

# FHIR TRAINING

CDC FOUNDATION

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SESSION  
04

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# Instructors

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# Session 4

## 1. BLOCK 1

1. FHIR References
2. Hands-on Exercise

## 2. BLOCK 2

1. Terminology basics
2. US Terminology / PH Terminology

## 3. BLOCK 3

1. Mapping – V2-to-FHIR
2. Hands-on Exercise

# BLOCK 1 – FHIR REFERENCES

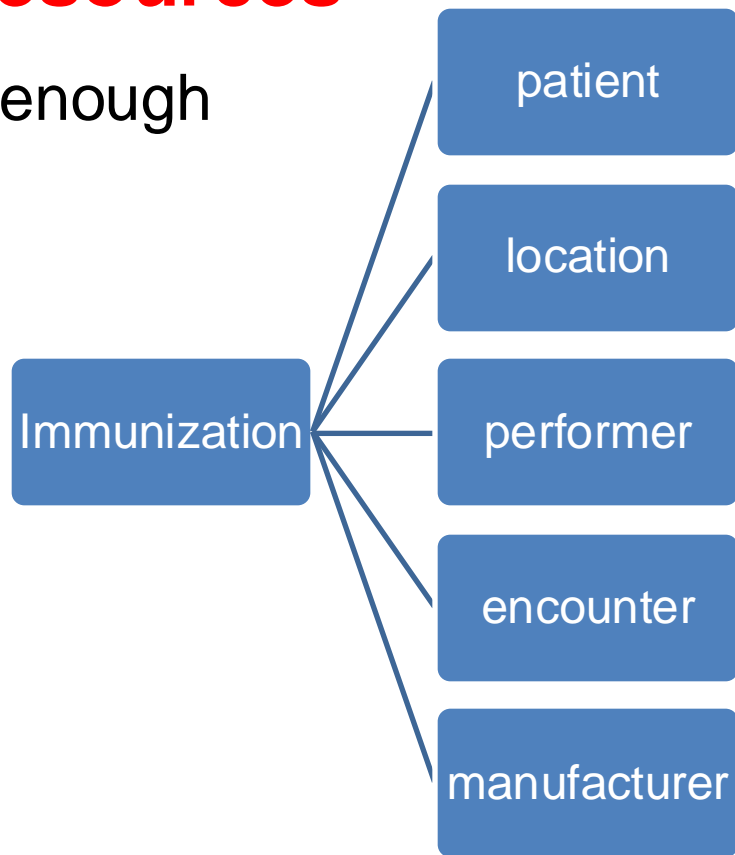
1. Why references?
2. Reference Types
3. Example with an Immunization record

No quizz in this block, just an assignment!

# References between resources

- One resource is usually not enough
- We need to use
  - multiple resources
  - represent the relations

In FHIR this is called  
"Reference"



# Types of References in FHIR (1)

- **Absolute** (ref.resource is in **specific server**)

```
<subject>
```

```
  <reference value="http://myserver/fhir/Patient/20911">
```

```
</subject>
```

- **Relative** (ref.resource is in **same server**)

```
<subject>
```

```
  <reference value="Patient/20911">
```

```
</subject>
```

# Types of References in FHIR (2)

- **Contained** (ref.resource is in the same resource, like XML Ref)

```
<contained>
```

```
  <Patient>
```

```
    <id value="MyPatient">
```

```
    ...
```

```
  </Patient>
```

```
</contained>
```

```
<subject>
```

```
  <reference value="#MyPatient">
```

```
</subject>
```

# Types of References in FHIR (3)

- Identifier (Reference by human identifier, not a FHIR ref)

<subject>

<identifier>

<system value="2.16.840.1.113883.2.10.4.2"/>

<value value="99999999"/>

</identifier>

<subject>



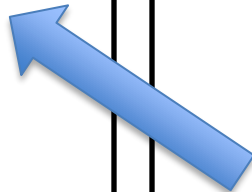
# Type of Reference in FHIR (4)

- Bundled (Ref. Resource is in the same Bundle)

```
<Bundle>
  <entry fullUrl="urn:uuid:d8497ab9-b5c1-
  4cfa-971c-7b4db9dc011a">
    <Patient>
      ...
    </Patient>

  </entry>
  ...
```

```
<entry fullUrl="urn:uuid:d8497ab9-b5c1-
4cfa-971c-7b4db9dc011a">
  <Immunization>
    ...
    <patient>
      <reference value= "Patient/d8497ab9-
b5c1-4cfa-971c-7b4db9dc011a"
    </patient>
    </Immunization>
  </entry>
  ...
</Bundle>
```



