

卫生部电子病历委员会临床检验结果共享系统互操作性规范厂商培训研讨会，2007年10月18-19日，北京

HL7 V3 基础框架



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北京甲骨文软件有限公司(Oracle)

2007/10/18 9:30-10:50

主要内容

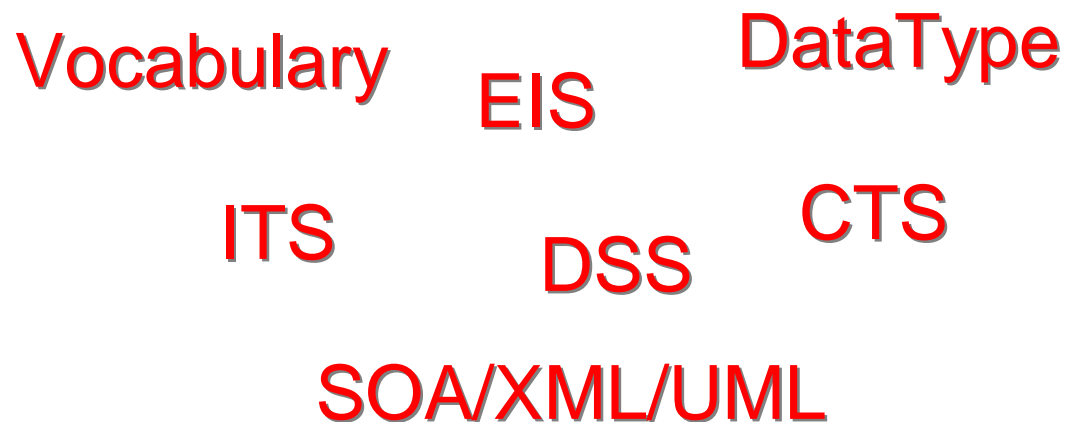
- HL7 V3 基础框架
- HL7 V3 实现技术规范（说明）
- Q&A

Healthcare Level 7 v3

An iceberg floating in a blue ocean. The tip of the iceberg is above the water, and the much larger base is submerged. The text 'HL7 Messages' is written in red on the visible tip of the iceberg.

HL7 Messages

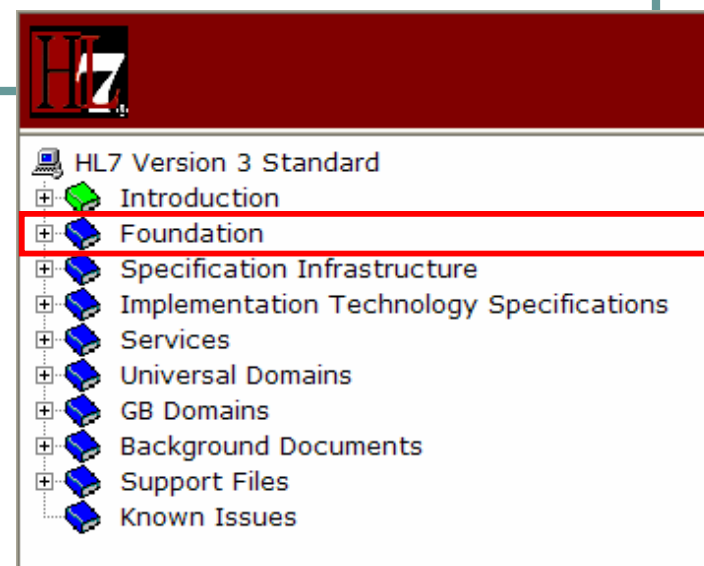
Reference Information Model



主要内容

- HL7 V3 基础框架
 - 基于语义的交互(Semantics)
 - HL7 V3基础(Foundation)
 - RIM, DataType, Vocabulary
 - CDA in HL7 V3

- HL7 V3 实现技术规范
- Q&A



主要内容

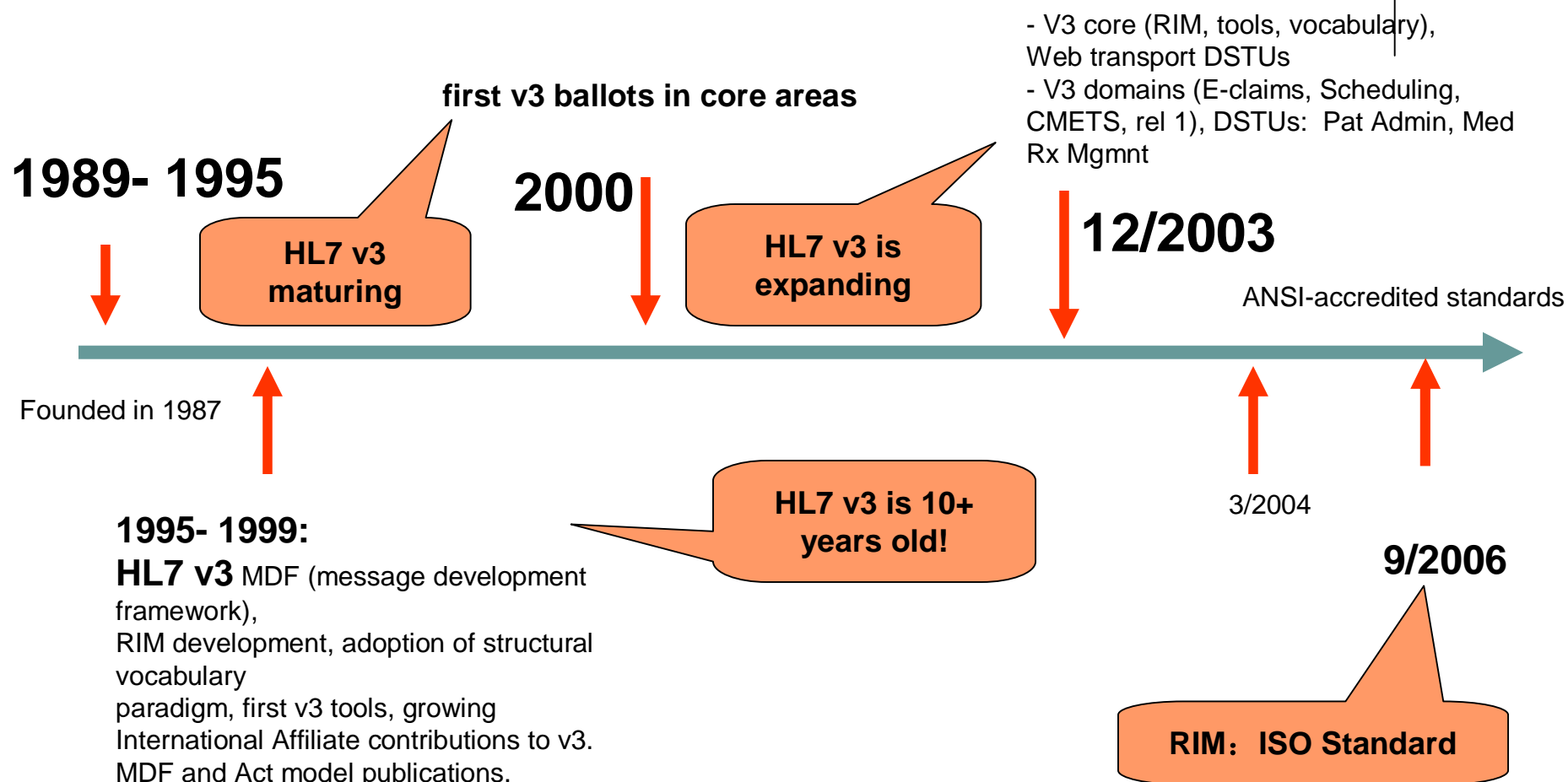
- HL7 V3 基础框架
- HL7 V3 实现技术规范（说明）
 - UML, XML
 - SOA4HL7
- Q&A



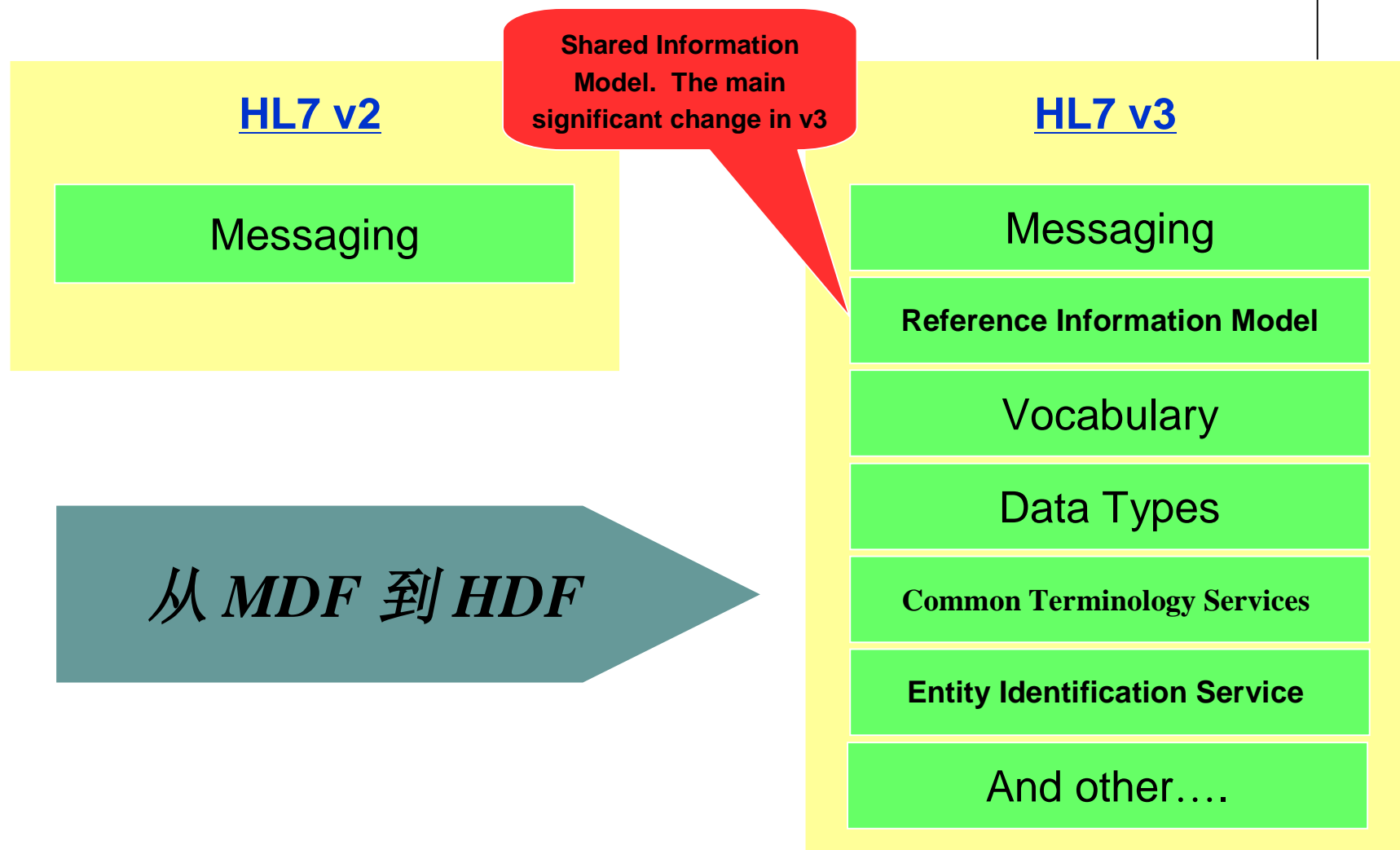
主要内容

- HL7 V3 基础框架
 - 基于语义的交互(Semantics)
 - HL7 V3基础(Foundation)
 - RIM, DataType, Vocabulary
 - CDA in HL7 V3
- HL7 V3 实现技术规范（说明）
- Q&A

HL7 v3 发展历史



HL7 v2 Vs. HL7 v3



语法 (Syntax) vs语义(Semantics)

- | The dog eats red meat.
- | The dog drinks blue trees.
- | Give the patient pain medication.
- | Give the patient medication for pain.
- | Time flies like an arrow.
- | Fruit flies like a banana.

语法 (Syntax) vs语义(Semantics)

- | Syntax *à structure*
 - | HL7 v2.x message
 - | X12 message
 - | XML document

- | Semantics *à meaning*
 - | ICD / CPT / SNOMED-CT code sets
 - | HL7 v3 message

互操作性 (Interoperability)

Main Entry: in·ter·op·er·a·bil·i·ty

: ability of a system ... to use the parts or equipment of another system

Source: Merriam-Webster web site

interoperability

: ability of two or more systems or components to exchange information and to *predictably* use the information that has been exchanged.

Source: IEEE Standard Computer Dictionary: A Compilation of IEEE Standard Computer Glossaries, IEEE, 1990]

Syntactic interoperability

Systems recognize the **structure** of the data

Semantic interoperability

Systems understand the **meaning** of the information

HL7 v2 和HL7 v3 消息

HL7 V2 Message:

```
MSH|^~\&|REG|TGH|LAB|TML|200502151126||ADT^A01|M12345|P|2.5|<cr>
EVN|A01|200502151126|<cr>
PID|1||PATID1234^5^M11||FORBES^JAMES^H||19670329|M||C|
1200 ELM STREET^^TORONTO^ON^M5G1Z6|GL| (416)555-
1212|(416)555-3434||S||X45 ^2^M10|123456789|987654^ON|<cr>
NK1|1|FORBES^SADIE^K|WIFE|||CP^Contact person|<cr>
PV1|1|I|0^2012^01|E|||004777^LEBAUER^SARA^J.||TRMA|||A
DM|A0|<cr>
```

HL7 v2 和 HL7 v3 消息

HL7 V3 Message:

```
<PRPA_MT400001HT03.EncounterEvent moodCode="EVN" type="PatientEncounter" classCode="ENC">
  <id extension="ENC.P0001.1" root="10.301.3.10.0"/>
  <effectiveTime htb:dataType="IVL_TS" operator="I">
    <low value="200601101201"/>
    <high value="200602101202"/>
  </effectiveTime>
  <subject contextControlCode="OP" type="Participation" typeCode="SBJ">
    <Patient type="Patient" htb:association="role" classCode="PAT">
      <id extension="PAT.P0001" root="10.301.5.10"/>
      <Person type="Person" determinerCode="INSTANCE" htb:association="player" classCode="PSN">
        <id extension="PSN.P0001" root="10.301.1.10"/>
        <name use="L" htb:dataType="PN">
          <family encoding="TXT" partType="FAM">萨达姆</family>
        </name>
        <telecom value="TEL:+86 10 21450001" use="H"/>
        <administrativeGenderCode code="1" codeSystemName="GenderCode_301"/>
        <birthTime value="198009101209"/>
        <addr use="H">
          <postalCode encoding="TXT" partType="ZIP">X0001</postalCode>
          <streetAddressLine encoding="TXT" partType="SAL">伊拉克</streetAddressLine>
        </addr>
        <raceCode code="2034-7" codeSystemName="Race"/>
      </Person>
      <Organization type="Organization" determinerCode="INSTANCE" classCode="ORG">
        <id extension="ORG.OG.0004" root="10.301.1.20"/>
      </Organization>
    </Patient>
  </subject>
</PRPA_MT400001HT03.EncounterEvent>
```

