufnagel, DoD
Ira Lubin, CDC
Kosta Makrodimitris, FDA
Galen Mulrooney, VA
Anne Pollock, CDC
Cindy Vinion, CDC
Steve Wagner, FHA

Summary of Discussion

PCAST Report Discussion

Document: *Report to the President Realizing the Full Potential of Health Information Technology to Improve Healthcare for Americans: The Path Forward*

- Each domain is reviewing the PCAST report for impacts to their domain. The larger FHIMS group will be discussing the report on Friday, December 17.
- Some concerns discussed in the Lab-OO domain include:
    1. The use of Data Use and Reciprocal Support Agreements (DURSAs) within Nationwide Health Information Network (NHIN) to legally control who can and cannot share information. The PCAST report mentions that these are currently point-to-point and are, therefore, a bottleneck on the network.
    2. Encryption of the data, both in transit and at rest is called for in the PCAST report. There was concern on how to predict what can and/or should be encrypted, especially at rest.
    3. Patient preferences and their impact to security of the data fields/attributes were also mentioned as a concern. At what point does patient preference apply or not apply to data exchanges?
    4. Does the PCAST report change the FHIMS project? If so, how?

Planning Discussion

- Kosta has started a report to contain information both about what FHIMS Lab-OO has done as well as what the plans are for next year. Each person can contribute to this document.

December 20, 2010 Meeting Minutes

Attendees

Mike Fitch, DoD
Steve Hufnagel, DoD
Ira Lubin, CDC
Kosta Makrodimitris, FDA
Galen Mulrooney, VA
Anne Pollock, CDC
Cindy Vinion, CDC
Steve Wagner, FHASummary of Discussion

Iteration Review and Planning Report

- Kosta reviewed and edited the iteration report.
    1. We will include the names and representing agencies of all people who participated in a Lab-OO meeting.
    2. There will be a separate list of the core group of people; those who attend most of the meetings and contribute to the output.
    3. Kosta will post the updated version on the OHT site for anyone/everyone to edit.
- The next iteration(s) will include:
    1. Test and test result(s)
    2. Chain of Custody from both an investigation (i.e., criminal investigation) standpoint and general custody of specimens

Information Modeling - Test

- We discussed information modeling of the test area of the model. Kosta felt that radiological, chemical, biological, and imaging 'testing" and results are important to breakout in the model while others in the group feel that the model may not need those breakouts but does need to be sufficiently abstract and logical to provide the flexibility needed by all agencies.
    1. Anne noted that we may want to think about the lab test area from a lab's perspective. Once a lab receives a specimen, it gets sent to the appropriate section or sections within the lab based upon the protocols and operating procedures of the lab.
    2. Cindy mentioned that, depending upon the protocols and practices, a specimen may be sent for both chemical and biological analysis. Other types of analysis (radiological, imaging, etc) may also be performed in combination with other analysis.
- Ira and Kosta mentioned that this is an opportunity to emphasize and expand lab modeling to include genetics and the need to integrate and/or aggregate a lot of data in order to 'make sense out of it' and/or use lab tests and results in practice.
- Galen uploaded a new version of the model.
- Anne will be sending an ISDS document out for the group to review. While the public comment period is over for this document, it is useful to this group.

December 27, 2010 Meeting Minutes

Attendees

Neelima Chennamaraja, VA
Mike Fitch, DoD
Ira Levin, CDC
Kosta Makrodimitris, FDA
Galen Mulrooney, VA
Anne Pollock, CDC
Steve Wagner, FHA
Robert Crawford, VA