# Contained Resources

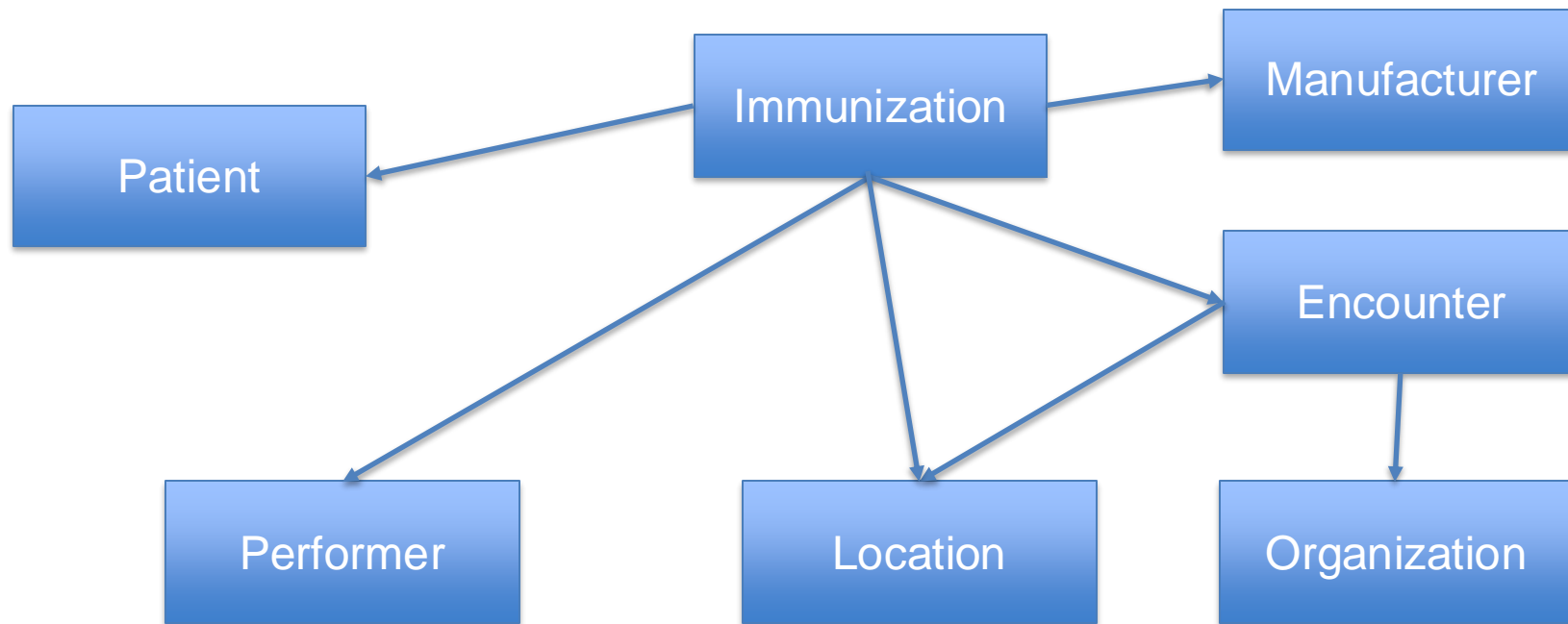
- When there is no external identity
- Has limitations
  - No reuse
  - Very hard to ‘resolve’ to ‘real’
- Use when you must include information with no independent ‘existence’

# Example: Recording an Immunization

- **Patient:** Martin Smith, born 4/3/2019
- **Administered,** Feb 21,2025 10.30hs **by Nurse Eve Admin,**  
**NPI 20293**
- **Encounter:** Ambulatory
  - Location: Good Health Clinic, 100 Main St., Ann Arbor,  
Michigan
- Vaccine: Diphtheria, Tetanus, and Acellular Pertussis (DTaP),  
CVX#20
- (product: Daptacel by Sanofi Pasteur Inc. , 1 Discovery Drive  
Swiftwater, PA 18370, USA)
- Dose: 5th dose / Lot Number: 20191/88

■	patient
■	encounter
■	location
■	performer
■	reason
■	manufacturer

# The immunization, as linked resources



# Assignment #3

We will proceed to work in groups now, and solve Assignment #3

[Assignment #3 - Manage Different FHIR reference types](#)