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HL7 V3 基础框架

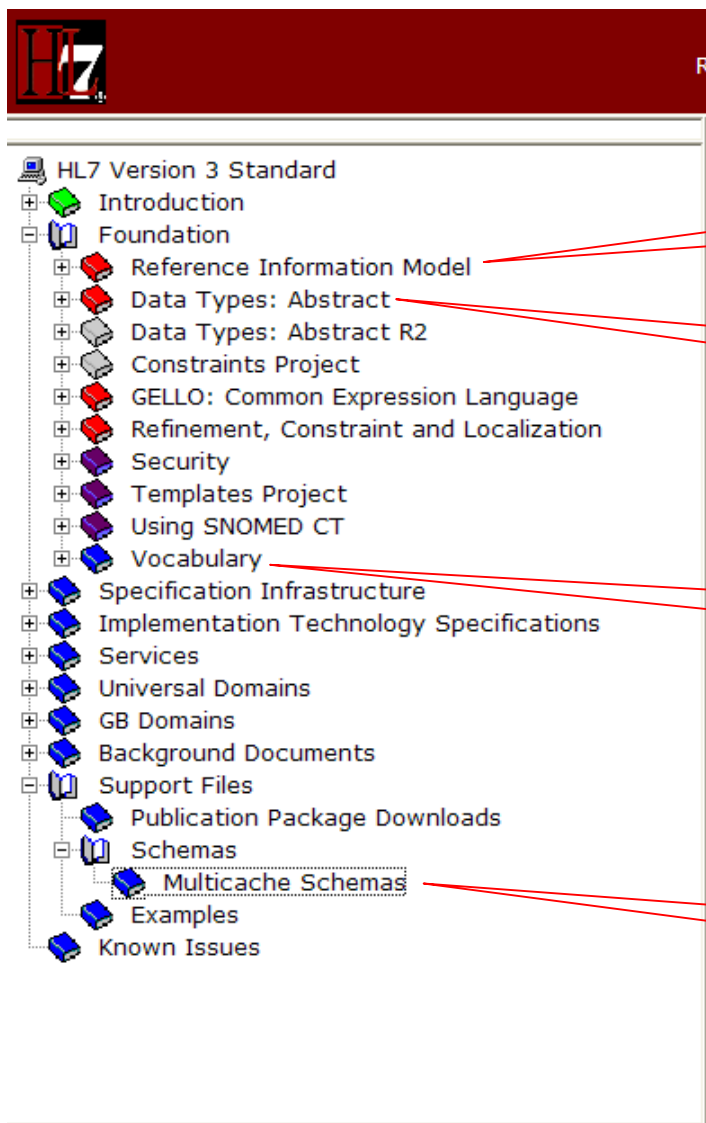
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语义交互的支柱

Necessary but *not* Sufficient

- | Common model across all domains-of-interest: 通用信息模型
 - | Concepts and relationships
 - | Information model vs Data model
- | Robust, formal Data Type Specification: 数据类型
- | Methodology for binding value sets to concept-based terminologies: 词汇库 (Vocabulary)
- | Formal process for defining interchange structures: 消息结构

HL7 V3 基础



RIM:信息模型

Datatype:数据类型

Vocabulary:词汇库

消息结构定义

HL7 v3 RIM

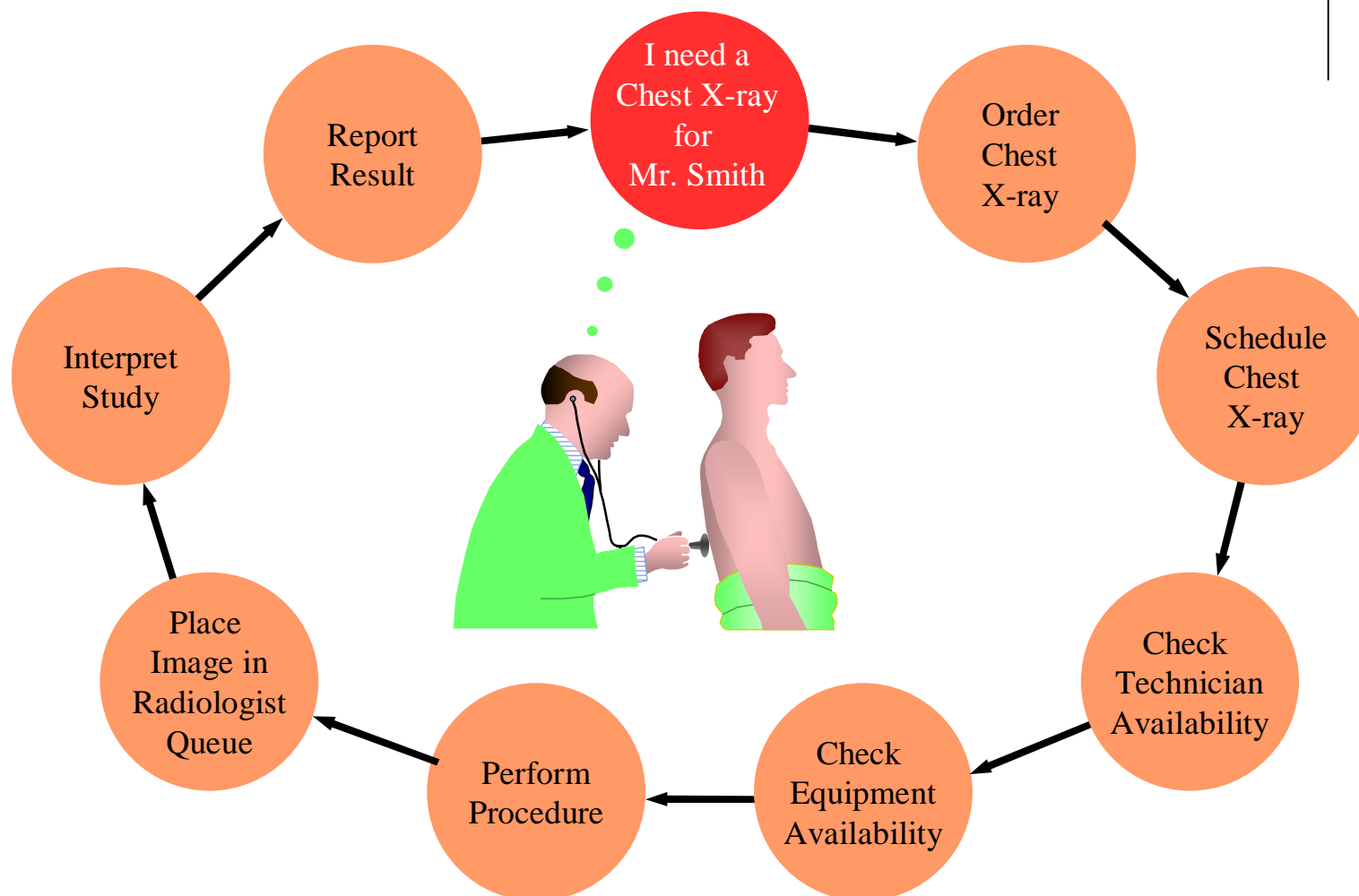
The HL7 RIM是一个成熟的关于医疗应用的信息模型

已被接纳为ISO标准 'ISO/HL7 21731:2006' 18 Sep 2006

HL7 RIM支持 interfaces and system design

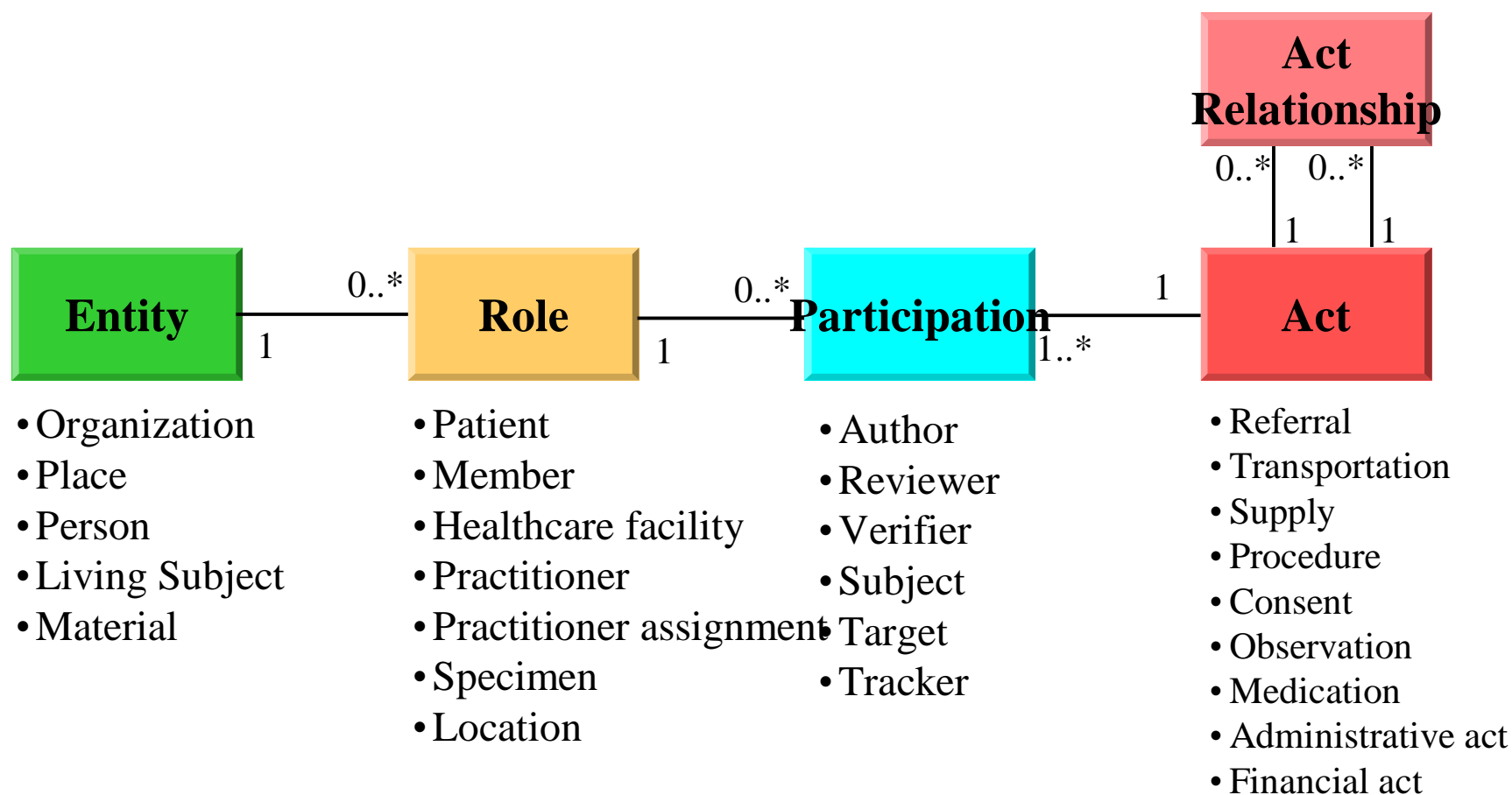
- 丨 不仅仅为定义 messages 使用, 还支持 CDR/E.H.R. applications, Structured Documents, templates, rules, etc.
- 丨 不仅仅涉及 clinical 还覆盖 patient administrative, financial, public health, genomics
- 丨 不仅仅是一个 MDF (message development framework), 还是 HDF (health development framework)

医疗行为/事务



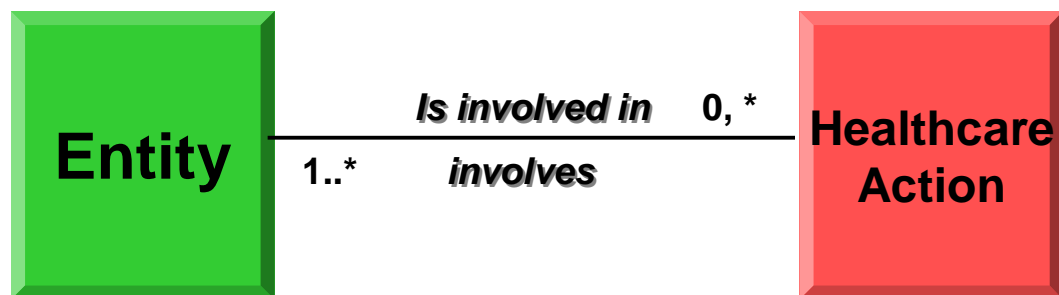
HL7 Version 3

参照信息模型 (*Reference Information Model*)



医疗活动的基本信息结构

- 一个实体 (Person or Organization) 参与0到N个 医疗活动



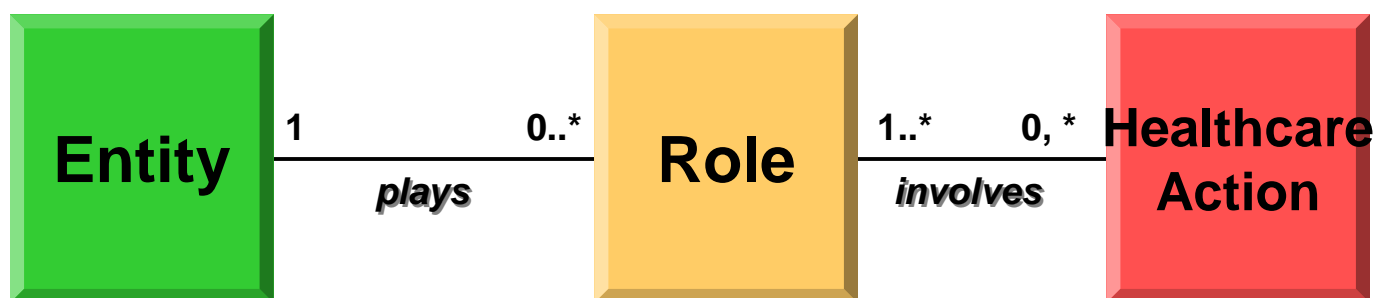
- 一个医疗活动涉及1到多个实体 (Persons or Organizations)

问题：如何判断这个人是一个医生还是一个病人？

医疗活动的基本信息结构

- 一个实体 (人或者组织) 在医疗活动中担当的角色 (0..N)

- 一个实体 (人或者组织)担当特定的角色参与到医疗活动中 (0..N)

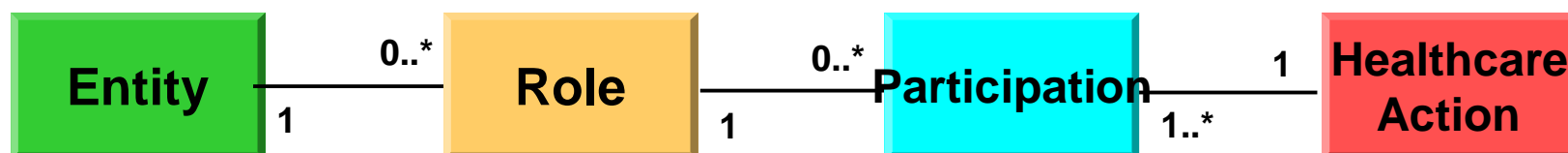


问题：如何表述一个医生在一个具体的医疗行为中所担任的具体的职责？比如：在一个手术中，他是主刀医生还是助手？

医疗活动的基本信息结构

- 一个实体 (人或者组织) 在医疗活动中担当的角色 (0..N)

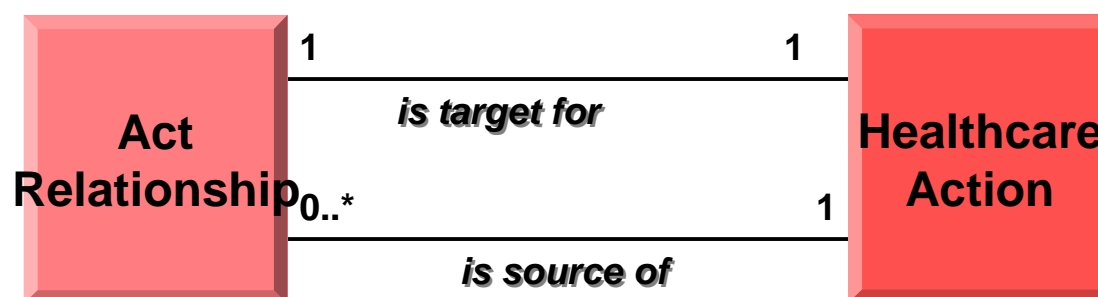
- 一个实体 (人或者组织) 担当特定的角色承担特定的职责参与到具体的医疗活动中 (0..N)



