FHIMS WG Terminology Modeling Sub-Project Meeting

Summary of Call

Date/time of call: Wednesday, February 19, 2014, 2:00 - 3:00 PM

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| **Attendees** | | | |
| Jay Lyle - FHA PMO | Y | Robert Crawford – VA |  |
| Rob McClure - VA/VHA |  | LuAnne Barron |  |
| Bill Hess – FDA | Y | John Carter |  |
| Galen Mulrooney - VA/VHA | Y | Riki Merrick |  |
| Susan Matney – 3M | Y | Kevin Coonan |  |
| Jim Case – NLM |  | Holly Miller – VA |  |
| Steve Wagner – FHA | Y | Catherine Hoang – VA |  |
| David Bass – VA |  | Glen Janzen – IHS |  |
| Mark Roche |  | Steve Hufnagel – DoD |  |
| Sean Muir – VA |  | Charles |  |
| Jerry Sable – CDC |  | J.P. Kelly – DeLoitte/IPO |  |
| Ioana Singureanu |  | Charles Gabriel |  |
| Ben Bovee – DHA | Y | Greg Rehwoldt – IPO |  |
| Jeff Jacobs – IPO |  | Coco Tsai – FDA |  |
| Eric Rothschild – IPO |  | Frank Switzer – FDA | Y |
| Dornn Harris – IPO |  | Steve Emrick – NLM |  |
| Caitlin Ryan |  | Iona Thraen – VA |  |
| Alberto Llanes - FHA | Y | Gregory Zektser – VA | Y |
| Lawrence Callahan – FDA |  | Glenn Hatfield | Y |

Agenda (Minutes)

* Goal: Write a request that HITSC clarify the use of terminologies for substances recognized as or suspected of being allergens or irritants to patients with sensitivities.
  1. Agree on current state, requirements, key differentiators, channel for request, request language
  2. Current state:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | [**HITSP C-80**](http://www.hitsp.org/ConstructSet_Details.aspx?&PrefixAlpha=4&PrefixNumeric=80) **(2010)** | [**HITSC**](http://www.healthit.gov/sites/default/files/standards-certification/HITSC_CQMWG_VTF_Transmit_090911.pdf) **(2011)** | **MU/C-CDA**  **(2012)** | [**CHI**](http://www.gpo.gov/fdsys/pkg/FR-2007-12-17/pdf/07-6058.pdf)  **(2007)** |
| Medication Class | NDF-RT | - | NDF-RT | NDF-RT |
| Packaged Drugs | NDC | - | - |
| Branded Drugs | Rx-Norm | Rx-Norm | Rx-Norm | RxNorm |
| Semantic Clinical Drugs | - |
| Active Ingredients | UNII | - | - | UNII |
| Inactive Ingredients | - |
| Food/Environmental | SCT | UNII | UNII? |

Note: C-80 does not distinguish the description of a medication in the reaction context from other contexts.

UNII Recommended for non-medication allergens, NCVHS [2003](http://ncvhs.hhs.gov/031105lt2.pdf), [2007](http://www.ncvhs.hhs.gov/060913lt.htm), but not explicitly adopted in FR shown above.

1. Requirements
   * + List concept identifiers for food and environmental substances people may be sensitive to
     + Support recording of food and environmental allergens in general terms when more specific information is unavailable; e.g., “wasp venom” as opposed to venom by species
       - Question: should such a classifier include only likely candidates or all candidates?
     + Support recording of food and environmental allergens in terms that, when appropriate, identify medication ingredients (tartrazine, corn starch, caffeine, e.g.).
     + Support a well-governed but responsive process for adding new terms.
     + No other requirements identified on call
   1. Other issues
      * Recommend to HITSC to use NDC as well as RxNorm for cases where a particular packaged product may cause a problem.
      * RxNorm should have all UNIIs in SPL—except where RxNorm does not cover a class (e.g., radiocontrast—see RxNorm site for list). OTC: to be determined.
2. Key differentiators
   * + SNOMED CT is an international standard,
     + FDA harmonizing UNII with other national systems via ISO IDMP.
       - Scheduled for release in June: Global Ingredient Archival System starts with FDA, allows other users to compare their concepts to it, using full descriptive capabilities of UNII & ISO.
       - Relation to SNOMED CT? Have not succeeded in finding a contact. Susan suggests Jim Case at NLM.
     + UNII can link substances to medications that contain them via SPL, without further mapping effort or maintenance.
     + UNII can add classifications to complete coverage
   1. Channel for request
      * <http://www.healthit.gov/FACAS/health-it-standards-committee/hitsc-workgroups/vocabulary-task-force>
      * No upcoming meetings listed; but members are
        + Chris Chute recommended, or Stan Huff, Jamie Ferguson, Betsy Humphries; Emory Fry
      * May need to have FHA director send. May need informal inquiries first.
   2. Request language
      * Draft: We request that the HITSC clarify or revise government direction on the use of terminologies to represent food and environmental substances involved in adverse reactions in patients, in accordance with the listed requirements.
      * No revisions suggested
   3. Options
      * Do we propose the prioritized grouping value set Rob has advocated, or at least make sure they are aware of it? (Basically, look in NDF-RT, RxNorm, UNII, and SCT, in that order.)
        + No strong feelings; will add in appendix.
      * Is there merit in pointing out that the LanguaL thesaurus is designed to describe foods? Already at least partially mapped by UNII; SCT plans?
        + UNII: 4 years ago, added ingredient concepts.

* Submission of value sets to VSAC: dependencies
* Coded data element features

**Schedule of Future Meetings**

1) The weekly general Information Modeling (IM) project call is held each Friday from 2:30 to 4:30 PM Eastern Time.

Information for participating in the calls:

Name: FHIMS WG Information Modeling Project Call

Recurring Weekly Call Every Friday

Time of Call: 2:30 to 4:30 PM Eastern Time

Dial-in Information: 1 (773) 897-3018, Access Code: 585-151-437

Web Meeting URL: <https://global.gotomeeti​ng.com/meeting/join/5851​51437>

2) The weekly Terminology Information modeling calls are held on Wednesdays from 2-3:30 PM Eastern Time.

Information for participating in the calls:

Name: FHIMS WG Information Modeling Project Call

Recurring Weekly Call Every Wednesday

Time of Call: 2:00 to 3:30 PM Eastern Time

Dial-in Information: 1 1 (773) 945-1031 Access Code: 849-124-653

Web Meeting URL: https://global.gotomeeti​ng.com/join/849124653

**Action Items**

| Item Description | Responsible Individual | Due Date |
| --- | --- | --- |
| Assess how closely we can align with APHL work   * We agree on current state; happy to work with/wait on abnormality & device | Jay | 4/11 |
| Acquire sample messages   * In process: values, not messages, which have not been scrubbed | Jay | 4/11 |