FHIMS WG Terminology Modeling Sub-Project Meeting

Summary of Call

Date/time of call: Friday, May 31, 2013, 2:30 - 4:30 PM

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| **Attendees** | | | |
| Jay Lyle - FHA PMO | Y | Robert Crawford – VA | Y |
| Rob McClure - VA/VHA | Y | Nancy Cornish – CDC |  |
| Bill Hess – FDA | Y | LuAnne Barron – VA |  |
| Galen Mulrooney - VA/VHA | Y | Riki Merrick |  |
| Susan Matney – 3M | Y | Kevin Coonan | Y |
| Jim Case – NLM |  | Mary Beth Gagnon - CDC |  |
| Steve Wagner – FHA | Y | Pam Banning |  |
| David Bass – VA |  | Glen Janzen – IHS |  |
| Mark Roche |  | Steve Hufnagel – DoD | Y |
| Sean Muir – VA | Y | Rob Savage – CDC |  |
| Jerry Sable – CDC |  | Richard Thoreson |  |
| Ioana Singureanu | Y | Sundak Ganesen |  |
| Ben Bovee – DoD (iEHR) |  |  |  |

Agenda

1. Announcements
   1. SDC collaboration on modeling; elements currently at high level
   2. FHA board approved priorities: including Patient ID, security trust framework, patient consent, provider directory
      1. Consent previously contained in FHIM privacy & security model
      2. Now a normative HL7 IG for CDA, including terminology
   3. Finalizing artifacts to validate our domains; present next A&M call. First: person & datatypes
   4. MDHT implementation guide
2. ImmunityStatus.statusCategory
   1. FHIM proposal: Susceptible, Equivocal, Immune, Currently infected
      1. “Immune” or “Immune to . . .”?
      2. Use finding with explicit context?
      3. Request these 4 values
   2. This is a judgment, probably determined by provider, with last judgment not assumed to be correct
   3. However, report might provide such a judgment
   4. This seems like a property of the person, and specific to a disorder; it has little to do with a vaccination: see diagram of proposal
   5. List interposed between Person and status
   6. Also list vaccinations, but status works there as well



1. EvidenceOfImmunity.evidenceCategory
   1. Initial decision: support only explicit requirement, i.e., IIS
   2. But IIS requirement is problematic
      1. Uses LOINC 59784-9, “Disease with presumed immunity”
      2. List includes 22 SCT disorders—labeled “history of” in IIS specification—and one finding of immunity—Hep B
      3. Recommend using “serological test,” “history of disease,” “completed immunization series” for evidence category, adding “disease” property to clarify for which disease we have this evidence (and to support use of IIS values).
      4. OK. Ideally align this approach with IHTSDO. Is “history of infection” redundant? As concept yes, but do explicitly model associations with record artifacts (problem list, e.g.).
2. MedicationAdministrationEvent.doseForm
   1. HL7: no suggestions “Table 9999”
   2. PHVS: no specific set (drugs including form, all SCT qualifiers)
   3. SCT 421967003 drug dose form (qualifier value)
   4. Or subset
   5. Or FDA set from NCI thesaurus
   6. Or HITSC
   7. Use the one specified by HITSC (used by SPL, NCPDP). (None given 9/11). Or RxNorm?
3. Evaluation outcome and reason
   1. Outcome: preference to use code rather than Boolean.
   2. Need “never evaluated”? Ask Rob S if a record is required.
   3. Reason: possibly text; may be either removed or coded per Rob S’s feedback.
4. Target dose number: status: satisfied or not satisfied.
5. Review dispositions of Immunization requirements
   1. Not coded

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| --- | --- | --- |
| Class | Property | Disposition |
| Contraindication | code | Different package |
| MedicationAdministrationEvent | method | Different package |
| MedicationAdministrationRequest | method | Different package |
| Evaluation | reason | No longer coded |
| MedicationAdministrationRequest | routingInstruction | No longer coded |
| Indication | indicationCode | Removed from model |
| MedicationAdministrationEvent | treatmentRefusalReason | Removed from model |
| MedicationAdministrationPromise | administrationStatus | Removed from model |
| MedicationAdministrationRequest | siteModifier | Removed from model |
| VaccineGroup | category | Removed from model |