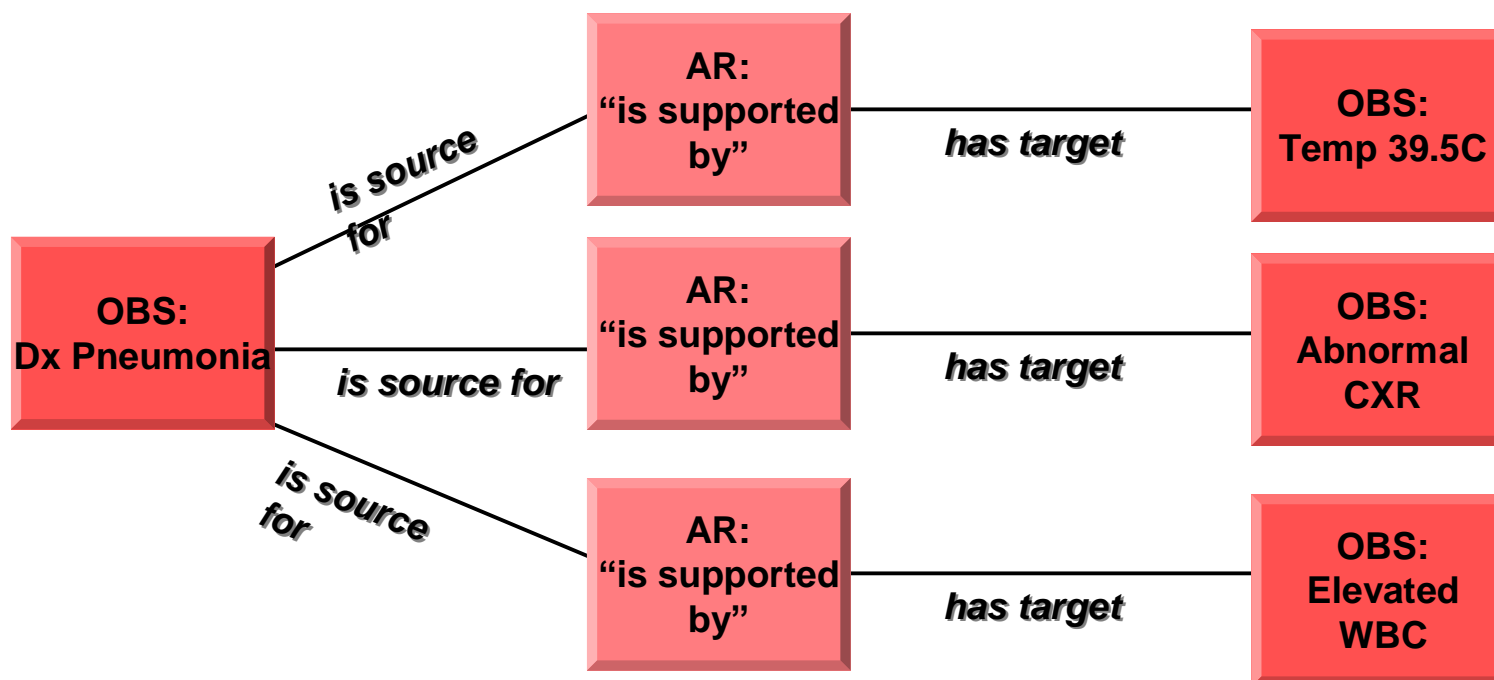
- 一个实体 (人或者组织) 担当特定的角色承担特定的职责 (0..N)

医疗活动的基本信息结构

ActRelationship 用来表示医疗活动/行为之间的关系（因果/组成/参照标准等等）

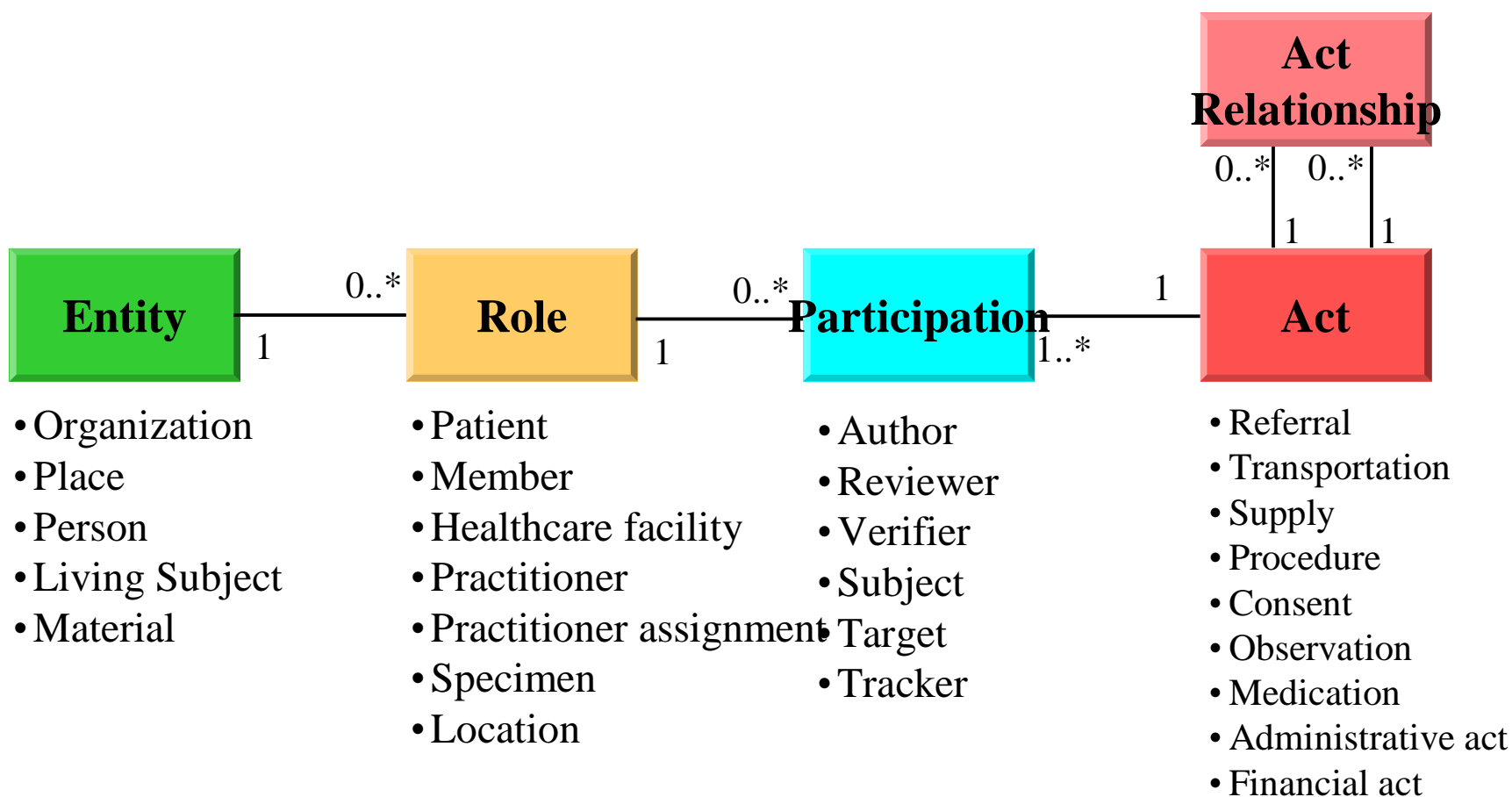


医疗活动的基本信息结构



HL7 Version 3

参照信息模型 (*Reference Information Model*)

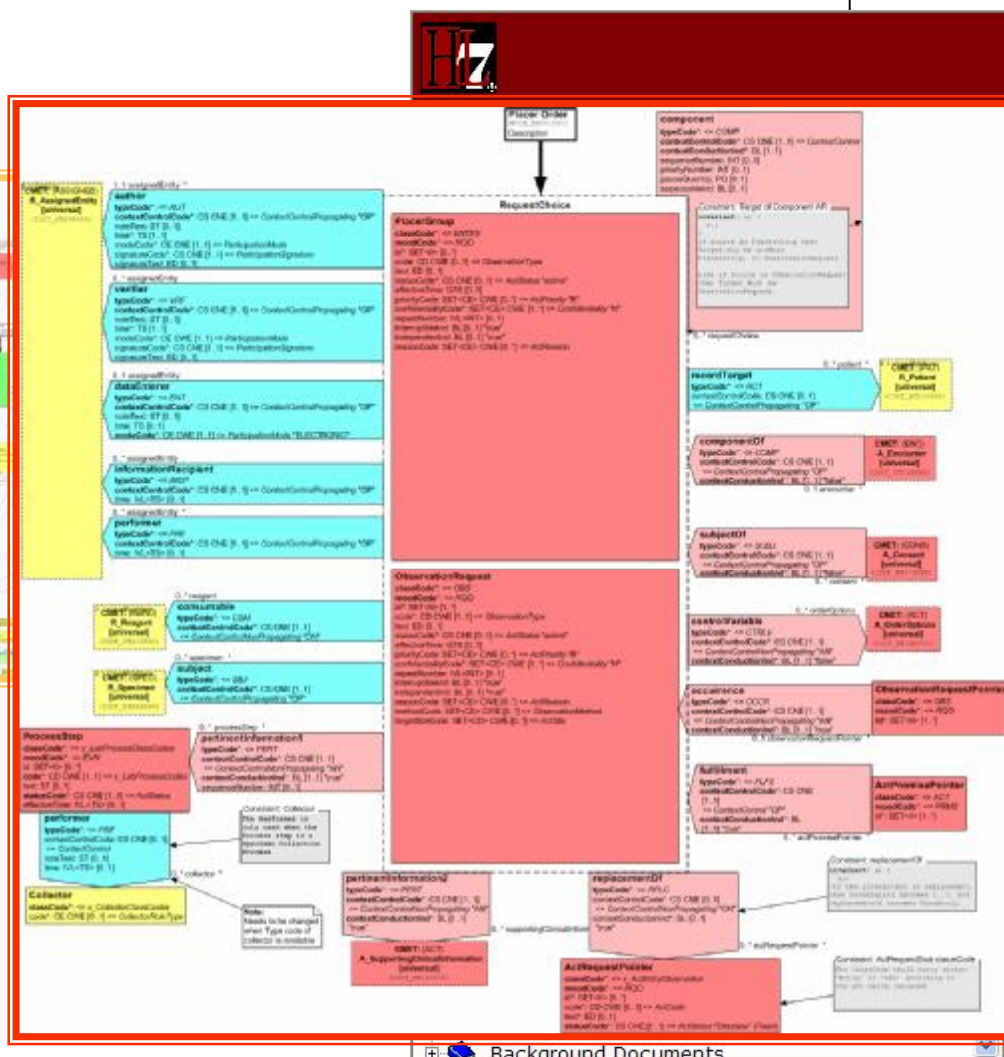
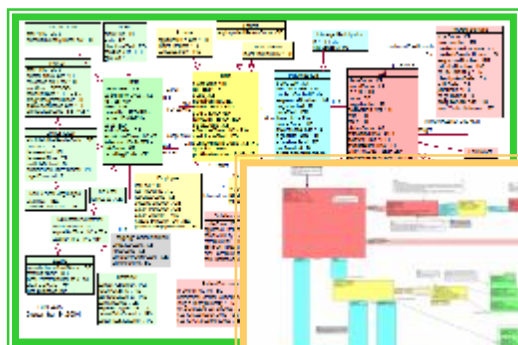


