FHIMS WG Terminology Modeling Sub-Project Meeting

Summary of Call

Date/time of call: Wednesday, June 20, 2018, 2:00 – 3:30 PM

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| **Attendees** | | | |
| Bill Hess – FDA |  | Mulikat Sarumi |  |
| Carol Bickford |  | Rachael Howe – 3M |  |
| David Bass – VA |  | Rob McClure – ONC/FHA |  |
| Deniz Akkor |  | Sean Muir | Y |
| Galen Mulrooney - VA/VHA | Y | Steve Hufnagel | Y |
| Huma Munir |  | Steve Wagner – FHA | Y |
| Jacee Robison |  | Susan Campbell |  |
| Jay Lyle - FHA PMO | Y | Susan Matney – Intermountain | Y |
| Joey Coyle |  | Gail Kalbfleisch |  |
| Liz McCool |  | Kevin Mundy – FHA |  |
| Loren Stevenson – VA |  | Suzanne Gonzales-Webb |  |
| Kathleen Connor |  | Robert Lario |  |

**Agenda**

1. Susan: the Cerner: “model experience”; i.e., no customization.
   1. Cerner used to support customization; this caused problems for interop
   2. Now: customize at product level
   3. Wound care in “i view” in Cerner: 40k elements
   4. Interested in using Wound to demo
2. Galen
   1. CIMI impediments: a) tooling for tech stack; b) topic context pattern
   2. FHIM to denormalize this
   3. Skin model to FHIM
      1. Start with LOINC panel; Susan has spreadsheet with terminology
      2. Need source metadata in model repository: tooling stack, who is using it
3. HSPC assumptions about VSAC
   1. We’ll use it. HSPC RF2 may not be easy enough to consume.
   2. Coordinate how to get HSPC into International edition. Possible 9 month lag.
   3. Once HSPC SOLOR value set is approved (and drafted in VSAC)
      1. If all already in VSAC, ok
      2. If not: publish ‘draft’ with missing codes in inclusion criteria
         1. And updated when new content is available
      3. If all new content:
         1. Can’t publish draft without any content
   4. Stewardship
      1. Tbd.
      2. (suicide: jira tasks)(John, Sarah, Loren)
4. FHIM contribution to CIMI ballot
   1. Cancer? Skin?
      1. BMM, ADL, flat ADL with bindings.
      2. FHIR profiles
   2. Steps
      1. Current CIMI snapshot for target BMM, ADL
      2. Identify gaps (skin assessment container)
      3. Dependencies
5. Vitals
   1. Steward: keep existing sets if appropriate; steward may change (TBD)
   2. Term submission
      1. See above
   3. FHIR CCDA value set overlap assessment
      1. No qualifiers in C-CDA
      2. Measures:

|  |  |  |  |
| --- | --- | --- | --- |
| **FHIR** | | **C-CDA** | |
| Respiratory Rate | 9279-1 | 9279-1 | Respiratory rate |
| Heart rate | 8867-4 | 8867-4 | Heart rate |
| Oxygen saturation | 59408-5 | 59408-5 | Oxygen saturation in Arterial blood by Pulse oximetry |
| Body temperature | 8310-5 | 8310-5 | Body temperature |
| Body height | 8302-2 | 8302-2 | Body height |
| Body length | 8306-3 | 8306-3 | Body height --lying |
| Head circumference | 8287-5 | 8287-5 | Head Occipital-frontal circumference by Tape measure |
| Body weight | 29463-7 | 29463-7 | Body weight |
| Body mass index | 39156-5 | 39156-5 | Body mass index (BMI) [Ratio] |
| Blood pressure systolic and diastolic | 85354-9 |  |  |
| Systolic blood pressure | 8480-6 | 8480-6 | Systolic blood pressure |
| Diastolic blood pressure | 8462-4 | 8462-4 | Diastolic blood pressure |
|  |  | 3140-1 | Body surface area Derived from formula |

* 1. Finding or qualifier axis for qualifiers? Probably need to support both. Associated Precondition attribute.
     1. Observable Entity has
        1. Direct site, inherent location (anatomy)
        2. Precondition (finding, precondition value (qualifier), procedure)
        3. Technique (technique – qual; not procedure)
           1. Add Procedure to SCT Technique range?
           2. Create a new attribute?
           3. How does extension define concept model ranges?
           4. Just use Techniques, or add them.

Open question for now

* + - 1. Using device (device)
    1. Finding has
       1. After (finding, procedure)
       2. Associated with (finding, procedure, event, …)
       3. Finding method (procedure.)
       4. Finding site (anatomical)
       5. During (procedure)
    2. Some are FHIR resource properties (method, site); some are not (O2 device, exercise)
       1. FHIR Extension observation properties
          1. Components
          2. Members
          3. New properties
       2. SCT properties
          1. HSPC Extension properties
          2. Observable.Precondition
    3. Consult JIRA for sets not yet published
    4. O2: not in vitals. Some kind of flag or indicator pointing to the real information.
    5. One “vitals” with O2 and one without? Light vs heavy.
    6. HSPC July 30-Aug 1; Keith 31st at 1 ET.

Values: review lists in spreadsheet:



Next Call

Care plan

Issues

|  |  |  |
| --- | --- | --- |
| **Issue** | **Status** | **Owner** |
|  |  |  |

**Action items**

| Item Description | Responsible Individual | Due Date |
| --- | --- | --- |
| Look into data on actual system usage in NCPDP instances | Sue Thompson |  |
| Discuss stewardship with NCPDP | RM, SW |  |
| Research reactants with IMHC, VA, KP  Naveen Maram, Holly Miller helping | JL | PC project in ballot Sept 2017 |
| Research V2 lab coded value frequencies  Tom Oniki no longer at IMHC; possibly Susan | JL |  |

**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