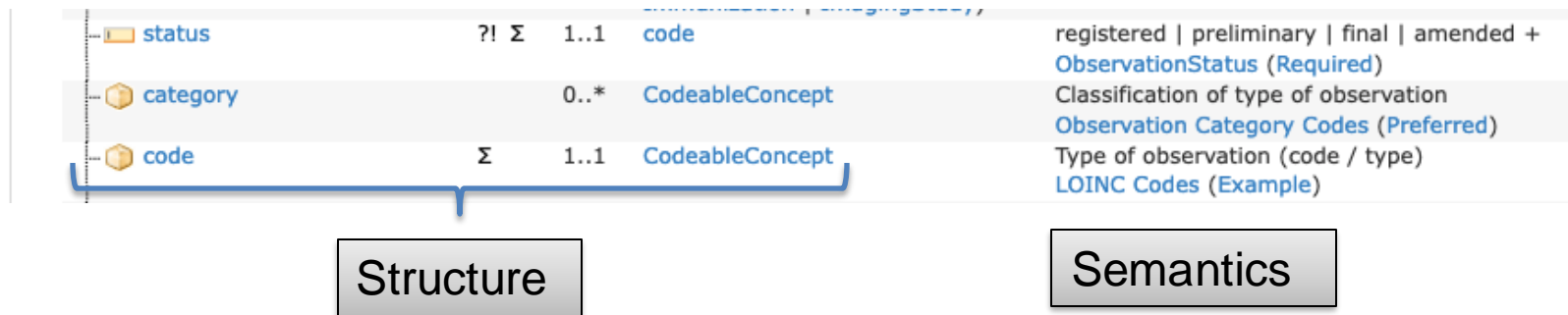
# BLOCK 2 – FHIR TERMINOLOGY

1. Introduction to Terminology
2. Binding
3. Terminology Services
4. Terminology Operations

WE WILL ASK 6 QUESTIONS DURING THIS  
BLOCK – BE AWARE

# Terminology in FHIR

- Key to semantic interoperability: **dealing with coded elements and the meaning of concepts.**
- **Interoperability = syntax + structure + semantics**



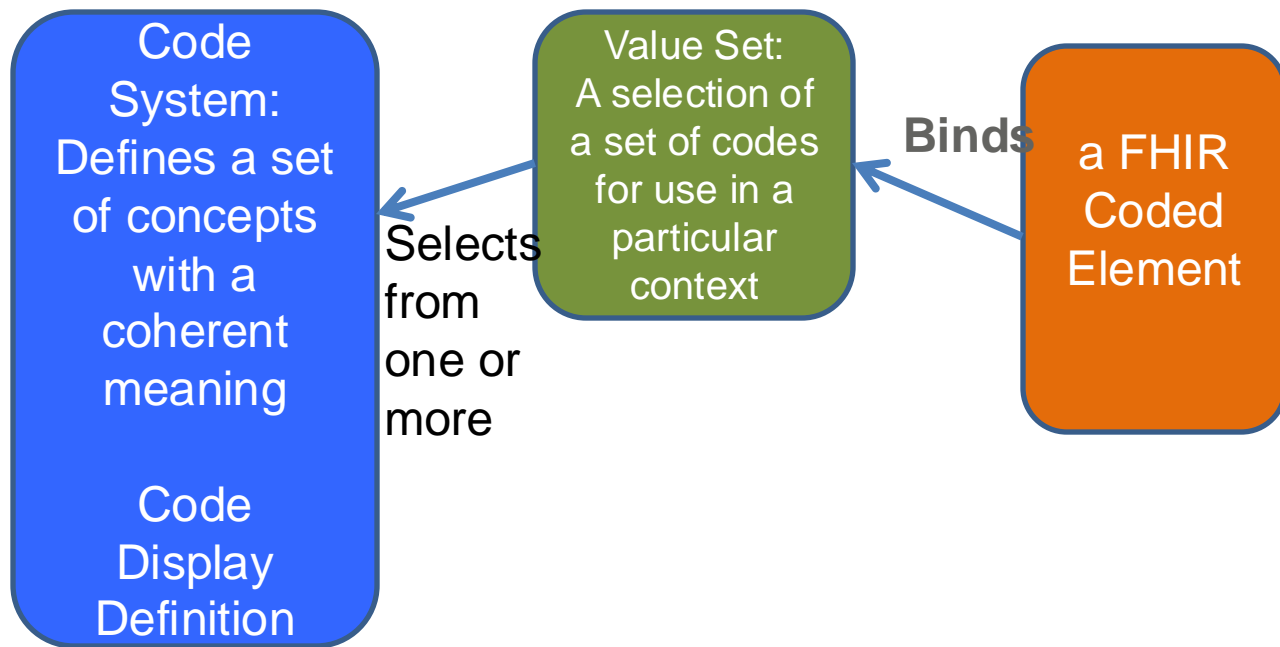
Fragment from <http://www.hl7.org/fhir/Observation.html>