从 RIM à DIM à RMIM

RIM

DIM

RMIM



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HL7 V3 基础框架

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HL7 V3如何描述医疗事务？

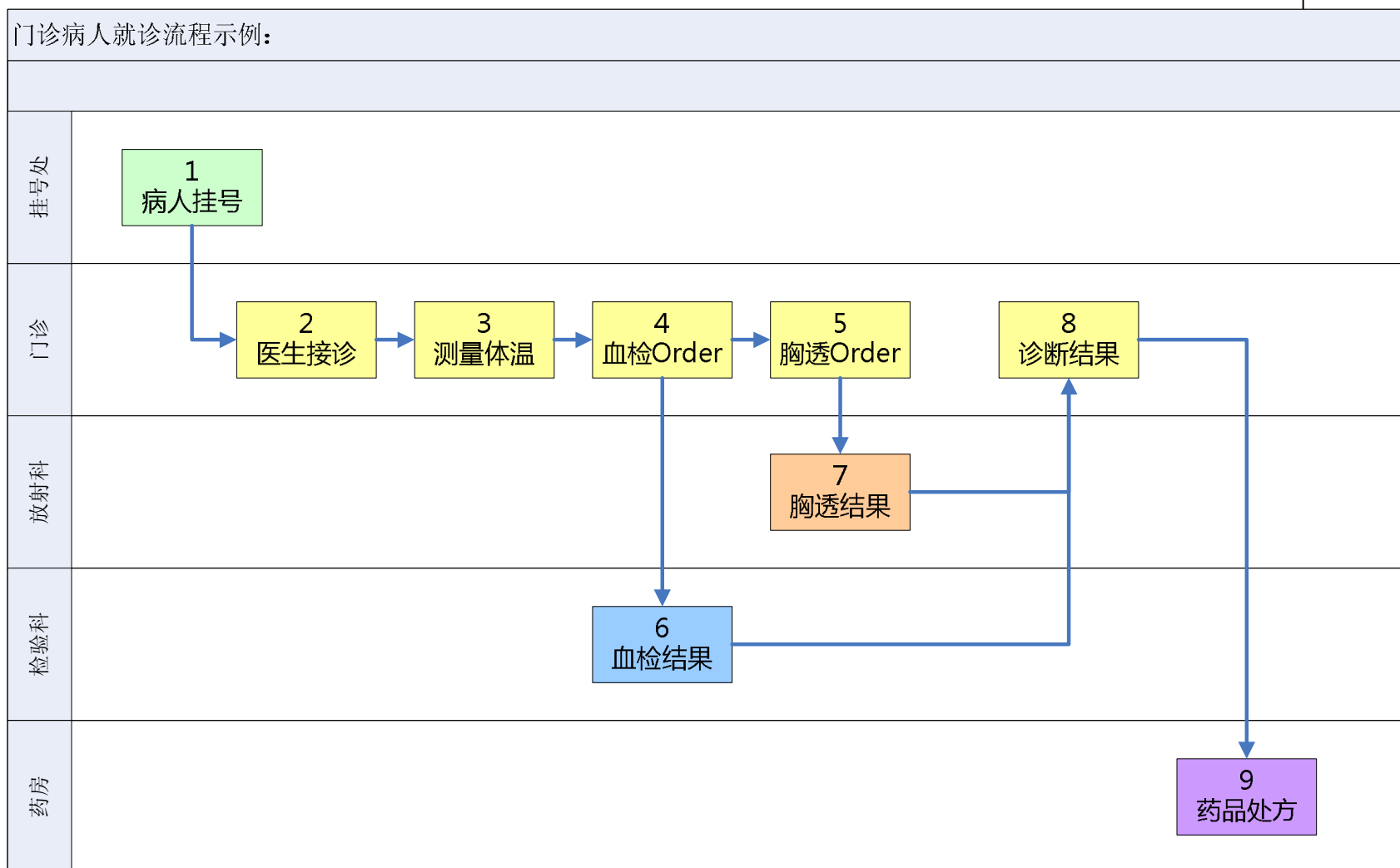
基于 HL7 V3

临床业务信息的描述

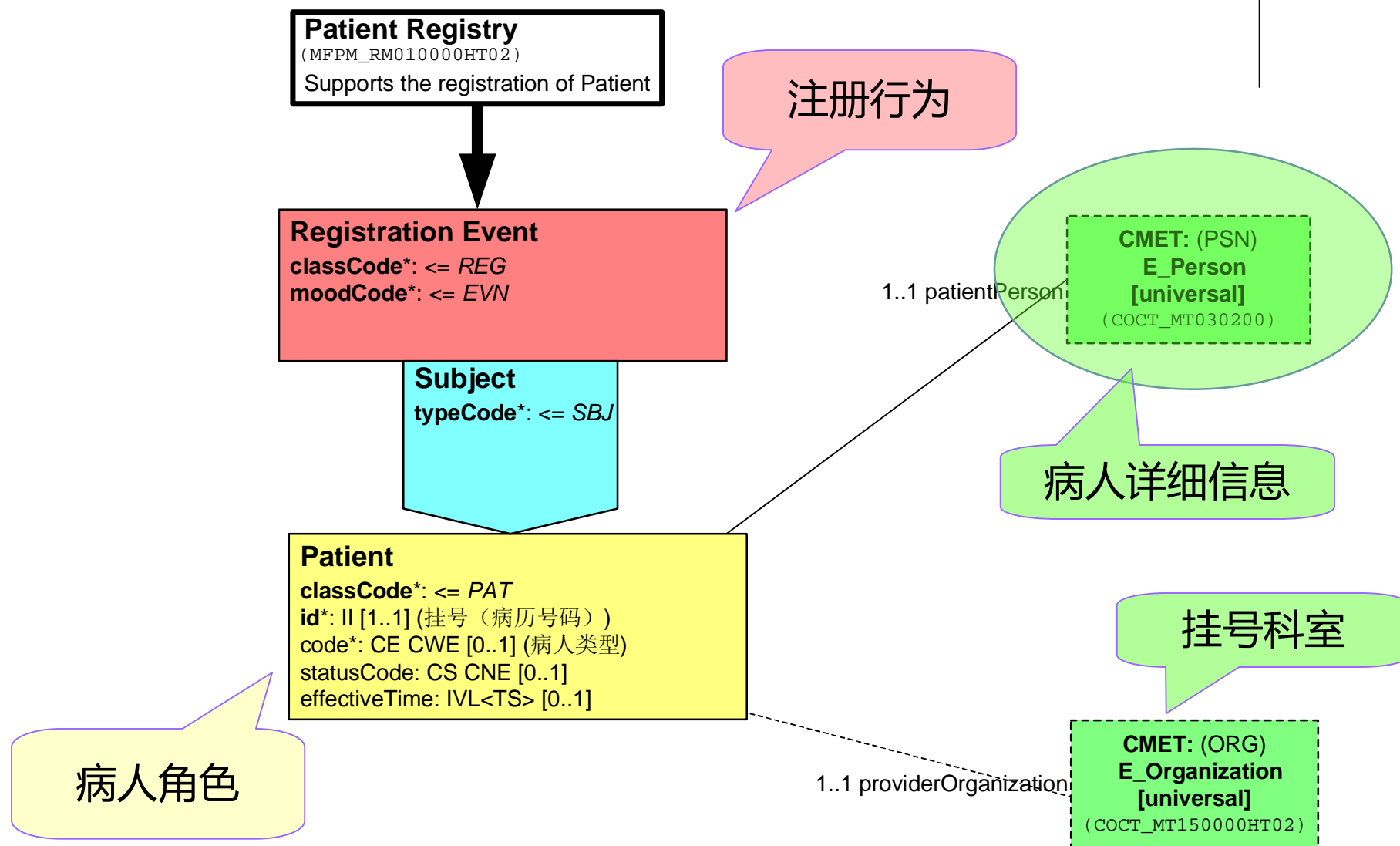
（门诊业务）

示例 (Scenario)

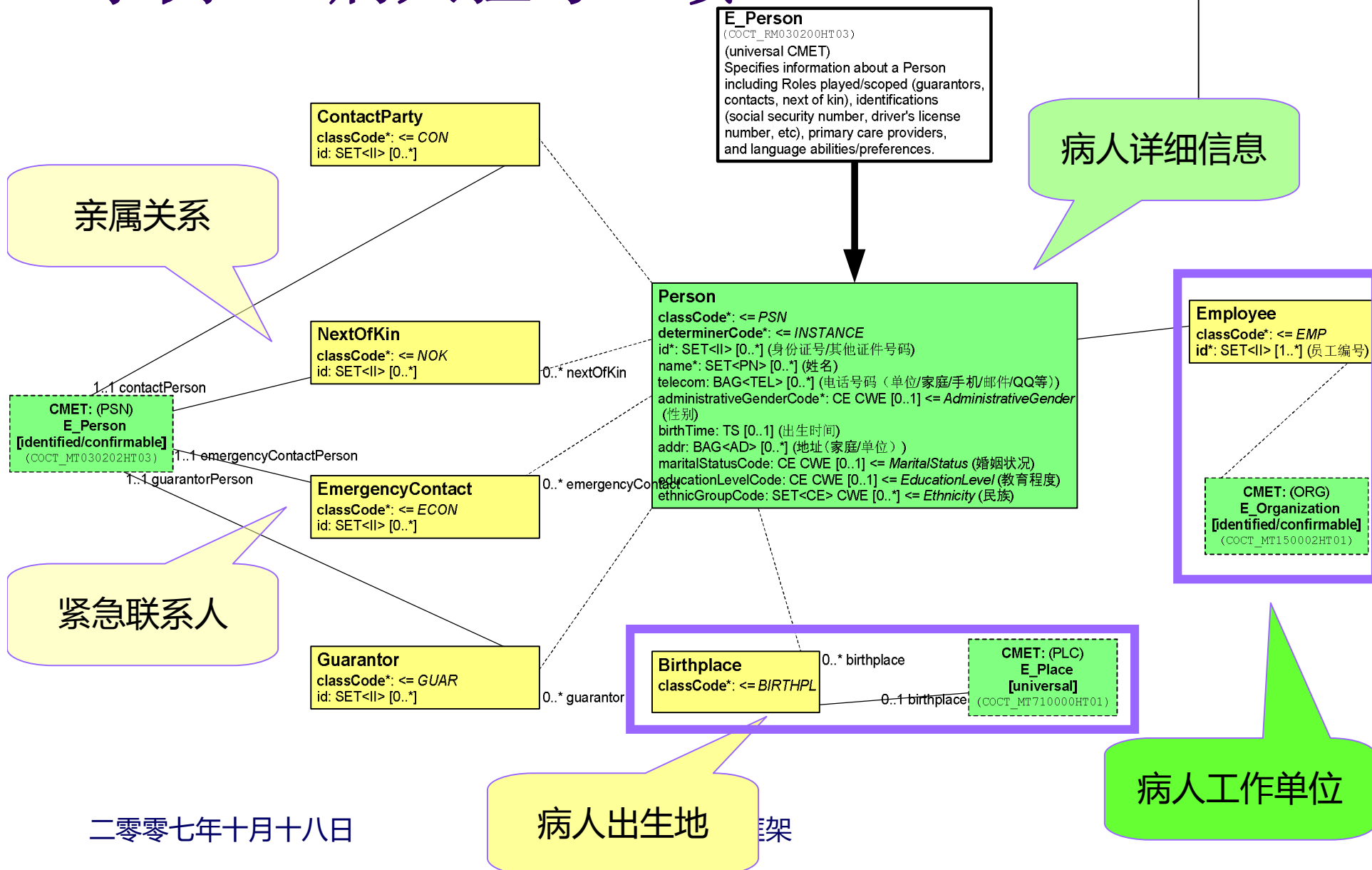
门诊病人就诊流程示例:



示例1：病人挂号

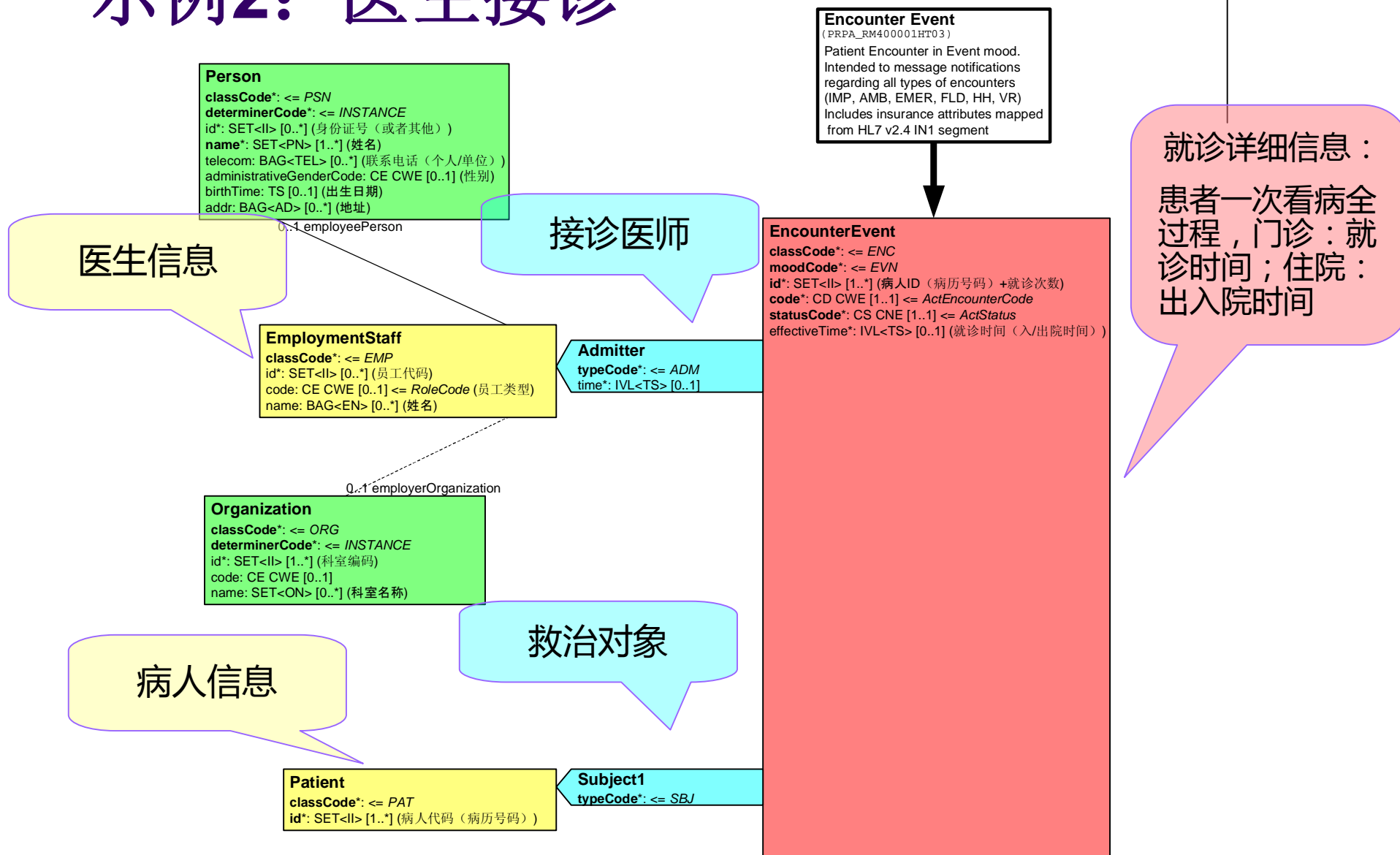


示例1：病人挂号（续）



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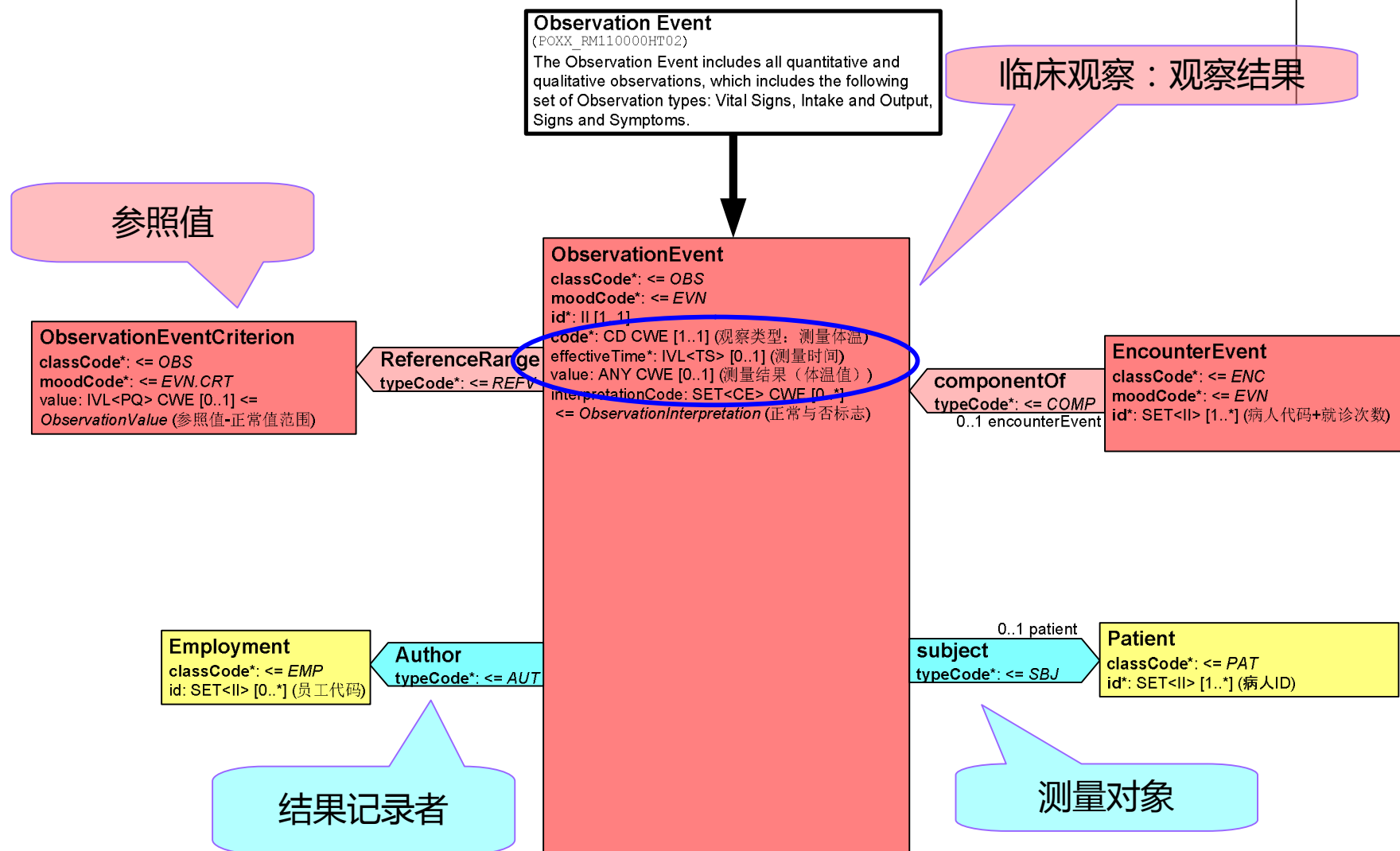
示例2：医生接诊



