IHE Change Proposal

Tracking information:

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| IHE Domain | Patient Care Device (PCD) |
| Change Proposal ID: | CP-PCD-##1 |
| Change Proposal Status: | Draft |
| Date of last update: | 2022-07-27 |
| Person assigned: | Eldon Metz |

Change Proposal Summary information:

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| --- | --- |
| PCIM OBR Universal Service Identifier and Begin/End Time Stamps | |
| Submitter’s Name(s) and e-mail address(es): | Eldon Metz, emetz@innovisionmedical.com |
| Submission Date: | TBD |
| Integration Profile(s) affected: | Point-of-Care Identity Management (PCIM) |
| Actor(s) affected: | Device-Patient Association Consumer  Device-Patient Association Manager  Device-Patient Association Reporter |
| IHE Technical Framework or Supplement modified: | PCIM Profile TI revision 1.1, dated 2018-12-07 |
| Volume(s) and Section(s) affected: | Trial Implementation, Multiple Sections |
| Rationale for Change:  Clarifications to OBR requirements for PCD-17, 18 and 19.   * OBR-4 to be populated in compliance with HL7 2.7 definition for OBR-4 (optionality “Required”). * Clarification that device patient association/disassociation time stamps specified to be present in PRT-11 and 12. * Explanation of OBR-7 and 8 timestamp semantics, including clarification to the example to more clearly illustrate. * Added disassociate example message   This Change Proposal (CP) proposes changes to implement profile clarifications and positions for the above issues. | |
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Section **A.1.2.4 OBR-4 Order Request**, modify the paragraph on line 743 on page 36-37, by modifying text and including a table of field definitions with data types and optionality:

This segment serves as a wrapper for an association observation. It provides the association message with a unique identifier that can be used for tracking messages from all sources in the overall configuration of systems. The OBR segment also specifies the unique identifier for the patient device association service.

Table A.1.2.5-#: OBR Fields

|  |  |  |  |
| --- | --- | --- | --- |
| SEQ | DT | OPT | Description |
| 1 | SI | O | Set ID - OBR |
| 3 | EI | R | Unique instance identifier for the association event. Must be constrained during generation to ensure duplicate identifiers between sources are not possible. |
| 4 | CE | R | Universal Service Identifier – set to 69136^MDC\_OBS\_ASSOCIATION\_PATIENT\_DEVICE^MDC |
| 7 | TS | C | Earliest participant involvement |
| 8 | TS | C | Latest participant involvement |

The OBR shall also include the timestamp of the earliest participant involvement (OBR-7) and latest participant involvement (OBR-8) for an association or disassociation event report.

Each report consists of two Participant Segments (PRT) and each may have timestamps for their involvement in PRT-11 and/or PRT-12. OBR-7 and OBR-8 conveys the range of time of both participants. See Table A.1.2.6-3 and Table A.1.2.6-4 for definitions of the timestamp semantics in PRT-11 and PRT-12. The logic for filling in the timestamp values for OBR-7 and OBR-8 is to examine both the PRT segments that will be sent out in the report and set OBR-7 to the earliest timestamp value and OBR-8 to the latest timestamp value. OBR-7 and 8 may contain the same timestamp.

Section **A.4 Example Messages**, insert a sentence that adds clarity on timestamp range to the description on line 981, on page 49:

Existing Text:

Example 1: At 12:00, Nurse Diesel connected patient Spaniel to a continuous physiological monitor with ID MON5588. At 12:30, she records the association on the Critical Care  
application. As she is an RN and has witnessed and entered the association on the Critical Care system, this is considered a validated association. This message would be sent from the Critical Care system in the role of Association Reporter to the Association Manager.

Proposed Text:

Example 1: At 12:00, Nurse Diesel connected patient Spaniel to a continuous physiological monitor with ID MON5588. At 12:30, she records the association on the Critical Care  
application. As she is an RN and has witnessed and entered the association on the Critical Care system, this is considered a validated association. This message would be sent from the Critical Care system in the role of Association Reporter to the Association Manager. Note that since Nurse Diesel recorded the association 30 minutes after the association occurred, the timestamps for OBR-7 and OBR-8 capture that range of time in the OBR wrapper segment. Additionally, each PRT segment provides specific time for each participant. For the device equipment, when that association occurred and for the responsible observer Nurse Diesel, when it was recorded.

Section **A.4 Example Messages**, modify the OBR segment on line 988 on page 50:

Existing OBR Segment:

OBR|||15404652

Proposed OBR Segment:

OBR|||15404652|69136^MDC\_OBS\_ASSOCIATION\_PATIENT\_DEVICE ^MDC|||20160726120000|20160726123000

Section **A.4 Example Messages**, modify the OBR segment on line 1022 on page 51:

Existing OBR Segment:

OBR|||15404697

Proposed OBR Segment:

OBR|||15404697|69136

^MDC\_OBS\_ASSOCIATION\_PATIENT\_DEVICE ^MDC||20160726160000|20160726160000

Section **A.4 Example Messages**, add disassociate example after Example 4 on page 51 :

Example 5. At 23:00, Nurse Ratched disconnected patient McMurphy from the physiological monitor previously connected in Example 2. She presses a button and then confirms causing the disassociation to be asserted.

MSH|^~\&|MonitorGateway||AssocMgr||20160726230000||ORU^R01^ORU\_R01|12d158*6*|P|2.

7|||AL|AL||8859/1|||IHE\_PCD\_018^IHE PCD^1.3.6.1.4.1.19376.1.6.4.18^ISO

PID|||AB60001^^^A^PI||McMurphy^R^P^^^^L

PV1||E|3 WEST ICU^3001^1

OBR|||15404712|69136^MDC\_OBS\_ASSOCIATION\_PATIENT\_DEVICE ^MDC|||20160726230000|20160726230000

OBX|1|CWE|68487^MDC\_ATTR\_EVT\_COND^MDC||198334^MDC\_EVT\_DISASSOCIATION\_PATIENT\_DEVICE^MDC||||||R

PRT|1|UC||EQUIP||||||3 WEST ICU^3001^1|MON5588^^231A8456B1CB2366^EUI-64||20160726230000

PRT|1|UC||AUT||||||3 WEST ICU^3001^1|MON5588^^231A8456B1CB2366^EUI- 64||20160726230000

(Acknowledgment messages not shown)