** Publication Request of HL7 Standards Material**

Please use this form to submit the request to the TSC.

|  |  |  |  |
| --- | --- | --- | --- |
| Standards Material/Document - check one: | | | |
| X | DSTU |  | Normative |
|  | Informative |  | Errata |

|  |  |
| --- | --- |
| Date of this request: | 2014-01-19 |
| HL7 Work Group making this request and date /URL of approval minutes: | FHIR Management Group 2014-09-19  http://wiki.hl7.org/index.php?title=20140119\_FGB\_FMG\_WGM |
| Balloted Name of the standard for which request is being made: | HL7 Fast Healthcare Interoperability Resources Specification (FHIR™), Release 1 |
| Publication Name requested: | Fast Health Interoperable Resources (FHIR) DSTU Release 1 |
| If CMET, list IDs balloted: | N/A |

|  |  |
| --- | --- |
| URL of Project Scope Statement or Project Insight Number: | 891 |

|  |  |  |
| --- | --- | --- |
| Document Realm: |  | |
| Ballot cycle in which the document was successfully balloted: | | 2013-Sep |

|  |  |  |  |
| --- | --- | --- | --- |
| Results of that ballot (following reconciliation activities): *(not needed for errata or unballoted DSTU update)* | | | |
| Vote | Number | Vote | Number |
|  |  |  |  |
| Affirmative | **80** | Not Returned | 26 |
| Negative | 42 | Total in ballot pool | 197 |
| Abstentions | 49 | Needed for Passage | **74** |

|  |  |  |
| --- | --- | --- |
| If DSTU Update: What review process was followed and when was it approved by WG? (peer review, wiki, comment ballot) | | N/A |
| Date on which final document/standards material was supplied to HQ | | 2014-01-31 (or sooner) |
| URL of publication material/ SVN repository and publishing facilitator: | http://gforge.hl7.org/svn/fhir/trunk/build | |
| Special Publication Instructions: | Publication is generated from source at identified location. Will be hosted at http://hl7.org/fhir | |

*(not needed for errata)*

|  |  |
| --- | --- |
| URL of ballot reconciliation document: | http://www.hl7.org/documentcenter/public/ballots/  2013SEP/reconciliation/recon\_fhir\_r1\_d1\_2013sep.xlsx |

*(not needed for errata)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Has the Work Group posted its consideration of all comments received in its reconciliation | | | | |
| document on the ballot desktop? | X | Yes |  | No |
| Substantive Changes Since Last Ballot? | X | Yes |  | No |

*(not needed for errata)*

|  |  |
| --- | --- |
| Cross Artifact Consistency - for RIM-Based Standards (not Implementation Guides), check all that apply: | |
| NA | Standard uses CMETs from HL7-managed CMETs in COCT, POCP (Common Product) and other domains |
| NA | Standard uses harmonized design patterns (as defined through RIM Pattern harmonization process) |
| NA | Standard is consistent with common Domain Models including but not limited to Clinical Statement, Common Product Model and "TermInfo" |

For DSTU:

Number of months the Work Group wishes to have the document published as a DSTU:  
\_\_\_12 months \_\_\_18 months \_X\_24 months

Notes: Once approved by the TSC, the document will be posted to: <http://www.hl7.org/dstucomments/index.cfm>. There is a database here for early adopters to enter comments/corrections/suggestions.

In accordance with §13.02.05 of the Governance and Operations Manual—Draft Standard for Trial Use (DSTU)— Upon approval the proposed draft standard, with the concurrence of the TSC, shall be released for publication as a DSTU.

For Informative:

Does the Work Group or TSC wish to register this document with ANSI as a Technical Report?

|  |  |  |  |
| --- | --- | --- | --- |
| ? | Yes |  | No |
| Justification for registration with ANSI: | | | | | | This material is likely to receive widespread adoption and may be leveraged by SDOs other than HL7. Providing early awareness of the material to non-HL7 organizations will allow them to participate in the DSTU process. |

**Note:** While registering the document with ANSI does not infer any status on the document, it does ensure notification of the availability of the informative documents to a broad audience.

In accordance with §13.01.05 of the GOM, informative documents, once approved, require the concurrence of the TSC to be released for publication.

Please provide the following information for the publication of the product brief:

**Family**: (select one)

* Arden
* CCOW
* CDA
* Education
* EHR
* V2
* V3

X FHIR

**Section**: (select those that are applicable:)

X Clinical and Administrative Domains

* EHR Profiles
* Implementation Guides
* Rules and References
* Education and Awareness