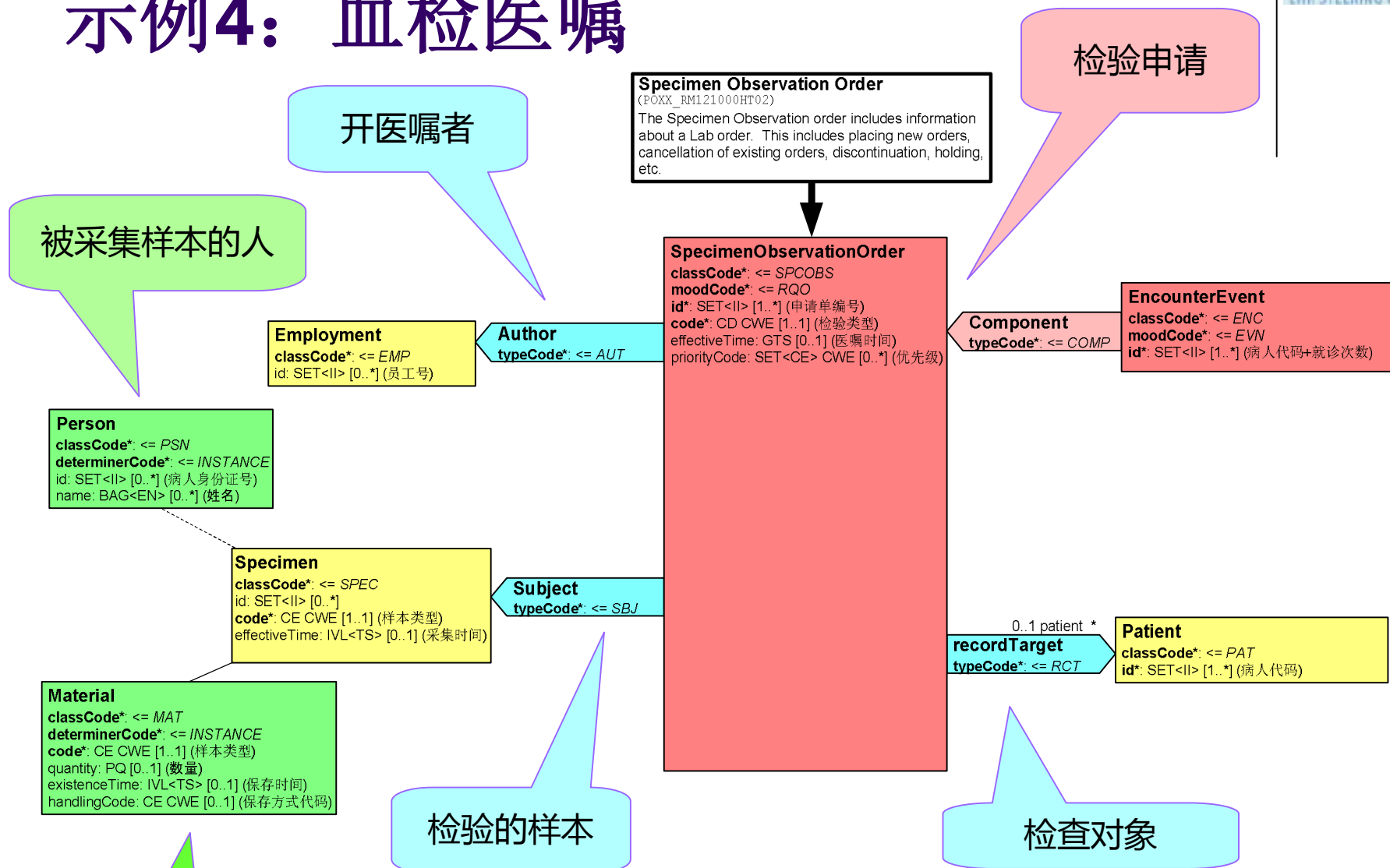
二零零七年十月十八日

HL7 V3 基础框架

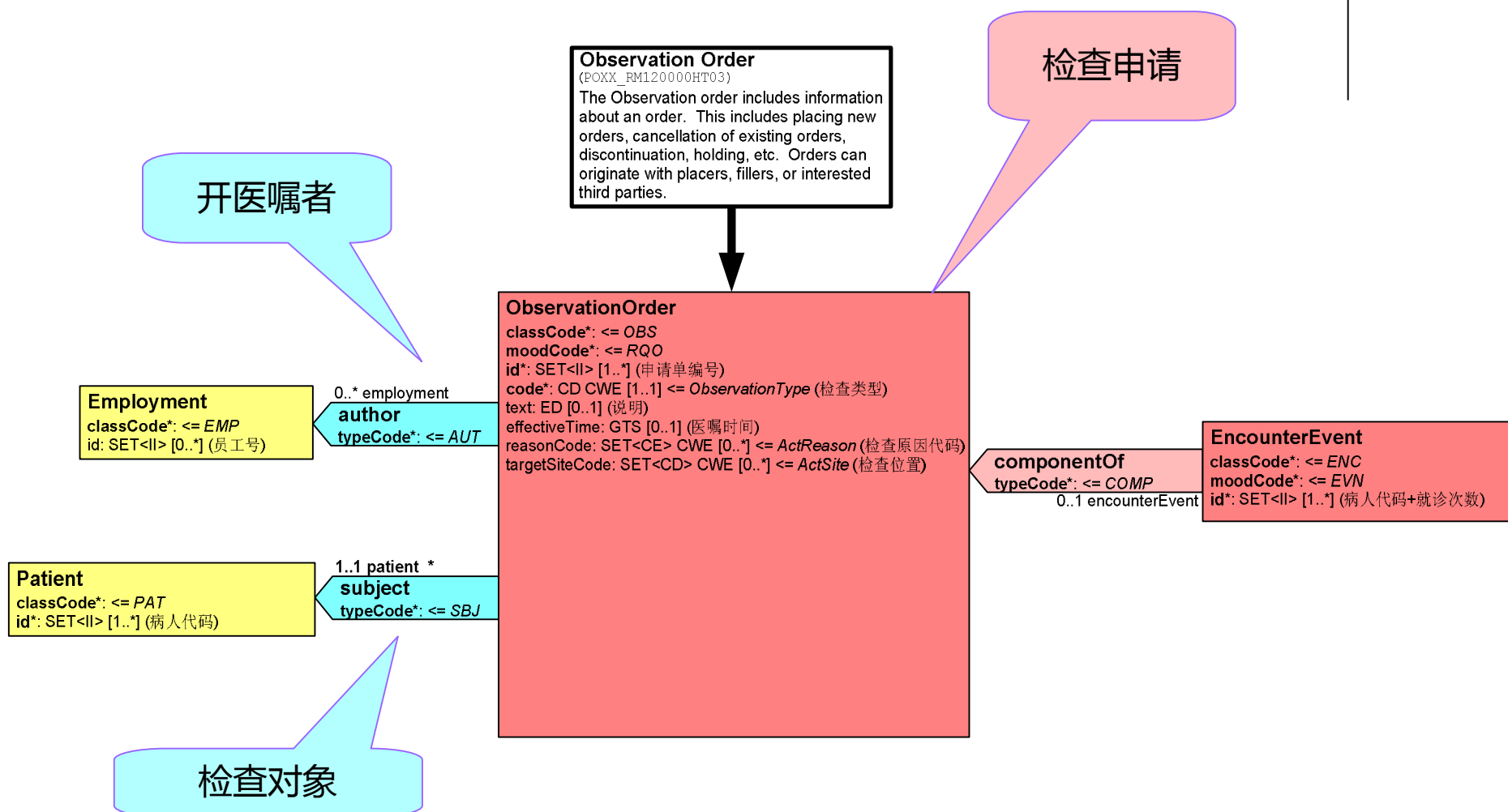
示例3：测量体温



示例4：血检医嘱



示例5：胸透检查医嘱



示例6：血检结果

Specimen Observation Event
(POXX_RM111000HT01)
The Specimen Observation Event includes all quantitative and qualitative observations for Lab results.

对医嘱的实现

SpecimenObservationRequest
classCode*: <= SPCOBS
moodCode*: <= RQO
id: SET<II> [0..*] (申请单编号)

InFulfillmentOf
typeCode*: <= FLFS

ObservationEventCriterion
classCode*: <= OBS
moodCode*: <= EVN.CRT
code: CD CWE [0..1] (检验标准类型)
value*: ANY CWE [1..1] (标准值)

ReferenceRange
typeCode*: <= REFV

参照标准结果

Specimen
classCode*: <= SPEC
id: SET<II> [0..*]

Subject
typeCode*: <= SBJ

Patient
classCode*: <= PAT
id: SET<II> [0..*]
name: BAG<EN> [0..*]

RecordTarget
typeCode*: <= RCT

SpecimenObservationEvent
classCode*: <= SPCOBS
moodCode*: <= EVN
id*: SET<II> [1..*] (报告单编号)
code*: CD CWE [1..1] (检验类型)
effectiveTime*: IVL<TS> [0..1] (报告时间)
value: PQ CWE [0..1] (检验结果)
interpretationCode: SET<CE> CWE [0..*] (正常与否标识)

检验结果

EncounterEvent
classCode*: <= ENC
moodCode*: <= EVN
id: SET<II> [0..*]
componentOf
typeCode*: <= COMP
0..1 encounterEvent

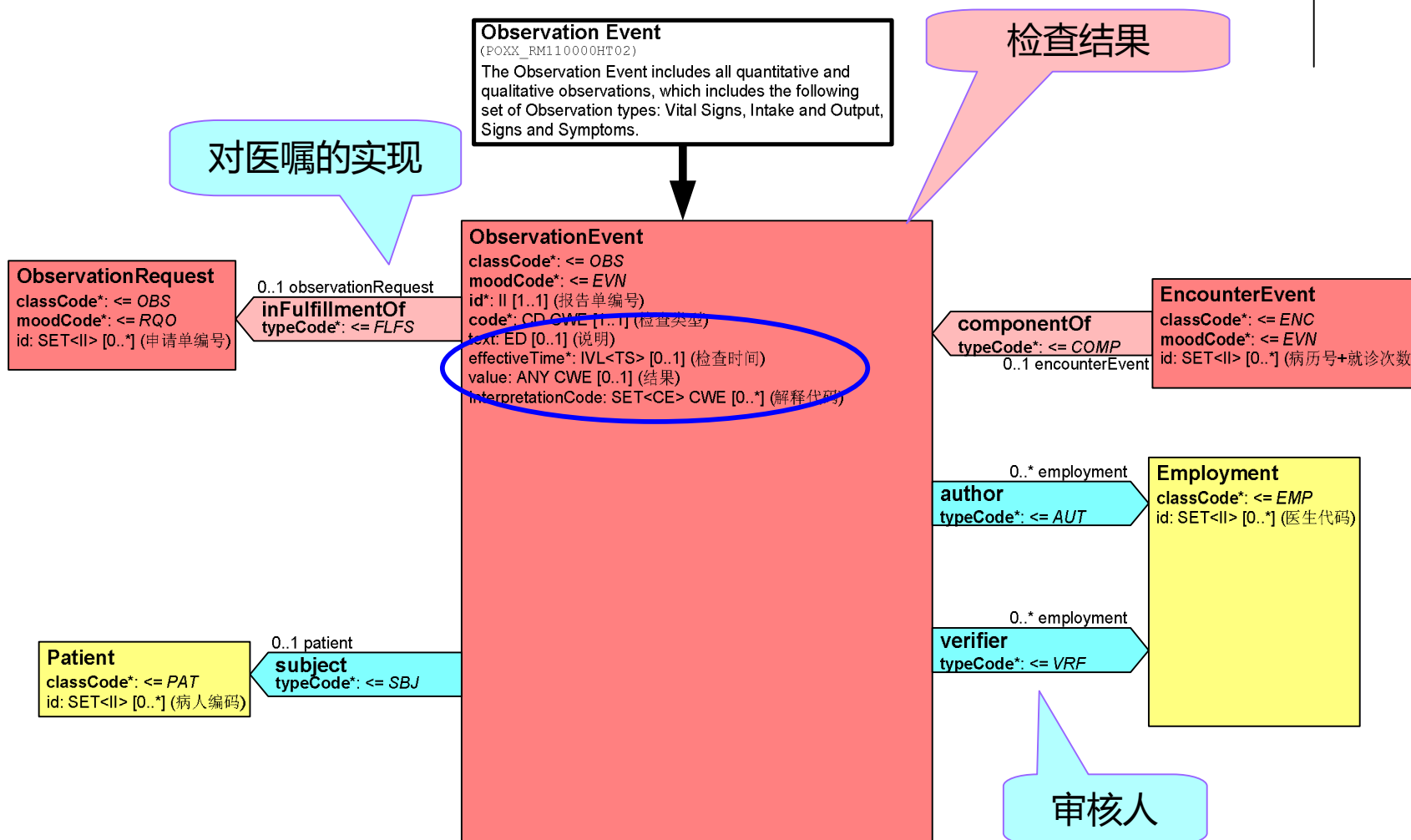
报告人

Author
typeCode*: <= AUT
time: IVL<TS> [0..1]
0..* employment
verifier
typeCode*: <= VRF
time: IVL<TS> [0..1]

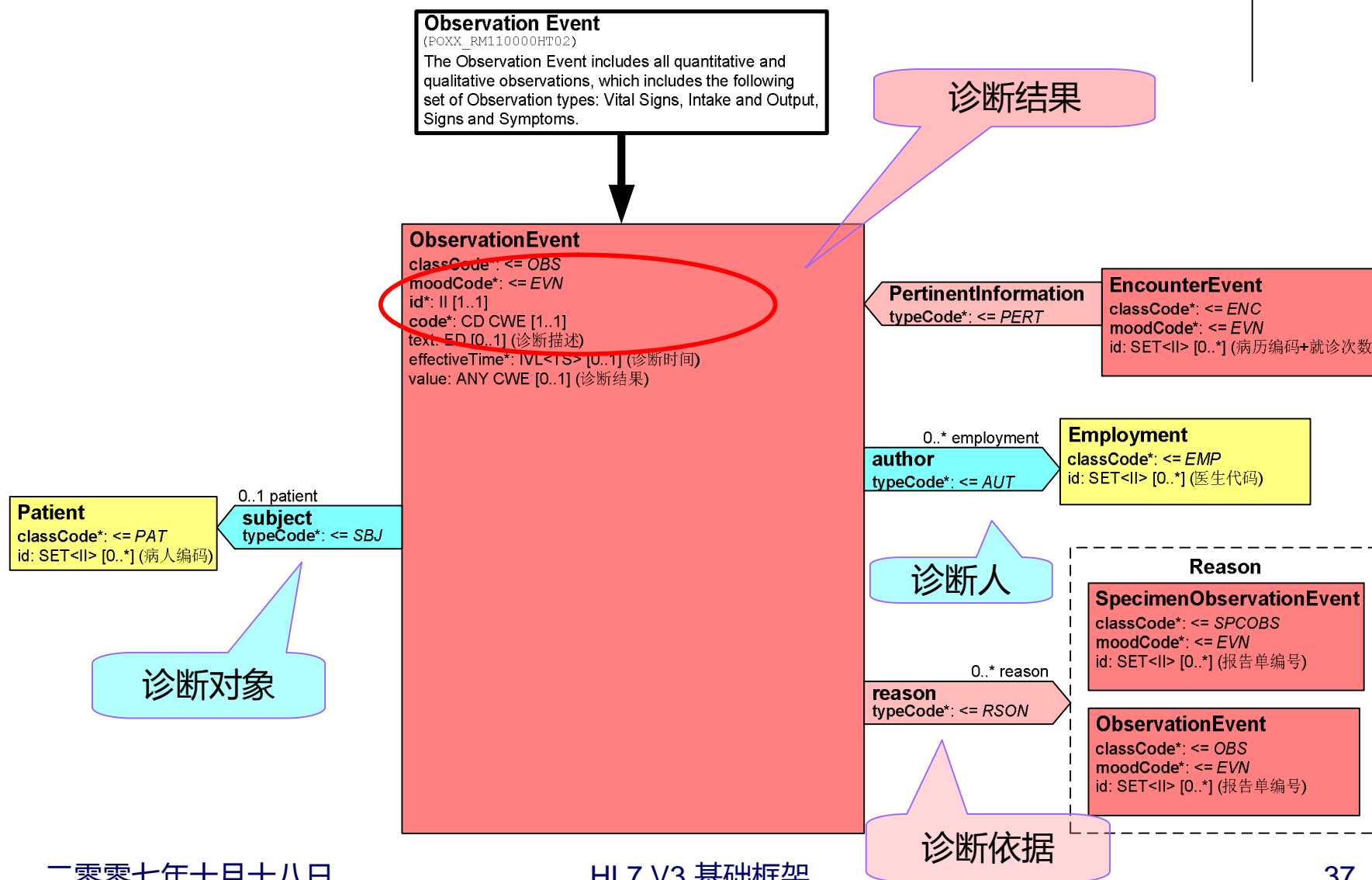
Employment
classCode*: <= EMP
id: SET<II> [0..*]
name: BAG<EN> [0..*]

审核人

示例7： 胸透检查结果



示例8： 诊断结果



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HL7 V3 基础框架

示例9： 药品处方

Substance Administration Order
(POSA_RM920000HT02)
Represents a verified order placed by a certified provider for medications and other therapeutic consumable substances intended for use by a particular Patient. Substance administration orders do not include orders related to supply items not intended for patient consumption.