# Examples of Coded Data in FHIR

- **code** Datatype
  - e.g. Patient gender = “**male**”
- **CodeableConcept** Datatype
  - e.g. Observation code for a Blood Glucose measurement:  
**LOINC = “2339-0” (Glucose [Mass/volume] in Blood)**  
**Displayed as Glucose, Blood**
- Quantity Datatype
  - Units of measure for the Blood Glucose measurement:  
**80 UCUM units = mg/dL**



# Bindings



# Binding Strength

- How closely the options in the value set should be followed
- Values
  - **Required** (must come from set)
  - **Extensible** (may use alternate if have to)
  - **Preferred** (don't have to, but should)
  - **Example** (set isn't specified)
- Can use a profile to vary
  - Make **stronger** not weaker

## Let's discuss with an example (1)

- A brand new agency, called **Fictitious Office for Control of Animal Behaviour** (FOCAB), requires prompt reporting of some specific problems related to animals injuring humans
- The FHIR IG involves using a resource with a **code (CodeableConcept)** element.
- It will be used to represent "what happened".
- EHRs can report **code** to FOCAB using **either SNOMED CT or ICD-10**.

# Let's discuss with an example (2)

These are the codes requiring report to FOCAB

CodeSystem

## CODES FROM ICD-10

(<http://hl7.org/fhir/sid/icd-10>)

W53 - Contact with rodent  
W54 - Contact with dogs  
W55 - Contact with other mammals  
W56 - Contact with non venomous sea animal  
W57 - Contact with non venomous insect or arthropods  
W58 - Contact with crocodile or alligator  
W59 - Contact with non venomous reptiles  
W61 - Contact with domestic birds  
W62 - Contact with non-venomous amphibians  
T63 - Toxic effect of contact with venomous animals

## CODES FROM SNOMED CT

All the descendants (is-a) of

'Bite of a non-human animal': 782162007 (is-a: 782162007)  
'Accidental physical contact with animal': 418589001 (is-a: 418589001)

We created a new ValueSet called  
<http://focab.gov/fhirig/ValueSet/focuscodes>

which includes all these codes from  
SNOMED CT and ICD-10

This ValueSet has two functions:

- Know when to report to FOCAB  
(detection triggers report)
- Validate code. Only these codes are valid

ValueSet

# Let's discuss with an example (3): Questions

For each code in this list

Discuss if it is valid for the FOCAB FHIR IG or not

**#1**

```
"code": {  
  "coding": [  
    {  
      "system": "http://example.org/fhir/conditions",  
      "code": "1234",  
      "display": "Exemplitis"  
    }  
  ],  
  "text": "Exemplitis"  
},
```

**#2**

```
"code": {  
  "coding": [{  
    "system": "http://hl7.org/fhir/sid/icd-10",  
    "code": "55.31",  
    "display": "Bitten by Hoof Stock"  
  }  
],  
  "text": "Bitten by Hoof Stock"  
},
```



# Let's discuss with an example (4): Questions

For each code in this list

Discuss if it is valid for the FOCAB FHIR IG or not

**#3**

```
"code": {  
  "coding": [  
    {  
      "system": "http://focab.gov/fhirig/ValueSet/focuscodes",  
      "code": "W59.22",  
      "display": "Struck by a turtle"  
    }  
  ],  
  "text": "Struck by Crush"  
},
```



**#4**

```
"code": {  
  "coding": [{  
    "system": "http://hl7.org/fhir/sid/icd-10",  
    "code": "W60",  
    "display": "Contact with nonvenomous plant  
thorns and spines and sharp leaves"  
  }  
],  
  "text": "Hurt by a cactus"  
},
```