**Category**: (select those that are applicable:)

| *e.g. briefs under Clinical and Administrative Domains* | *e.g. briefs under Rules and References* |
| --- | --- |
| Cardiology | CCOW |
| X Care Provision | X Data Types |
| X Clinical Genomics | Decision Support |
| Clinical Statement | X Encoding Syntax |
| Community-Based Health | X Methodology Specifications |
| Decision Support | X Security and Privacy |
| Domain Analysis Model | Services |
| Financial Management | Specification Errata |
| Functional Profile | Standard Reference Materials |
| HHSFR | X Structures |
| X Laboratory | X Terminology |
| X Materials Management | X Transport Specifications |
| Medical Records |  |
| X Patient Administration |  |
| X Patient Care |  |
| Patient Referral |  |
| X Personnel Management |  |
| X Pharmacy |  |
| X Public Health |  |
| Regulated Products |  |
| Regulated Studies |  |
| Scheduling |  |
| X Services |  |
| SPL |  |
| X Other: Imaging | X Other: Profiling |
| X Other: Medical Devices | X Other: Workflow |

**Parent standard**: (e.g. the standard to which an implementation guide applies)

|  |
| --- |
| N/A |

**Update/replace standard**: (e.g. is this a DSTU update, or is there an R1 specification which an R2 publication updates or replaces) – Please specify if this publication has a replacement, supplemental or addendum relationship to a prior standard or DSTU:

|  |  |
| --- | --- |
| N/A |  |

**Common name/search keyword**: Please specify if the publication is known by a common name internally to the Work Group or a specific search term/acronym should be provided to help users find the product.

|  |
| --- |
| Common Names/Aliases: FHIR |
| Search Keywords: FIRE REST Resource JSON |

**Description**: This is typically a short paragraph summarizing the use and intent of the standard, such as would be found in an overview paragraph in the published specification.

FHIR® – Fast Health Interoperable Resources (hl7.org/fhir) – is a next generation standards framework created by HL7. FHIR combines the best features of HL7’s Version 2, Version 3 and CDA® product lines while leveraging the latest web standards and applying a tight focus on implementability.

FHIR solutions are built from a set of modular components called “Resources”. These resources can easily be assembled into working systems that solve real world clinical and administrative problems at a fraction of the price of existing alternatives. FHIR is suitable for use in a wide variety of contexts – mobile phone apps, cloud communications, EHR-based data sharing, server communication in large institutional healthcare providers, and much more.

**Targets**: These are categories of potential users, implementers, or other interested parties such as those that are indicated on the Project Scope Statement under “Stakeholders/Vendors/Providers”. Select those that are applicable, or suggest others:

| **Stakeholders** | **Vendors** | **Providers** |
| --- | --- | --- |
| X Clinical and Public Health Laboratories | X Pharmaceutical | X Clinical and Public Health Laboratories |
| X Immunization Registries | X EHR, PHR | X Emergency Services |
| X Quality Reporting Agencies | X Equipment | X Local and State Departments of Health |
| X Regulatory Agency | X Health Care IT | X Medical Imaging Service |
| X Standards Development Organizations (SDOs) | X Clinical Decision Support Systems | X Healthcare Institutions (hospitals, long term care, home care, mental health) |
| Payors | X Lab | Other (specify in text box below) |
| Other (specify in text box below) | X HIS | N/A |
| N/A | Other (specify below) |  |
|  | N/A |  |

**Benefits**: This section will describe the benefits the standard or its implementation provides to healthcare, information technology, interoperability and the like. This section is often difficult to compose and will require careful editing by the review group(s). Please create phrases such as

FHIR offers many improvements over existing standards:

* A strong focus on implementation – fast and easy to implement (multiple developers have had simple interfaces working in a single day)
* Multiple implementation libraries, many examples available to kick-start development
* Specification is free for use with no restrictions
* Interoperability out-of-the-box– base resources can be used as is, but can also be adapted for local requirements
* Evolutionary development path from HL7 Version 2 and CDA – standards can co-exist and leverage each other
* Strong foundation in Web standards– XML, JSON, HTTP, Atom, OAuth, etc.
* Support for RESTful architectures and also seamless exchange of information using messages or documents
* Concise and easily understood specifications
* A Human-readable wire format for ease of use by developers
* Solid ontology-based analysis with a rigorous formal mapping for correctness

**Implementations/Case Studies**: This section would identify the known implementers of the standard, production or DSTU implementers, or any known adopters of the specification. Agencies or other organizations that sponsored the development of the specification could be listed here.

FHIR has been implemented by numerous organizations, both as part of Connectathon interoperability events as well as for pilot implementations. A complete listing of organizations can be found here:

<http://hl7.org/implement/standards/fhir/credits.html#credits>

**Development Background**: This section may be used for additional important information beyond the short summary in the Description, such as would be found in an Introduction section, in the published specification.

This DSTU is the first of several releases expected to culminate in a normative release in 2016/17. During this draft period, changes will occur, both in response to implementer feedback and through the incorporation of additional content. Adopters should consider the ramifications of the possibility of future changes when making use of this draft specification. Further guidance can be found here:

<http://hl7.org/implement/standards/fhir/credits.html#dstu>

**Reviewed By, and Date**: (i.e. the group or individuals endorsing this product brief information and the date the endorsement was approved)

|  |
| --- |
| FHIR Management Group & FHIR Governance Board 2014-01-24 |

Email this Request to [lynn@hl7.org](mailto:lynn@hl7.org).