处方医师

处方主要内容

Employment
classCode*: <= EMP
id: SET<II> [0..*] (医生代码)

1..* employment *
author
typeCode*: <= AU

SubstanceAdministrationOrder
classCode*: <= SBADM
moodCode*: <= RQO
id: SET<II> [1..*] (处方编码)
text: ED [0..1] (处方说明)
effectiveTime*: GTS [0..1] (服用时间)
repeatNumber*: IVL<INT> [0..1] (服用次数)
routeCode: CE CWE [0..1] (用药方式)
approachSiteCode: SET<CD> CWE [0..*] (用药位置)
doseQuantity*: IVL<PQ> [0..1] (总剂量)
rateQuantity: IVL<PQ> [0..1] (用药速度)
maxDoseQuantity: RTO<PQ,PQ> [0..1] (最大剂量)

componentOf
typeCode*: <= COMP
0..1 encounterEvent

EncounterEvent
classCode*: <= ENC
moodCode*: <= EVN
id: SET<II> [0..*] (病历编码+就诊次数)

Patient
classCode*: <= PAT
id: SET<II> [0..*] (病人编码)

1..1 patient *
subject
typeCode*: <= SBJ

处方的依据/治疗目的

0..* observationEvent
reason
typeCode*: <= RSON

ObservationEvent
classCode*: <= OBS
moodCode*: <= EVN
id*: II [1..1] (诊断编号)

处方药品

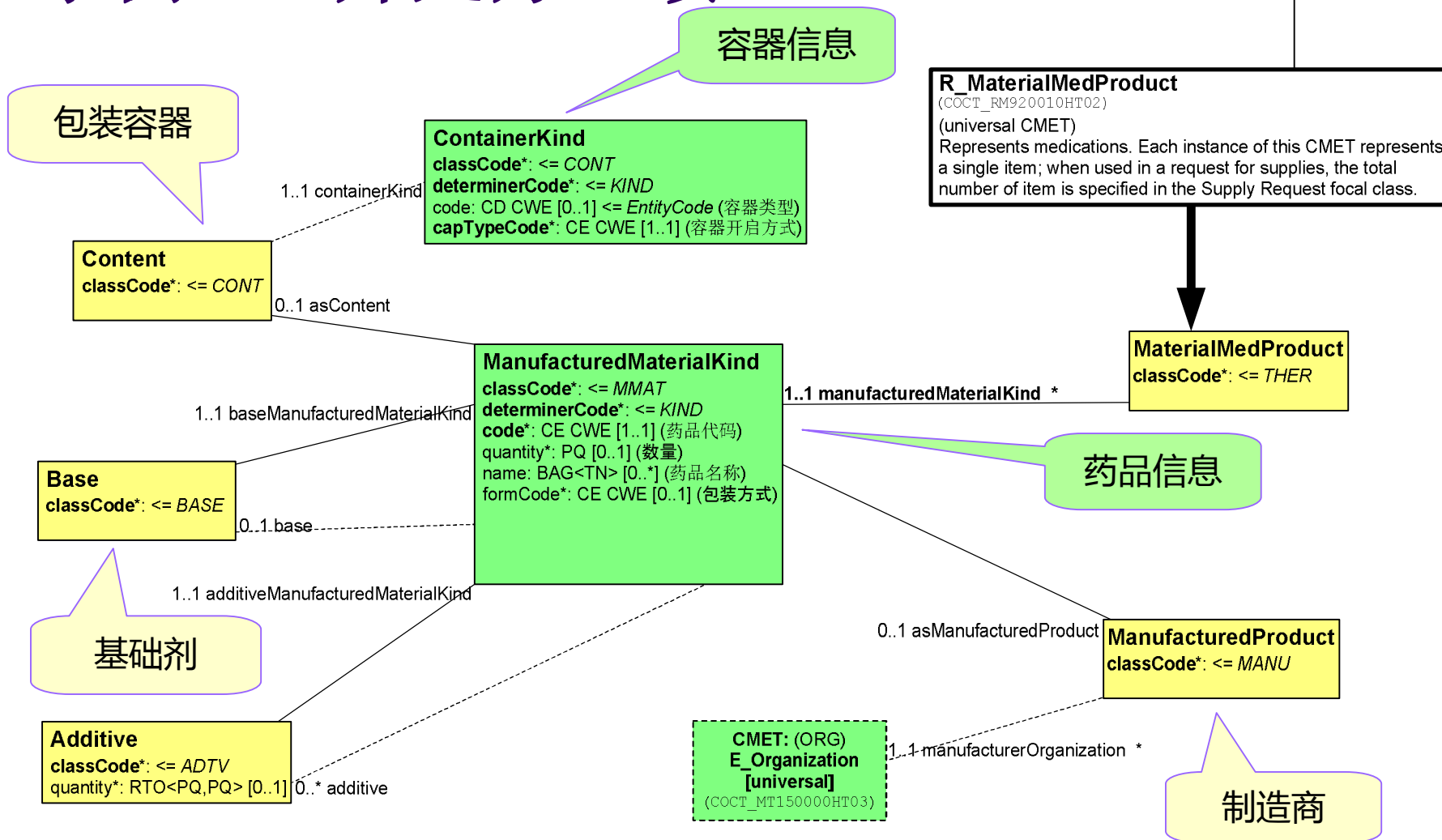
0..1 scopedRoleName
CMET: (THER)
R_MaterialMedProduct
[universal]
(COCT_MT920010HT02)
1..1 materialMedProduct
consumable
typeCode*: <= CSM