# Let's discuss with an example (5): Questions

For each code in this list

Discuss if it is valid for the FOCAB FHIR IG or not

**#5**

```
"code": {  
  "coding": [  
    {  
      "system": "http://snomed.info/sct",  
      "code": "770957005",  
      "display": "Bite of a seal"  
    }  
  ],  
  "text": "Bitten by a seal in the street"  
},
```



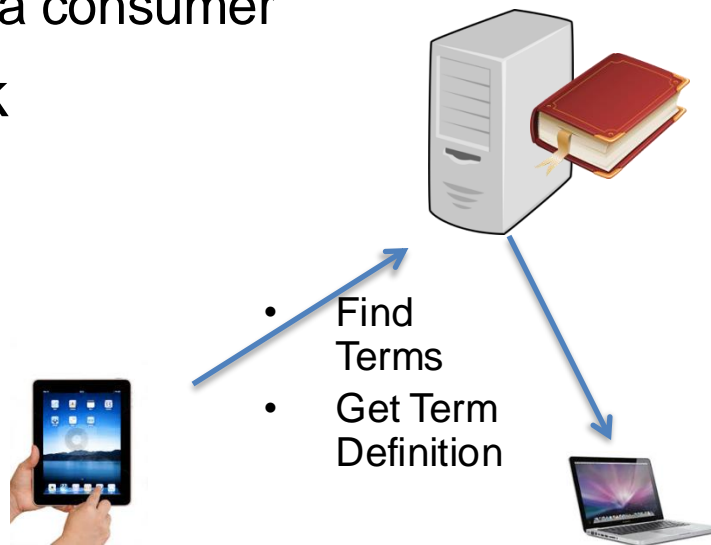
**#6**

```
"code": {  
  "coding": [  
    {  
      "system": "http://hl7.org/fhir/sid/icd-10",  
      "code": "T63.2",  
    }  
  ],  
  "text": "Venom of Scorpion"  
},
```



# Terminology Services on FHIR

- Provides 'services' for consumers to access terminology
  - Hide the complex stuff from a consumer
- Uses Operations framework
  - Get definition for a concept
  - Find a concept
    - Within a ValueSet



<http://hl7.org/implement/standards/fhir/terminology-service.html>



# Terminology Servers

- Lots of Complexity
  - Code Systems
  - Value Sets
  - Bindings
- Most applications are much simpler in capacities and needs.
  - Usually lists of codes shown in a table
- A terminology server concentrates the complexity in only one system, that can even be a third party service.

# Application needs

- Give me a list of codes
- ¿Is this code valid?
- ¿How do I show this concept?
- Translate this code into another code system
- Integrate terminology search into my app

# Terminology Operations (FHIR)

- **\$expand** – obtain expansion for a valueset
- **\$lookup** – given code/valueset, give display
- **\$validate-code** – ¿is it valid? (including subsumption test)
- **\$translate** – translate this into another code system

# US Terminology – Use Cases and Domain

(Main Use)

- LOINC: lab tests, document sections, vital signs
- SNOMED CT: problems, diagnostics, allergies
- RXNORM: medication (products and drugs)
- CVX: Vaccine codes
- CPT: Procedures
- ICD-10 CM: conditions

# PH Terminology – Main Repository

- UMLS
- CVX
- OMB: Race, Ethnicity
- VSAC - NIH Terminology Server :  
Public Health – OIDs?

vsac.nlm.nih.gov/valueset/expansions?pr=all

Sign In | Author Registration | Contact Us

Welcome Search Value Sets Download Comparison Tool Browse Code Systems Help

Search the NLM Value Set Repository. Program: All Expansion Version: Latest

COVID-19 Value Sets: 0

Refine by: Steward Code System

Query: Enter value set id, codes, words... Search Clear

Include Retired Value Sets: ☐

Search Results API Resource

Results for All : Latest Export Search Results

Select a hyperlinked OID to see its value set expansion detail.

