

**FHIMS Lab Domain:**

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

**Meeting Minutes** (June 6<sup>th</sup> )

**Agenda for the next meeting**  
(June 13<sup>th</sup> )

**Date/time of call:**

Monday, June 6<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  
Steve Hufnagel  
Anne Pollock, CDC  
Anand Shukla, VA  
Cindy Vinion, NG/CDC  
Steve Wagner, ONC  
Kosta Makrodimitris (FDA)

**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

## Agenda

- ALL- Neelima-Kosta FHIMS S&I mapping 20'-30'
- ALL-S. Hufnagel: HITSP C32/C36 and C80/C83, CDA & EHR-FM XML 20'
- ALL-Ira: genetics use case, breast cancer 15'
- ALL-Kosta-Save Terminology Lab 5'
- All - Kosta Public Health reporting and Lab (new domain FHIMS-S&I)
- ALL: Milestones-Plans-Risks for modeling & cases (4th iteration), 5'
- ALL-Kosta S&I LRI communication and subgroups, F2F on June 14-15, 5'

## Summary of Discussion

### FHIMS & S&I (LRI) Mapping

- Neelima mapped data elements requested in the LRN use cases (see Data Considerations at <http://wiki.siframework.org/LRI+Use+Case+%26+Requirements+%28UCR%29+WG> )
- 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. After that, the mapping will be sent to S&I LRI.

### 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.
  - We thanked Steve for the overview and the references to HITSP lab artifacts we should explore
  - Steve Wagner - C37 only references HL7 CDA R2 and IHE. It does not contain information that needs to be included in the FHIM lab model that is not already in C36; therefore, C37 is not useful for FHIM lab modeling.
- Cindy has a concern that FHIM Lab is continually finding additional documents and data exchange structures such as CDA and, now (thru C83), any clinical document that may include specimen and/or laboratory components and starting on these additional action items prior to completing previous work(specimen, accessioning, lab observations). Currently, FHIMS lab is working on (1) genetics, (2) pathology, (3) S&I LRI framework mapping and impacts, & (4)terminology while we have not completed clinical lab results or other aspects of the FHIM lab model. We seem to spend a lot of time finding additional resources and efforts that need our attention, and, once identified, add these new efforts to the weekly agendas at the expense of the in-process efforts.

- Steve Hufnagel and Steve Wagner both suggested to take a look at these HITSP artifacts and to prioritize time and resources to look and map them
- Kosta also believes that we have to find and update continuously on all these resources and harmonize consistently and holistically. In parallel to modeling lab information (C36 is almost done) and components (specimen, collection, microbiology) we need to look in additional mapping and other relevant work and components (cases, terminology, EHR, S&I LRI, CDA doc, Public Health). This approach can bring us to real completion and create realistic models for the agencies and ONC/FHA. We need to know our resources and relevant efforts (current and in the past) and dedicate resources and time to track and bring these to our lab domain. Kosta highlighted several good examples in the past that lab members initiated and brought material to meetings and to our domain from their expertise and experience. Kosta asked for more participation not only in the calls but between the meetings, the plans and prioritization and the cases relevant to lab.
- Steve Hufnagel presented an overview of the EHR-FM XML methodology and how it can be useful for lab or other domains. He shared documentation and invited people to join this effort.

### **Finishing 3rd Iteration**

- Kosta – We still need to finish the 3rd iteration report (mapping HL7, HITSP-Galen, Neelima are working on it).

### **Terminology**

- The FHIM Terminology group will be starting the lab domain this Wednesday at 2pm. Please contact Kosta if you would like to participate.
  - Anne is available and would like to be on the call.
- Steve Wagner - Terminology is completing Person and will be moving to Lab. By request, this will be starting in June.
- Kosta - Who would like to participate in the Terminology calls?
  - Mike, Neelima, Anne, Cindy
- The terminology meeting on Wed was short and overview of the docs since the terminologists were absent.

### **S&I LRI Communications**

- Kosta - S&I LRI is having a face-to-face meeting in June. Kosta suggested to have FHIMS F2F and dinner. Finally on Tue several FHIMS people will meet in DC for dinner (Steve and Kosta coordinated the event).

### **Genetics Use Case**

- Ira wasn't able to join the meeting.

### **New use case**

Cindy suggested to look at environmental monitoring and testing; veterinary monitoring and testing including the Sentinel Chicken program and other similar efforts; lab accreditation (as defined by CLIA, CAP, LRN, FERN, etc); proficiency testing (also as defined by CLIA, CAP, LRN, FERN, etc); and sample collecting and testing during outbreaks/emergency events, exercises, etc including the needs of "field hospitals" and other, temporary medical facilities established during outbreaks

### **Modeling**

- Galen absent so there was no modeling

## ANNOUNCEMENTS

- S&I f2f MEETING June 13-15<sup>th</sup> (Lab results)  
<http://wiki.siframework.org/S%26I+Framework+June+F2F+Meeting>
- Pathology Informatics 2011 October [www.pathinformatics.pitt.edu](http://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>
- New forum on FHIMS OHT [FHIMS concepts & maps](#) (Describe, visualize, relate, map, trace FHIMS WG related concepts and dimensions) that will integrate with terminology/definitions/glossary documents

### **Agenda Next Call: June 13<sup>th</sup> 2011**

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

## Action Items

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-Save 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
04/04/2011	High	35) Cindy-Anne prepares definitions and document on ambiguous terms (ELR, EHR)	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-Save-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-Save: 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