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HL7 V3 基础框架

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示例9：开处方（续）

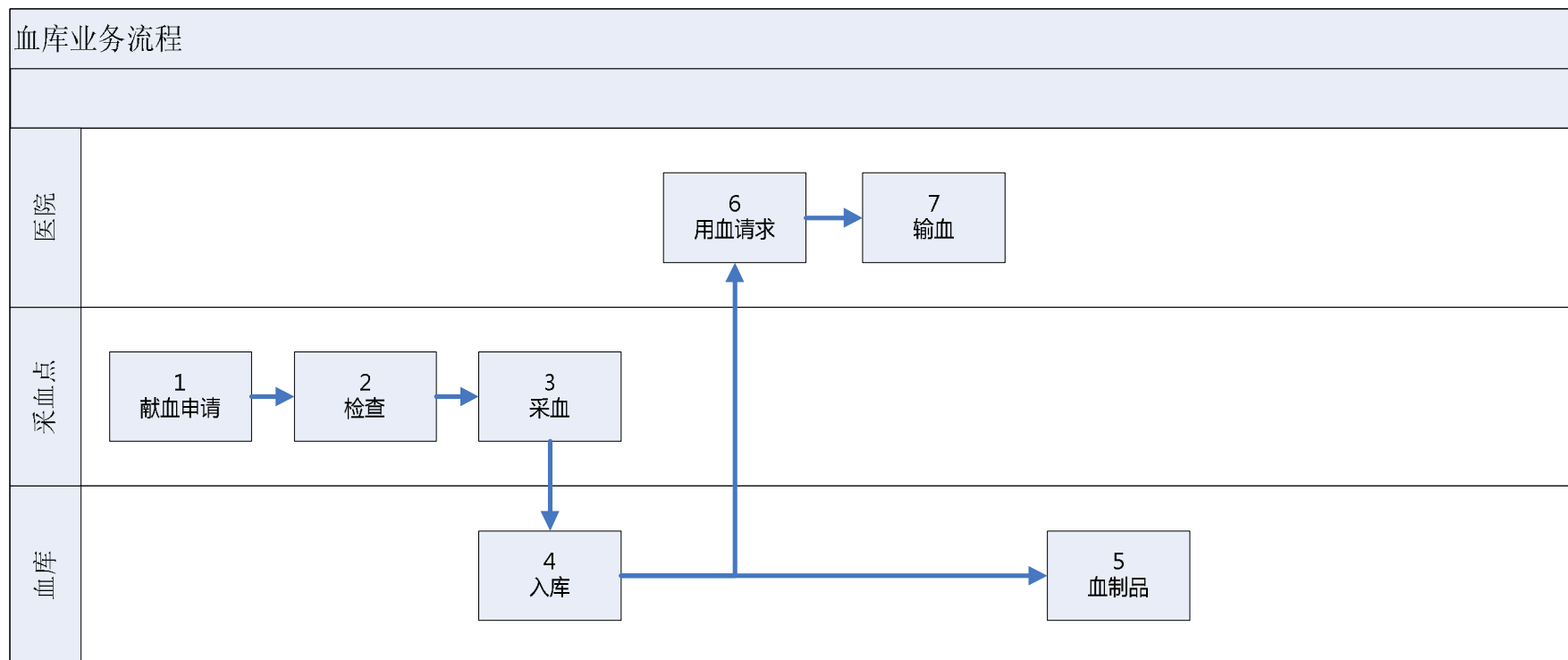


基于 HL7 V3

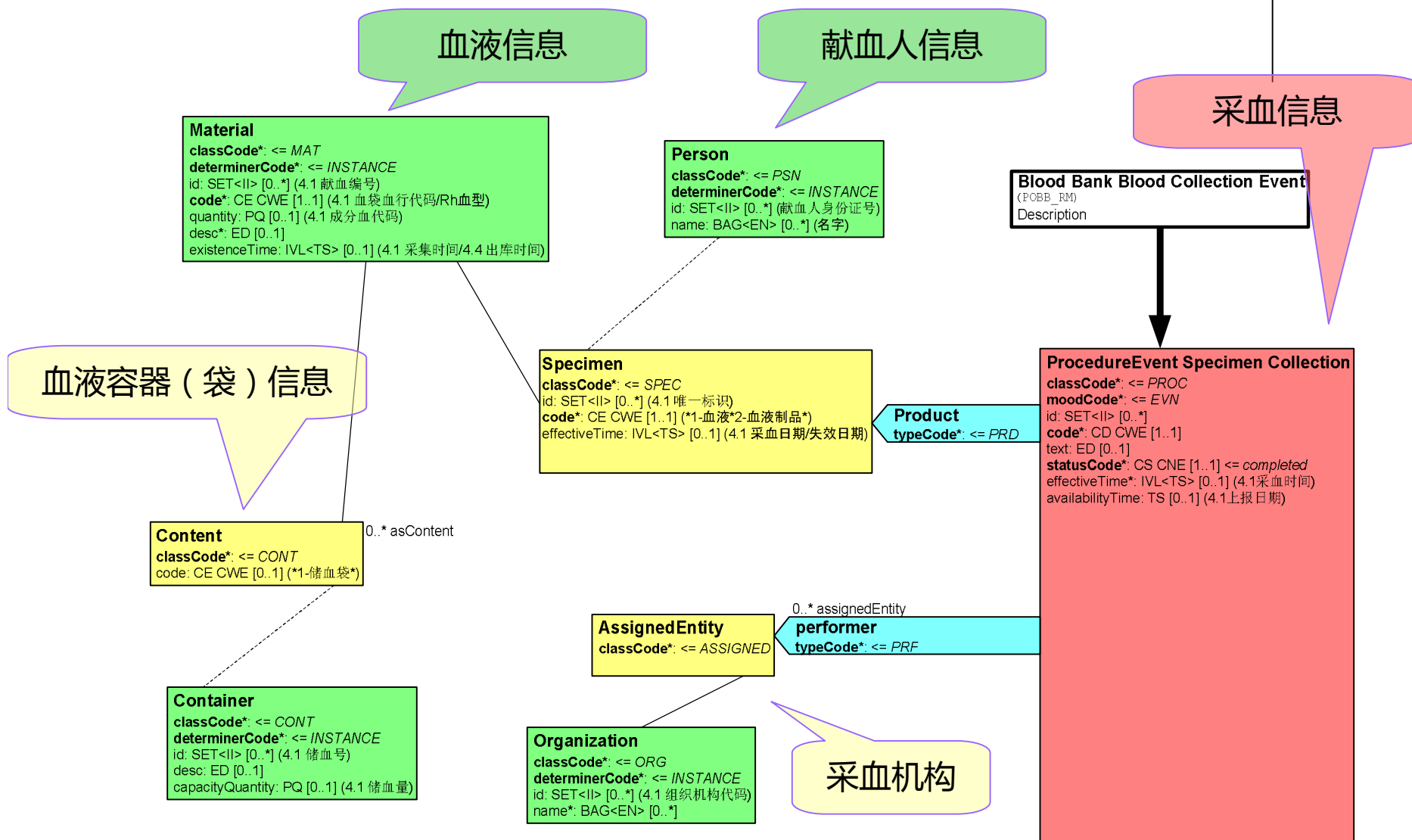
公卫资源信息的描述

（血库业务）

血库业务流程（示例）



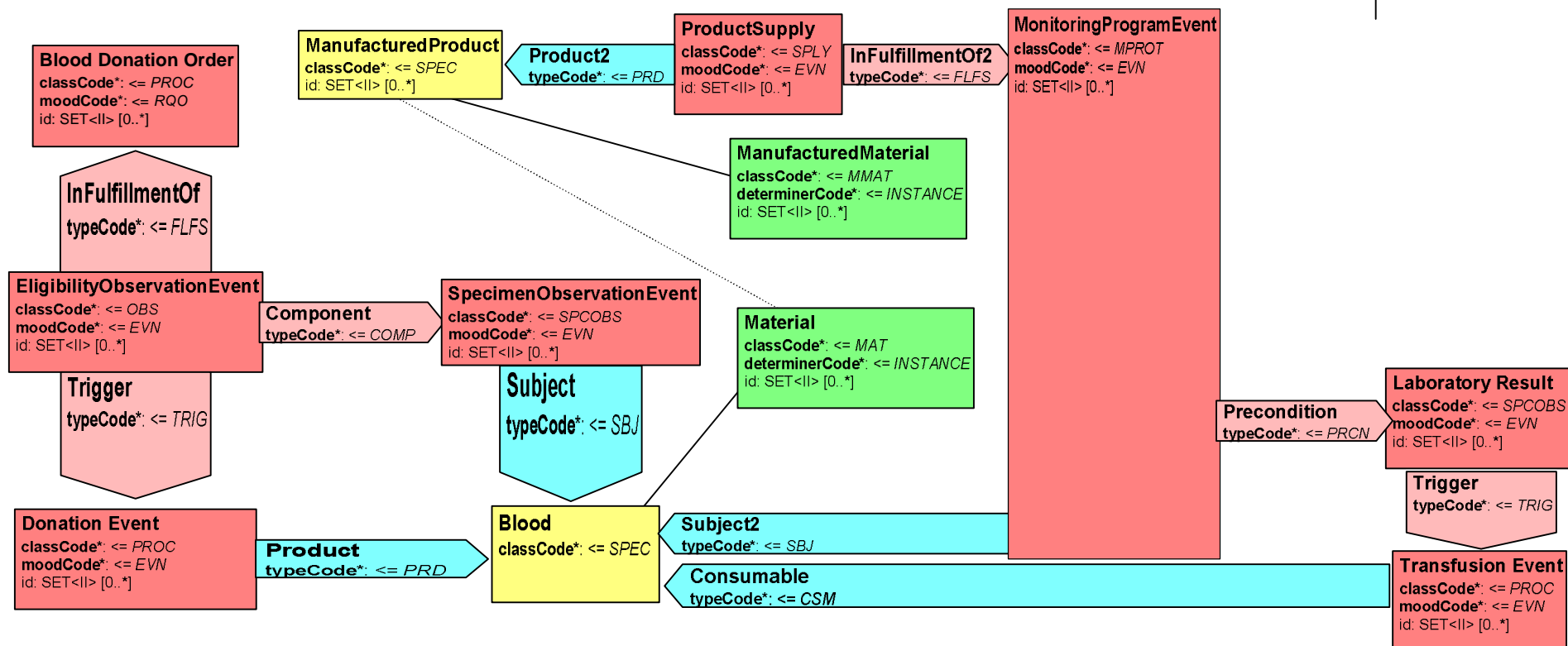
示例1：血库业务流程-采血



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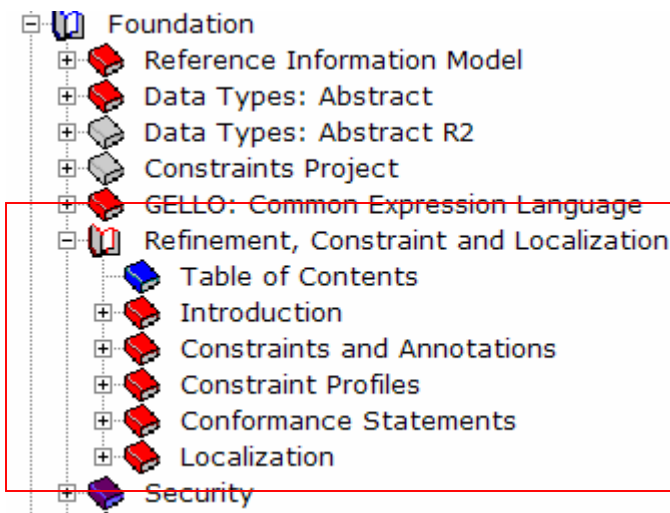
HL7 V3 基础框架

血库业务（示例）

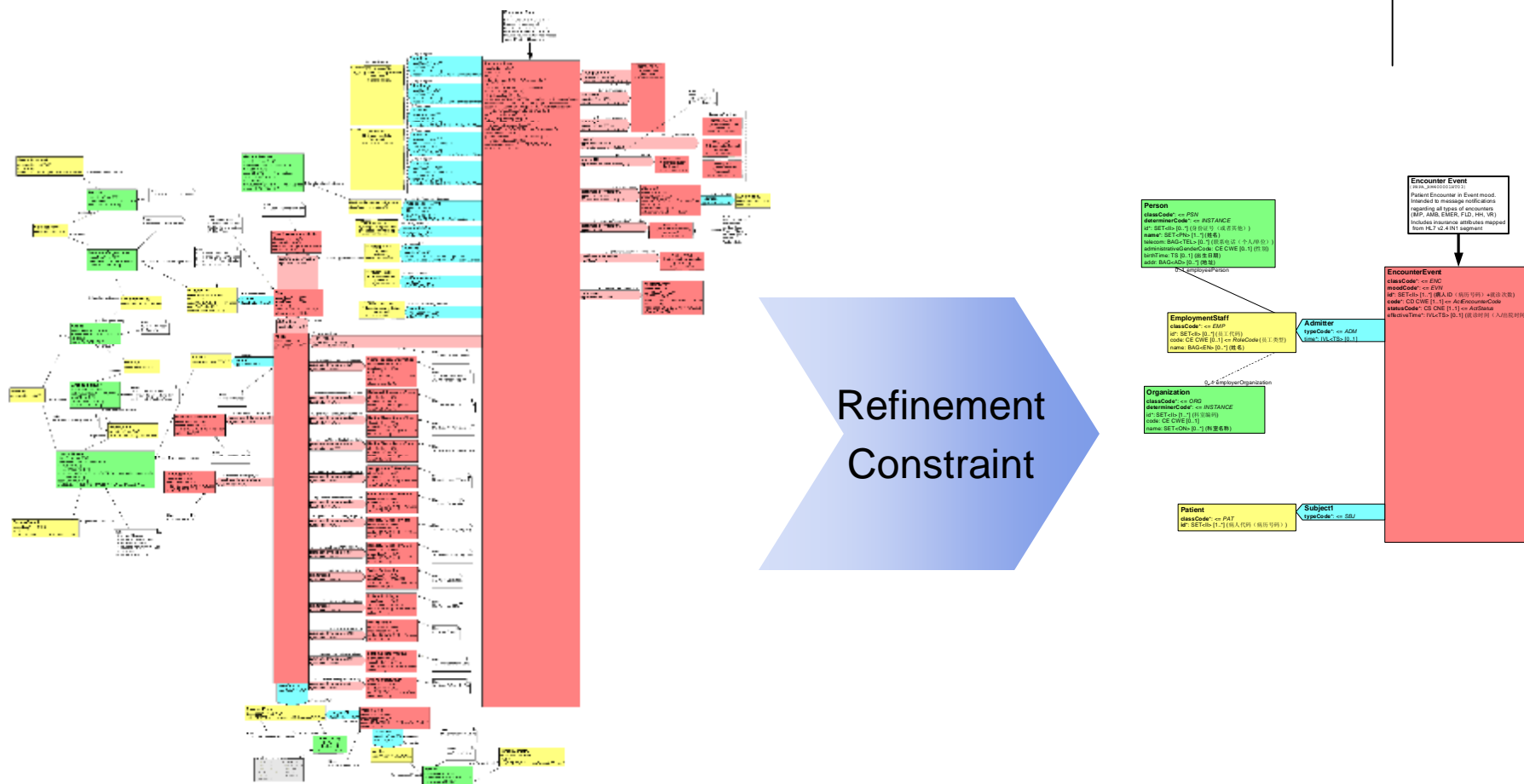


HL7 V3 RIM 对医疗信息化的意义

- 建立了全面的医疗信息的描述模型
- 全球5000+专业人员，10+年的成果：定义了医疗行为的标准的描述（RMIM，一个医疗行为的信息描述的最大集）
- 通过 Refinement, Constraint 和 Localization 定义自己适用的业务描述



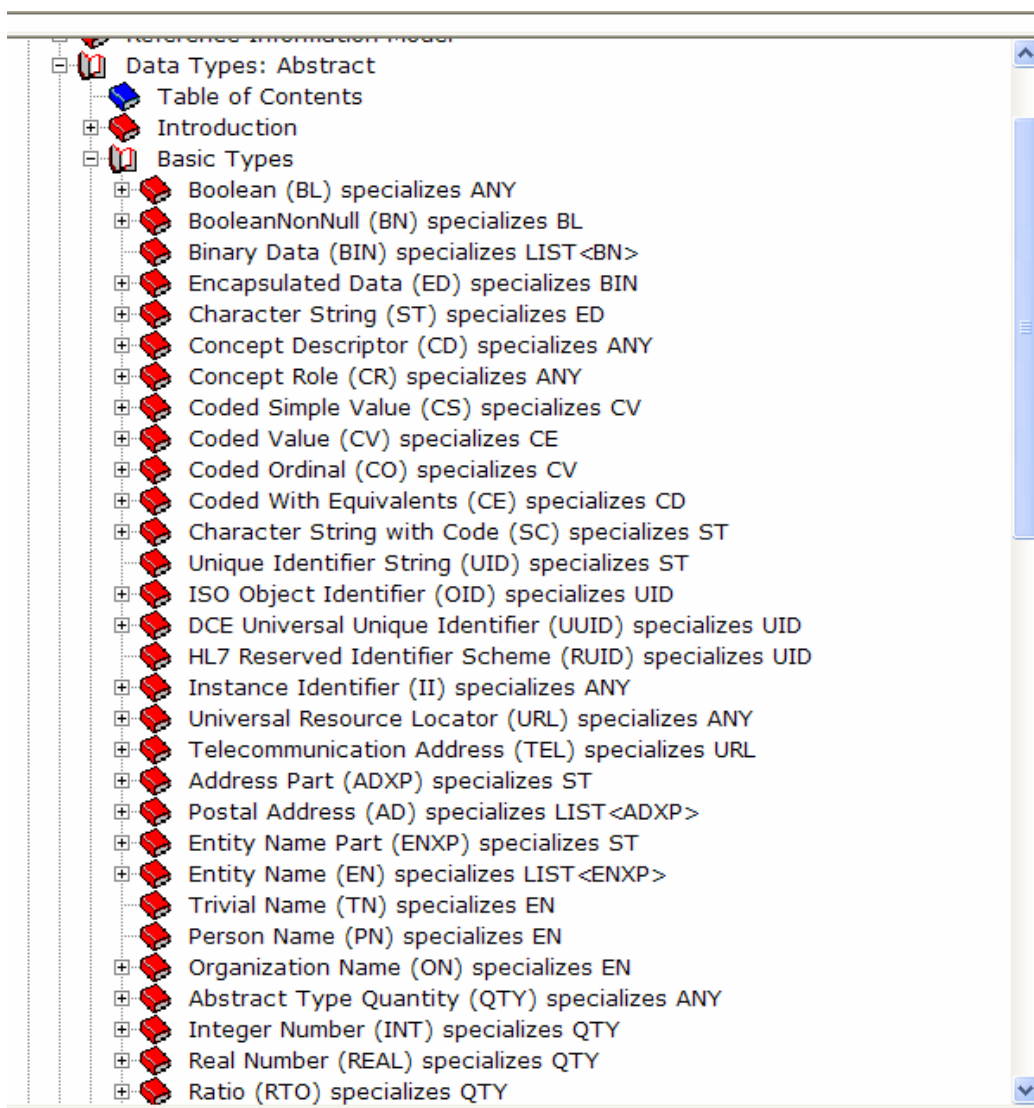
HL7 V3 RIM 对医疗信息化的意义



HL7 v3 Data Types

- | 29 Nov 2004 被采纳为 US ANSI 标准
 - | Name, Address, Telecom, Time, Quantity, Collections
- | 交互过程中的数据项都有一个Data Type
- | Data types define the meaning (semantics) of data values that can be assigned to a data element.
- | Data Type可以理解为“Class”

HL7 v3 Datatypes 概览





HL7 v3 Data Types 示例（一）

Instance Identifier (II) 实例标识类型

```
type InstanceIdentifier alias II specializes ANY
{
    ST extension;
    UID root;
    ST assigningAuthorityName;
    BL equal(ANY x);
};
```

```
<Person determinerCode="INSTANCE" classCode="PSN">
    <id root="8601" extension="442501198010100252" /> /* 身份证号 */
    <id root="8602" extension="2019293812" /> /* 医保号 */
    <id root="8603" extension="442501198010100252" /> /* 驾驶证号 */
</Person>
```

HL7 v3 Data Types 示例（二）

Telecommunication Address (TEL) 电子通讯地址类型

```
type TelecommunicationAddress alias TEL specializes URL {  
    GTS      useablePeriod;  
    SET<CS>  use;  
    BL      equal(ANY x);  
};
```

```
<Person determinerCode="INSTANCE" classCode="PSN">  
    <telecom value="tel:1-213-555-2222" use="H"/> /* 家庭电话 */  
    <telecom value="tel:1-213-666-2222" use="WP"/> /* 工作电话 */  
    <telecom value="mailto:a@163.com" use="PUB"/> /* 电子邮件 */  
    <telecom value="http://www.my.com" use="PUB"/> /* Web主页 */  
</Person>
```

HL7 v3 Data Types 示例（三）

EncounterEvent
classCode*: <= ENC
moodCode*: <= EVN
id*: SET<II> [1..*] (病人ID (病历号码) + 就诊次数)
code*: CD CWE [1..1] <= ActEncounterCode
statusCode*: CS CNE [1..1] <= ActStatus
effectiveTime*: IVL<TS> [0..1] (就诊时间 (入/出院时间))

门诊:

effectiveTime à TS

TS: 时间点

住院:


effectiveTime à IVL<TS>

IVL<TS>: 时间间隔

effectiveTime.low: 入院时间

effectiveTime.high: 出院时间

HL7 v3 Vocabulary


Vocabulary
September 2007
v3

- HL7 Version 3 Standard
 - Introduction
 - Foundation
 - Reference Information Model
 - Data Types: Abstract
 - Data Types: Abstract R2
 - Constraints Project
 - GELLO: Common Expression
 - Refinement, Constraint and
 - Security
 - Templates Project
 - Using SNOMED CT
 - Vocabulary
 - Table of Contents
 - Introduction
 - Vocabulary contents
 - Specification Infrastructure
 - Implementation Technology
 - Services
 - Universal Domains

2.1 HL7 Vocabulary Domain Values

(Most vocabulary domains are published as informative references. Those domains that have a more formal ballot status are shown in bold in this table. See the domain for the exact status.)

