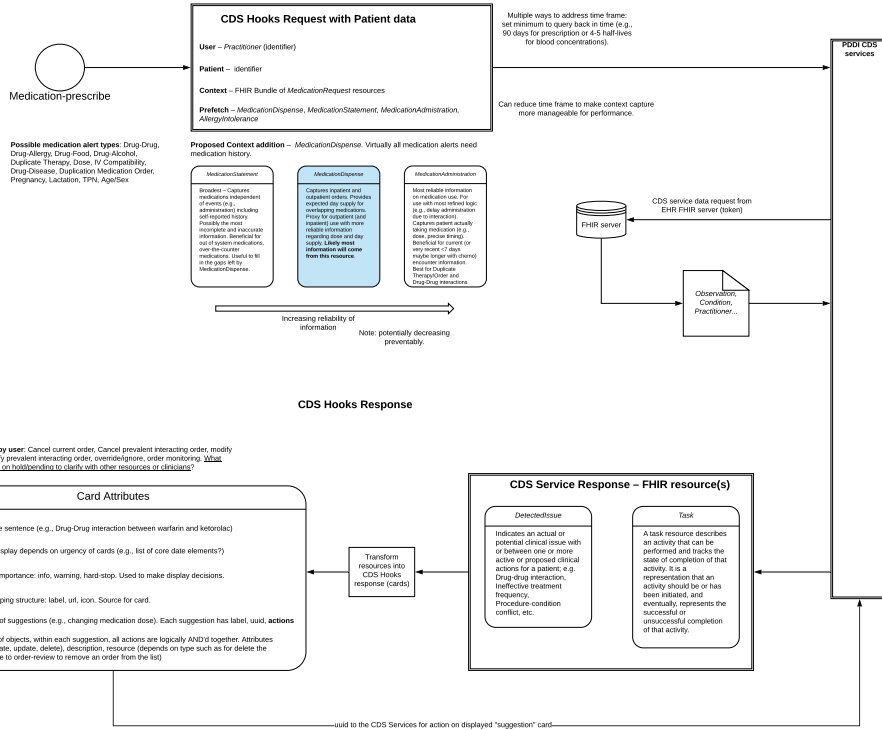


Hooks: In standard – Medication-prescribe; Potential – Medication-selection, Medication-verification, Medication-review...



CDS service response				
Core data elements	Use-case data elements	Data	FHIR resource	Resource attribute
Drugs involved	warfarin and NSAID	terminology (e.g., RxNorm)	DetectedIssue	category, implicated (MedicationRequest, MedicationDispense, MedicationStatement, MedicationAdministration)
Clinical consequences	Increased risk of bleeding including gastrointestinal bleeding, intracranial hemorrhage, and central hemorrhage.	terminology (e.g., ICD-10 or SNOMED-CT)	DetectedIssue	detail? (textual explanation of detected issue)
Evidence for suspected DDI	Non-steroidal anti-inflammatory drugs (NSAIDs) have antiplatelet effects which increase the bleeding risk when combined with oral anticoagulants such as warfarin. The antiplatelet effect of NSAIDs lasts only as long as the NSAID is present in the circulation, unlike aspirin's antiplatelet effect, which lasts for up to 2 weeks after aspirin is discontinued. NSAIDs also can cause peptic.	text, link?	DetectedIssue	reference
Frequency of exposure to the PDOI	unknown	numeric?	DetectedIssue	
Frequency of harm	unknown	numeric?	DetectedIssue	
Contextual/modifying factors	PPI, misoprostol	terminology (e.g., RxNorm)	DetectedIssue	mitigation (action extension) may need more than action extension to include components (e.g., PPI and misoprostol)
	CS (systemic corticosteroid), MCRA (antimicrobicoctoid), HD NSAID, multi NSAID	terminology (e.g., RxNorm)	DetectedIssue	exacerbation (doesn't exist)
Mechanism of interaction	Non-steroidal anti-inflammatory drugs (NSAIDs) have antiplatelet effects which increase the bleeding risk when combined with oral anticoagulants such as warfarin. The antiplatelet effect of NSAIDs lasts only as long as the NSAID is present in the circulation, unlike aspirin's antiplatelet effect, which lasts for up to 2 weeks after aspirin is discontinued. NSAIDs also can cause peptic.	text with terminology reference	DetectedIssue	
Recommended actions	If the NSAID is being used as an analgesic or antipyretic, it would be prudent to use an alternative such as acetaminophen. In some people, acetaminophen can increase the anticoagulant effect of warfarin, so monitor the INR if acetaminophen is used in doses over 2 grams for a few days. For more severe pain consider short-term opioids in place of the NSAID.	text, link, resource?	Task	definition, intent, priority, description, relevant history, strengthOfRecommendation extension (A rating system that describes the strength of the recommendation, such as the GRADE, DynaMed, or Oxford CEBM systems. Strong Weak)
Evidence for action	For each recommended action (e.g., Both corticosteroids and aldosterone antagonists have been shown to substantially increase the risk of UGIB in patients on NSAIDs, with relative risks of 12.8 and 11 respectively compared to a risk of 4.3 with NSAIDs alone [MAGLIEC-2014])	text, link, resource?	Task	definition/reference or qualityOfEvidence extension (A rating system that describes the quality of evidence such as the GRADE, DynaMed, or Oxford CEBM systems. High, Moderate, Low, Very Low)
Seriousness rating	Bleeding is a serious potential clinical consequence because it can result in death, life-threatening hospitalization, and disability.	text	DetectedIssue	
Severity	While bleeding is a serious potential clinical consequence, severity can vary from easily tolerated to incapacitating.	terminology	DetectedIssue	severity (High, Moderate, Low)

Opioid IG used CarePlan, but I am proposing Task since it can be tracked to completion (successful or unsuccessful), has levels of priority, codable task type that could better match Card action attribute (create, update, delete), and I may help with planning the medication order as pending further information by monitoring states.