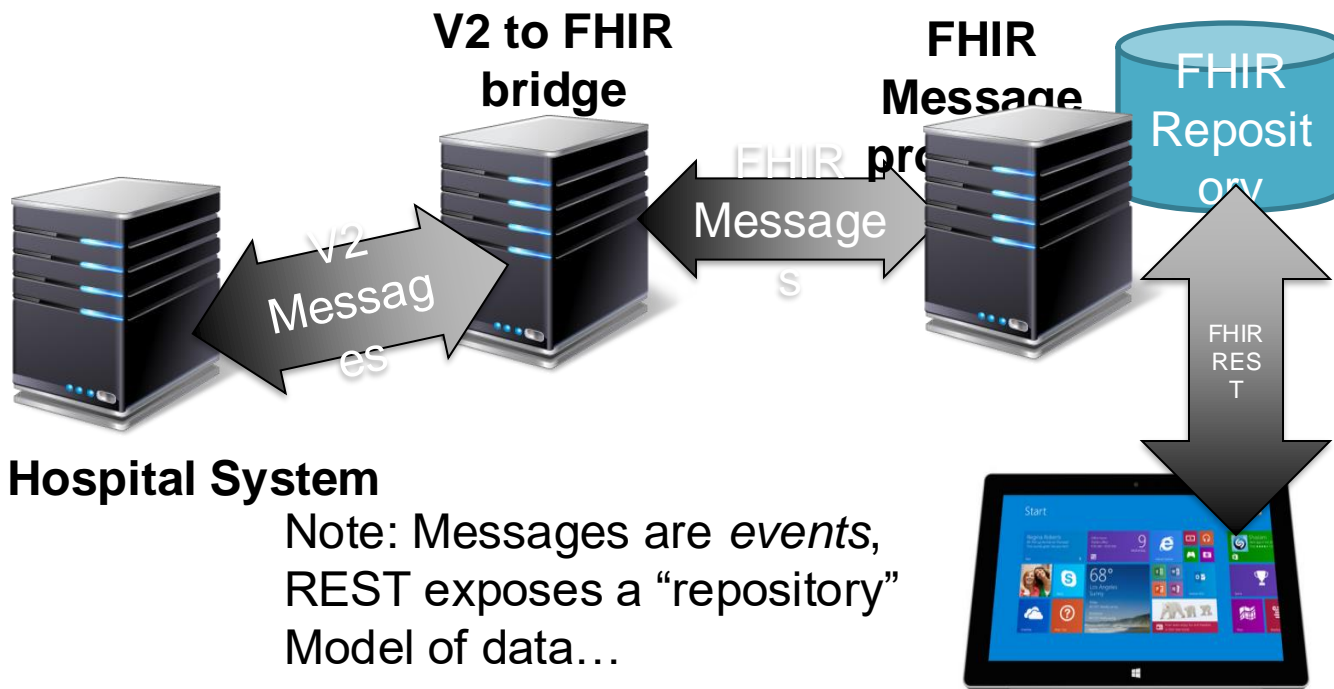
Name	Code System	Definition Type	Steward	OID	Expansion Status	Code Count
<input type="checkbox"/> 0 to IIBB Colorectal Cancer Staging	SNOMEDCT	Extensional	CancerLinQ	2.16.840.1.113762.1.4.1260.79	Active	9
<input type="checkbox"/> 2 Hour Blood Glucose Test	LOINC	Extensional	AHA	2.16.840.1.113762.1.4.1178.25	Active	4
<input type="checkbox"/> 20 to 42 Plus Weeks Gestation	ICD10CM	Grouping	The Joint Commission	2.16.840.1.113762.1.4.1110.67	Active	51
<input type="checkbox"/> 20 to 42 Plus Weeks Gestation	ICD10CM	Extensional	The Joint Commission	2.16.840.1.113762.1.4.1110.70	Active	24
<input type="checkbox"/> 20 to 42 Plus Weeks Gestation	SNOMEDCT	Extensional	The Joint Commission	2.16.840.1.113762.1.4.1110.71	Active	27
<input type="checkbox"/> 24 Hour Urine Protein Excretion	LOINC	Intensional	HL7 Patient Care WG Ste	2.16.840.1.113762.1.4.1222.792	Active	5
<input type="checkbox"/> 24 Hour Urine Volume	LOINC	Intensional	HL7 Patient Care WG Ste	2.16.840.1.113762.1.4.1222.791	Active	2
<input type="checkbox"/> 3 Mirror Goldmann exam	SNOMEDCT	Extensional	ASRS	2.16.840.1.113762.1.4.1047.611	Active	1
<input type="checkbox"/> 37 to 38 Weeks Gestation	ICD10CM	Grouping	The Joint Commission	2.16.840.1.113762.1.4.1110.69	Active	4
<input type="checkbox"/> 37 to 38 Weeks Gestation	ICD10CM	Extensional	The Joint Commission	2.16.840.1.113762.1.4.1110.74	Active	2
<input type="checkbox"/> 37 to 38 Weeks Gestation	SNOMEDCT	Extensional	The Joint Commission	2.16.840.1.113762.1.4.1110.75	Active	2