Information Modeling, Methodology and Planning

Kosta presented a full BPMN 2.0 use case in the Rational Software Architect with actors and details that captures the whole lifecycle of product safety, surveillance (FDA view) and the possibility of interfacing with EHRs and physicians.
Anne raised some concerns about the level of details that we need to capture in the model. Why we need to break it out into protocols and procedures not relevant or common to all agencies?
Mike added to that this seems a level of abstraction and granularity that we need to decide taking into account which is the audience and what are the results and final product.
Kosta suggested that it is our objective and work to decide how flexible will be our model and we may need to take a middle route between an HL7 abstract model and a specific to VA lab model that doesn't reflect other agencies. Perhaps a way to go is to focus on and prioritize specific use cases for the agencies that they participate actively in these iterations of the Lab-OO FHIMS domain.
Steve added that the modeling never ends but we need to define the important aspects of health interoperability and avoid internal specific to each agency and lab processes.
Steve and Galen mentioned that meaningful use and patient summary (CCD) are main priorities for FHIMS but there is overlap and space for other relevant cases. Anne added that public health and electronic lab reporting are important cases as well for CDC and others.
Kosta opened a discussion about the categories that the Lab-OO should include since agencies and laboratories in general include all radiology, imaging, genetics, chemistry and microbiology results. Steve answered that the more than a year ago they decided the domains for FHIMS. It's more a structure to begin to work on them with overlaps and not well defined scope always.
Kosta and the group discussed about long term plans for the 3rd iteration in 2011(modeling, cases, granularity, and definitions). In the 2nd iteration the group was focused on HITSP use case (C36, HL7 2.X mapping) but we didn't touch C35, C37 yet.

Action Items

Start Date	Priority	Action Item	Status
11/22/10	Low	7) Wendy-Kosta-Galen-Cindy: Clarify Specimen-Sample filler and placer order number, test identifier, placer group number and universalServiceIdentifier. The Pathology Laboratory uses specs from DICOM (Supplement 122) to describe the various units (specimen, accession number, etc) in workflow.	In process
11/22/10	Low	8) Kosta-Steve: Services Aware Interoperability Framework and Lab-OO FHIMS relevance (Lab-OO Hl7 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 domain - filler order number, placer order number, group number, test identifier, etc.	
11/8/10		10) Need to discuss different scenarios involving different people (ward clerk, nurses, physicians, physician's assistants, interns, etc) and who those people would be in a data exchange.	Not started
11/8/10	Low	11)Tim (ICLN) to determine if they would like to participate in FHIMS.	
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		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, slated for phase 2.	Not started
11/1/10	Med	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)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 . Kosta may invite some experts for Medical Countermeasures from the FDA agency and collaborating contractors.	In process
11/08/10	Low	19)Galen to update weekly the FHIMS Lab-OO model and collaborate with Kosta to update about changes from baseline(map .xls-overview)	In process (reccuring)
11/17/10	Low	20)Kosta-Galen-Cindy-Steve-Neelima to prepare and design a FHIMS-Lab-OO poster accepted for AAAS meeting in DC(Feb-20th 2011)	In process
11/17/10	Low	21)Kosta to invite CFSAN statisticians to present possible scenario for lab collaboration with CDC (sample hygiene-diseases)	In process
11/17/10	Low	22)Kosta to prepare sample use case for FDA/ORA lab automation and model in BPMN(draft completed). Present and organize library of BPMN cases.	In process
11/17/10	High	23) Kosta-Cindy-Galen-Steve: Plans and documentation of modeling efforts and cases during the next 3 meetings as the end of the 2nd iteration of the Lab-OO. Schedule and plan the 3rd iteration Jan-April 2011	Not started

Completed/Not Tracked Action Items

Start Date	Priority	Action Item	Status
11/8/10		6)Tim (ICLN) to discuss with DHS the sharing of the Actionable Data Elements spreadsheets with definition.	Not tracked
11/1/10	Low	5) Cindy to share meeting information for the next meeting when it is sent by the co-chairs(ICLN).	Completed
11/1/10	Low	4) Cindy to send flow chart PDF to Anne Pollock	Completed
10/25/10	Low	3) Kosta-Galen will organize the OpenHealthTools shared project space for Lab-OO, Update 11/1: Steve working on organizing the OpenHealth tools project space	Completed
10/25/10	High	2) Prepare for FHA leadership meeting to present FHIMS domains process (Steve-Sean presented,Nov-2010)	Completed
10/25/10	Low	1) Initiate a dictionary of terms and definitions for Lab (Cindy, draft)	Completed
12/3/10	Low	24) Kosta updated minutes, material, HL7 2.5.1 resources, HITSP cases in OHT shared space	Completed

Agenda Next Call: January 3rd 2011

- ALL: Milestones-Plans-Risks for modeling & use cases(3rd iteration)
- ALL-Kosta: Discuss use case and scenarios
- ALL-Galen: Information Modeling 60'