

I have implemented CDA R2 from “the ground up” and I can honestly say that it is a real mess. The real problem is that it feels like **it was designed by people who haven't done much information designing in their careers; people who are experts in health care domains, but not in information design. Software people coming to the CDA for the first time are utterly baffled by its ornate, labyrinthine structures and quirky vocabulary.**