# BLOCK 3 – MAPPING

1. Mapping – HL7 V2-to-FHIR
2. Assignment

NO QUESTIONS FOR THIS BLOCK – JUST A  
HANDS-ON ASSIGNMENT

# Mapping: HL7 V2 and FHIR



# Why is HL7 V2-to-FHIR Conversion Important

- HL7 V2.x is still the lingua franca of healthcare, despite all its dialects (different versions and sui generis utilization and implementation)
- If you want ALL the clinical information from a site or group of site as input for a FHIR based clinical repository, the easiest way is to 'listen' to existing information flows, and they are usually implemented as HL7 V2 feeds: ADT, Lab Results, Immunizations.



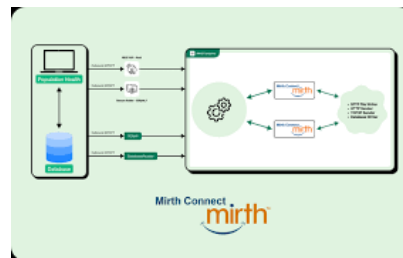
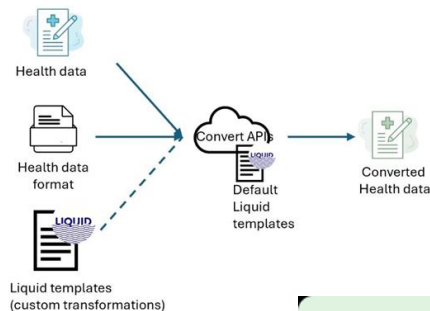
## How it is done

- There is an official mapping for the most common HL7 V2 messages (ADT, Orders, Results, Scheduling)
- <https://build.fhir.org/ig/HL7/v2-to-fhir/>
- **IT IS NOT A TOOL:** it's a mapping.
- **Is it a definitive mapping? NO. Why?** because each HL7 V2 implementation can be opinionated, extended, etc. It's very common to implement a custom script to tackle the specifics. Sorry

# Some tools for mapping

- **FUME**
- **Microsoft FHIR Converter**
- **Mirth Connect**

Tools to convert instances of HL7V2.x, CDA R2 or custom formats from/to FHIR JSON/XML



# Mapping: FUME

FUME <https://try.fume.health/>



FUME is a FHIR conversion and transformation engine, designed to enable any data analyst to express FHIR-related data conversions in an easy, compact and expressive syntax.

FUME was created by a company from Israel called Outburn.

Can connect to a FHIR server that enables it to be used as a repository for saved FUME mappings & translation tables. Uses FHIR-oriented functions that assist in the transformation to or from FHIR resources. Has a RESTful API to run the transformation against a JSON, XML, CSV or HL7 V2 input

# Mapping : FHIR Converter

FHIR-Converter <https://github.com/microsoft/FHIR-Converter>

- Open-source project that enables conversion of health data from legacy formats to and from FHIR. The FHIR converter uses the [Liquid template language](#) and the .NET runtime.
- The FHIR converter supports the following conversions: **HL7v2 to FHIR**, **C-CDA to FHIR**, **JSON to FHIR**, **FHIR STU3 to R4**, and **FHIR to HL7v2** (*Preview*).
- Also available as API operation in the Azure based FHIR store

# Mapping : Mirth Connect



## Mirth Connect <https://github.com/nextgenhealthcare/connect>

Mirth Connect translates message standards into the one your system understands. Whenever a "foreign" system sends you a message, Mirth Connect's integration capabilities expedite the following:

- Filtering — Mirth Connect reads message parameters and passes the message to or stops it on its way to the transformation stage.
- Transformation — Mirth Connect converts the incoming message standard to another standard (e.g., HL7 to XML).
- Extraction — Mirth Connect can "pull" data from and "push" data to a database.
- Routing — Mirth Connect makes sure messages arrive at their assigned destinations.
- Users manage and develop channels (message pathways) using the interface known as the Administrator



**WARNING NO  
LONGER OPEN  
SOURCE FROM  
VERSIONS APRIL  
2025 AND BEYOND**

# Assignment #4

We will proceed to work in groups now, and solve Assignment #4

[Assignment #4 - HL7 V2.5 To FHIR Mapping](#)