* 1. coded

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| --- | --- | --- | --- | --- |
| Property | bindingStatus | valueSetName | valueSetOID | valueSetDefinition |
| CommentEvent conditionOfUse | 3 - Ready for SME Review | Vaccination Special Indication (IIS) | 2.16.840.1.114222.4.11.3290 | Describes a factor about the client which may impact forecasting of next dose of vaccine needed. |
| Evaluation outcome | 1 - In Process | Immunization Dose Evaluation |  |  |
| EvidenceOfImmunity evidenceCategory | 1 - In Process |  |  |  |
| Exemption reason | 3 - Ready for SME Review | Immunization Refusal Reason Excluding Nulls | 2.16.840.1.113883.3.2074.1.1.4 | Causes specified for refusing vaccination, combined with roles of those deciding to refuse it. This value set includes all the codes from PHVS\_SubstanceRefusalReason\_IIS (2.16.840.1.114222.4.11.3380) except "Other." |
| ImmunityStatus statusCategory | 1 - In Process |  |  |  |
| ImmunizationFundingEligibility financialClass | 3 - Ready for SME Review | Financial Class (IIS) | 2.16.840.1.114222.4.11.3366 | User-defined Table 0064 - Financial class [NIP suggested values] (use in PV1-20) Financial class references a clients eligibility status at a point in time. The values in this table relate to eligibility for the Vaccine for Children (VFC) program. Local |
| ImmunizationHistory informationSource | 2 - Ready for FHIM Review | Immunization Information Source | 2.16.840.1.113883.3.88.12.80.39 | This identifies the source of information for this immunization record or, more generically, whether the immunization being reported has just been administered (new) or came from other records (historical) |
| Manufacturer mvx | 2 - Ready for FHIM Review | Manufacturers of vaccines (MVX) | 2.16.840.1.114222.4.11.826 | The CDC's National Immunization Program (NIP) maintains the HL7 external code set MVX. HL7 version 2.x Manufacturers of vaccines (code=MVX) used in chapter(s) 4 |
| MedicationAdministrationEvent doseForm | 1 - In Process |  |  |  |
| MedicationAdministrationEvent route | 3 - Ready for SME Review | Route Of Administration (IIS) | 2.16.840.1.114222.4.11.3369 | HITSP has specified the use of the FDA route of administration. Implementation guide has mapping to the Table 0162 Route of Administration |
| MedicationAdministrationEvent site | 3 - Ready for SME Review | Administrative Site (IIS) | 2.16.840.1.114222.4.11.3370 | HL7-defined Table 0163 - Administrative site [only selected values listed] (use in RXR-2) |
| MedicationAdministrationEvent status | 2 - Ready for FHIM Review | Treatment Completion Status (HL7) | 2.16.840.1.114222.4.11.821 | status of treatment administration event. Uses HL7 table 0322 |
| MedicationAdministrationEvent status | 3 - Ready for SME Review | ActStatus | 2.16.840.1.113883.1.11.15933 | Contains the names (codes) for each of the states in the state-machine of the RIM Act class. |
| MedicationAdministrationRequest route | 3 - Ready for SME Review | Route Of Administration (IIS) | 2.16.840.1.114222.4.11.3369 | HITSP has specified the use of the FDA route of administration. Implementation guide has mapping to the Table 0162 Route of Administration |
| MedicationAdministrationRequest site | 3 - Ready for SME Review | Administrative Site (IIS) | 2.16.840.1.114222.4.11.3370 | HL7-defined Table 0163 - Administrative site [only selected values listed] (use in RXR-2) |
| PatientSeries status | 2 - Ready for FHIM Review | ActStatus | 2.16.840.1.113883.1.11.15933 | Contains the names (codes) for each of the states in the state-machine of the RIM Act class. |
| PublicHealthClient status | 2 - Ready for FHIM Review | Pt Immunization Registry Status Excluding Nulls | 2.16.840.1.113883.3.2074.1.1.2 | Standing of registry information regarding a patient. This information indicates whether patient information is current and appropriate for updates, and is used in HL7 V2 segment PD1-16. |
| TargetDoseNumber status | 1 - In Process | Immunization Dose Fulfillment |  |  |
| VaccinationEvent fundingSource | 2 - Ready for FHIM Review | Immunization Information Source | 2.16.840.1.113883.3.88.12.80.39 | This identifies the source of information for this immunization record or, more generically, whether the immunization being reported has just been administered (new) or came from other records (historical) |
| Vaccine vaccineCode | 3 - Ready for SME Review | Vaccines administered (CVX) | 2.16.840.1.114222.4.11.934 | Vaccine Name Keyword: Clinical Vaccines, Vaccine Names |
| VaccineContraindication\_CDC\_IIS code | 3 - Ready for SME Review | Vaccination Contraindication (IIS) | 2.16.840.1.114222.4.11.3288 | Indicates a contraindication to vaccination. |
| VaccineInformationStatement language | 3 - Ready for SME Review | Language | 2.16.840.1.114222.4.11.831 | Primary spoken language |

1. Allergy domain
   1. SMEs
      1. iEHR representative. Ask Erik Pupo.
      2. Kevin.
      3. Mike Lincoln had been involved.
      4. David Bass
   2. Use cases
      1. Transition of care (e.g., S&I)
      2. HITSP
      3. Ask iEHR
      4. HL7 DAM ([allergy](http://wiki.hl7.org/images/4/47/V3DAM_ALLERGY_R1_I1_2013JAN_Storyboards.pdf), care coordination)
   3. FHIM team did review terminology once.
   4. Note: reactant is one slot but MU may require separation.
   5. Add an occurrence time to ReportedReaction

**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 (773) 897-3018, Access Code: 585-151-437

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

**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 |