AcknowledgementCondition	EncounterAcuity	OrganizationNameType
AcknowledgementDetailCode	EncounterAdmissionSource	OtherIndicationValue
AcknowledgementDetailType	EncounterDischargeDisposition	ParameterizedDataType
AcknowledgementMessageCode	EncounterReferralSource	ParticipationFunction
AcknowledgementType	EncounterReferralSource	ParticipationMode
AcknowledgmentMessageType	EncounterSpecialCourtesy	ParticipationSignature
ActClass	EntityClass	ParticipationType
ActCode	EntityCode	PatientImportance
ActInjuryCode	EntityDeterminer	PaymentTerms
ActInvoiceElementModifier	EntityHandling	PeriodicIntervalOfTimeAbbrevia
ActMood	EntityNamePartQualifier	PersonDisabilityType
ActPatientTransportationModeCode	EntityNamePartType	PharmacySupplyEventStockRea
ActPaymentReason	EntityNameUse	PharmacySupplyRequestRenew
ActPriority	EntityRisk	PostalAddressUse
ActProcedureCode	EntityStatus	PrescriptionDispenseFilterCode
ActReason	EquipmentAlertLevel	ProbabilityDistributionType
ActRelationshipCheckpoint	Ethnicity	ProcedureMethod
ActRelationshipJoin	ExposureAgentEntityType	ProcessingID
ActRelationshipRelatedOrder	GTSAbbreviation	ProcessingMode
ActRelationshipSplit	GenderStatus	ProviderCodes
ActRelationshipSubset	HL7CommitteeIDInRIM	QueryParameterValue
ActRelationshipType	HL7ConformanceInclusion	QueryPriority

Legend

- Informative
- Reference
- Normative
- DSTU
- Draft
- Document Group

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HL7 v3 Vocabulary 示例

```
Entity
classCode*: <= ENT
determinerCode*: <= INSTANCE
id*: SET<II> [1..*]
code: CE CWE [0..1]
quantity: SET<PQ> [0..*]
name: SET<ON> [0..*]
desc: ED [0..1]
statusCode: CS CNE [0..1] <= EntityStatus
existenceTime: IVL<TS> [0..*]
telecom: BAG<TEL> [0..*]
riskCode: SET<CE> CWE [0..*] <= EntityRisk
handlingCode: SET<CE> CWE [0..*]
<= EntityHandling
```

Entity.classCode

Level	Mnemonic	Print Name
1	ENT	entity
.2	LIV	living subject
..3	NLIV	non-person living subject
...4	ANM	animal
...4	MIC	microorganism
...4	PLNT	plant
..3	PSN	person
.2	MAT	material
..3	MMAT	manufactured material
...4	CONT	container
....5	HOLD	holder
...4	DEV	Device

CDA 历史

- 1996 à Kona Architecture
- 1998 à Patient Record Architecture
- 2000 à ANSI/HL7 CDA R1.0



[article](#)

[discussion](#)

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[history](#)

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Clinical Document Architecture

From Wikipedia, the free encyclopedia

The **HL7 Clinical Document Architecture** (CDA) is an XML-based markup standard intended to specify the encoding, structure and semantics clinical documents for exchange.

It is based on the [HL7 Reference Information Model](#) (RIM) and the [HL7 Version 3 Data Types](#), though can be used independently of any [HL7 Version 3](#) messaging (i.e., CDA documents can be exchanged using other mechanisms, such as [HL7 Version 2](#), [DICOM](#), [MIME](#) attachments to [email](#), [http](#) or [ftp](#), etc.).

The CDA tries to ensure that the content will be human-readable and hence is required to contain narrative text, yet still contain structure, and most importantly, allow for the use of codes (such as from [SNOMED](#) and [LOINC](#)) to represent concepts.

A good point to look for CDA information is in the [Structured Documents group](#) of [HL7](#), and the [CDA FAQ](#).

See also

[\[edit\]](#)

- [CDISC](#)
- [eCTD](#)
- [EHRcom](#)
- [Health Informatics Service Architecture](#) (HISA)

Categories: [Computer file formats](#) | [XML-based standards](#)

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This page was last modified 14:35, 10 October 2006.

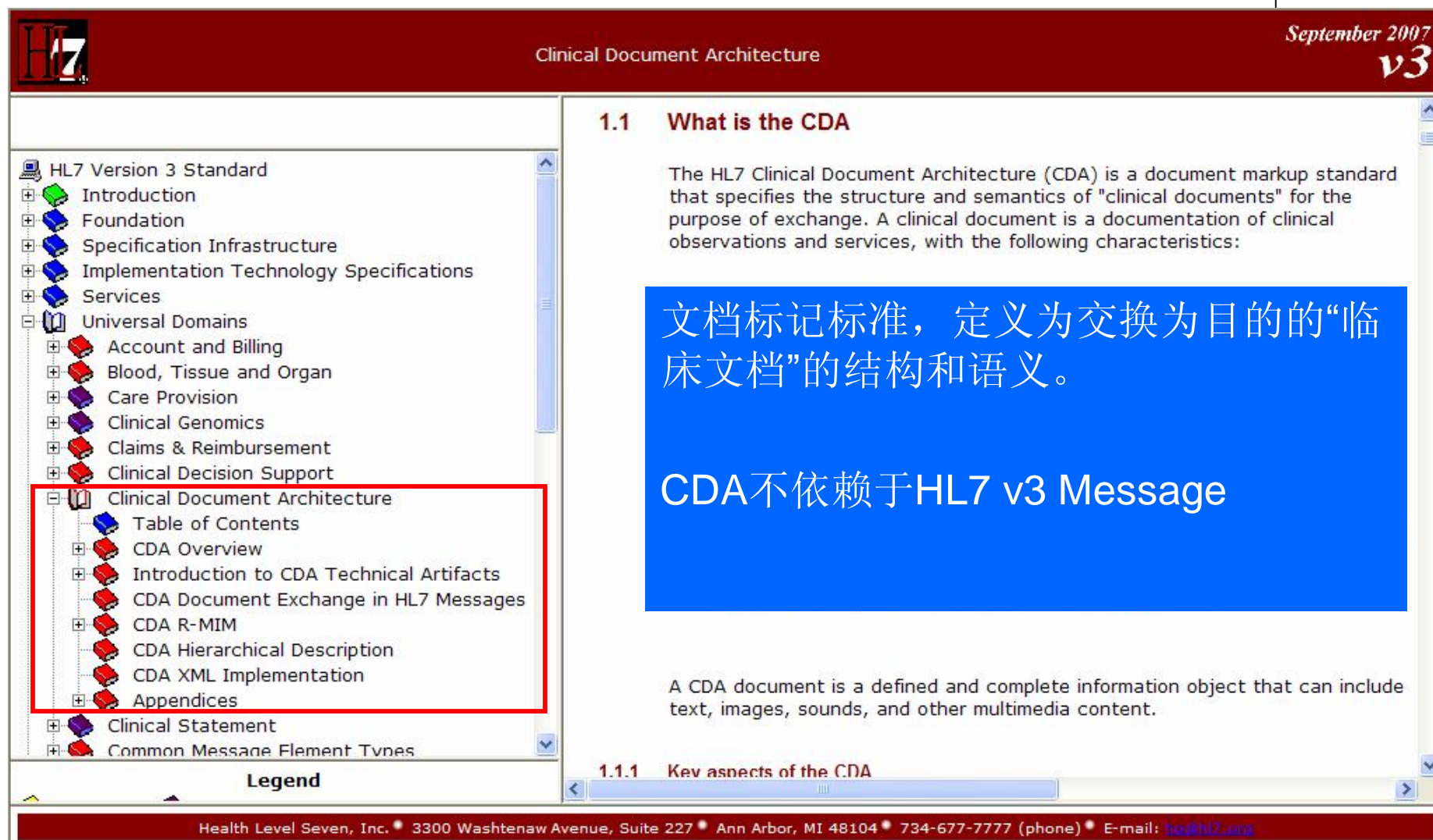
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CDA 2.0



HL7
Clinical Document Architecture
September 2007
v3

HL7 Version 3 Standard

- Introduction
- Foundation
- Specification Infrastructure
- Implementation Technology Specifications
- Services
- Universal Domains
 - Account and Billing
 - Blood, Tissue and Organ
 - Care Provision
 - Clinical Genomics
 - Claims & Reimbursement
 - Clinical Decision Support
- Clinical Document Architecture**
 - Table of Contents
 - CDA Overview
 - Introduction to CDA Technical Artifacts
 - CDA Document Exchange in HL7 Messages
 - CDA R-MIM
 - CDA Hierarchical Description
 - CDA XML Implementation
 - Appendices
- Clinical Statement
- Common Message Element Types

1.1 What is the CDA

The HL7 Clinical Document Architecture (CDA) is a document markup standard that specifies the structure and semantics of "clinical documents" for the purpose of exchange. A clinical document is a documentation of clinical observations and services, with the following characteristics:

文档标记标准，定义为交换为目的的“临床文档”的结构和语义。

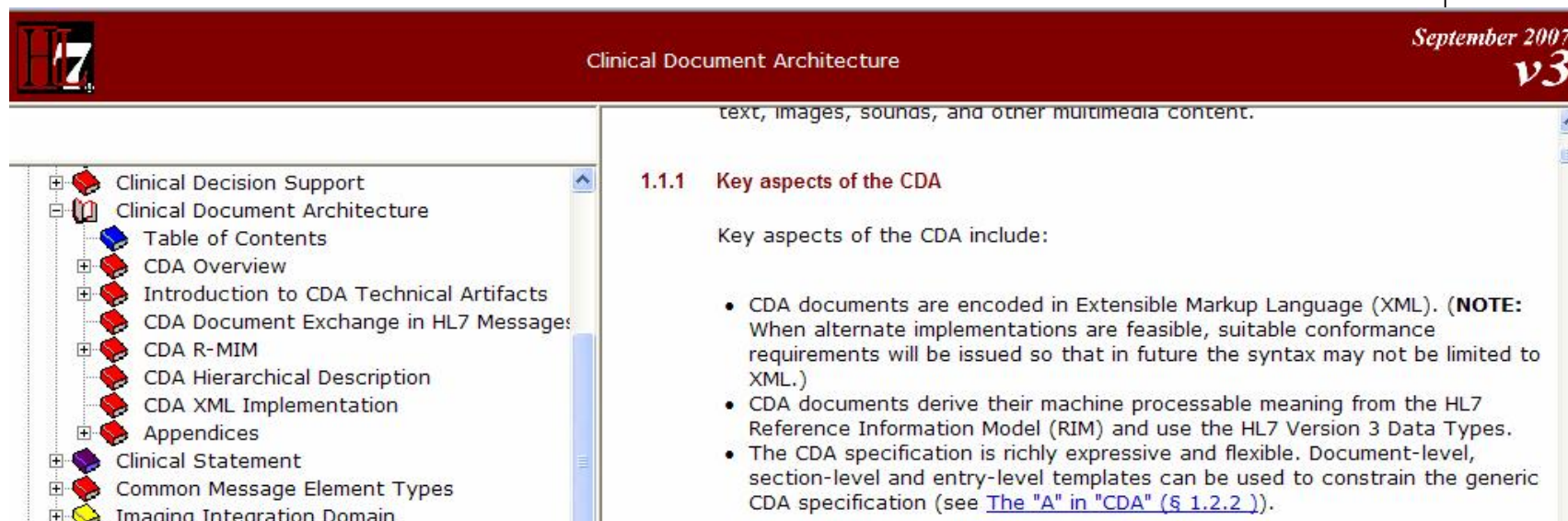
CDA不依赖于HL7 v3 Message

A CDA document is a defined and complete information object that can include text, images, sounds, and other multimedia content.

1.1.1 Key aspects of the CDA

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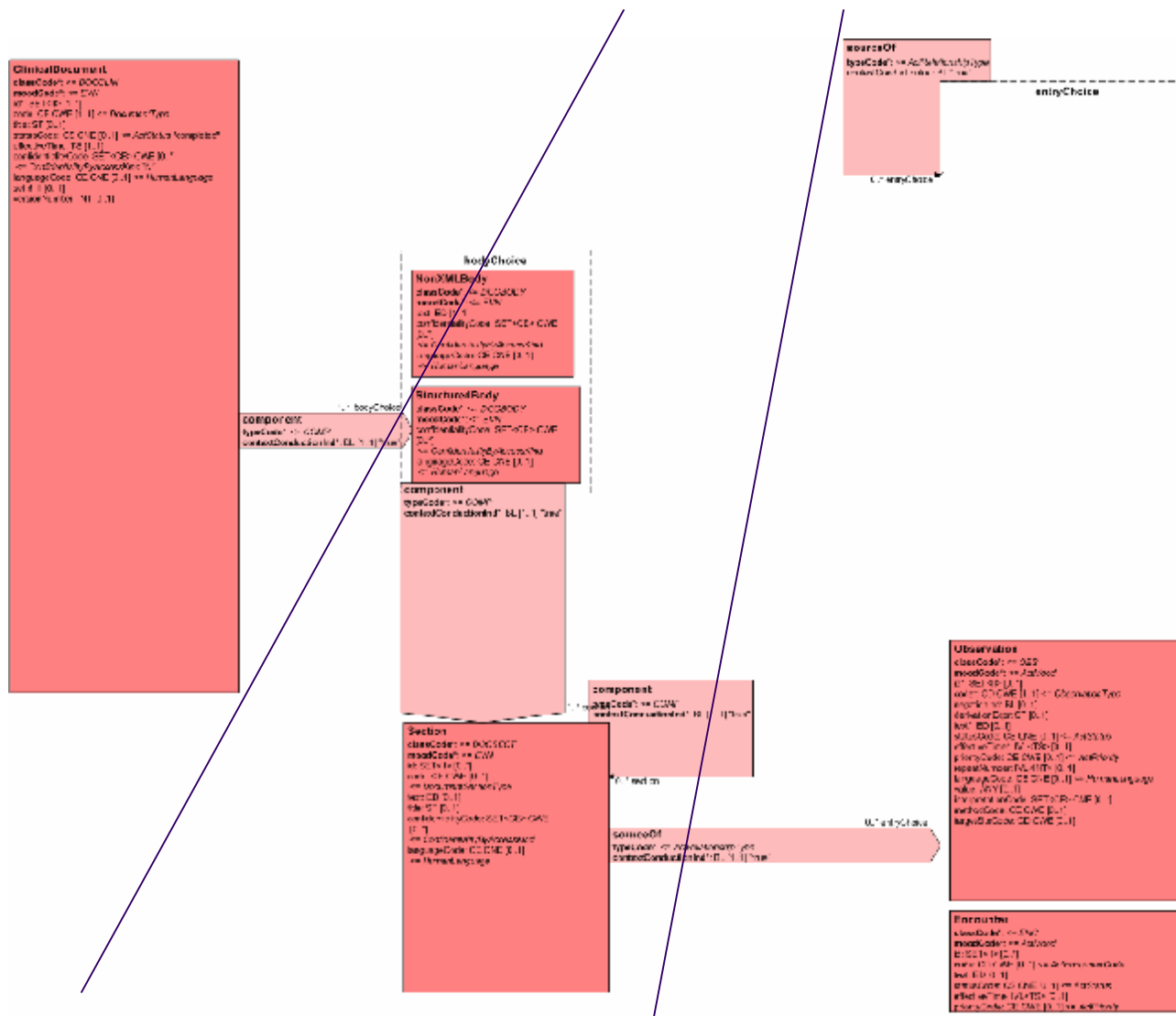
CDA 2.0



- | CDA使用XML封装（目前！）
- | 基于HL7 v3 RIM 和 Data Type
- | 灵活的表达形式：
 - | Document-level,
 - | Section-level
 - | Entry-level



HL7 RMIM -- CDA 2.0



二零零七年十月十八日

HL7 V3 基础框架

60

CDA 在消息中 (HL7 v3 消息)

Example 4. Example of a CDA document in a Version 3 message

```
<someMessage>
  <Act.Code code="11488-4"
    codeSystem="2.16.840.1.113883.6.1"
    displayName="Consultation note"/>
  <Act.text type="multipart/related">
    MIME-Version: 1.0
    Content-Type: multipart/related; boundary="HL7-CDA-boundary";
    type="text/xml"; start="10.12.45567.43"
    Content-Transfer-Encoding: BASE64

    --HL7-CDA-boundary
    Content-Type: text/xml; charset="US-ASCII"
    Content-ID: <10.12.45567.43>

    ... Base 64 of base CDA document, which contains
    ...
    <observationMedia classCode="OBS" moodcode="EVN">
      <id root="10.23.4567.345"/>
      <value mediaType="image/jpeg">
        <reference value="left_hand_image.jpeg"/>
      </value>
    </observationMedia>
    ...

    --HL7-CDA-boundary
    Content-ID: <10.23.4567.345>
    Content-Location: canned_left_hand_image.jpeg
    Content-Type: image/JPEG

    ... Base64 image ...

    --HL7-CDA-boundary--

  </Act.text>
</someMessage>
```

CDA 在消息中 (HL7 v2.x 消息)

Example 3. Example of a CDA document in an MDM message

```

MSH|...
EVN|...
PID|...
PV1|...
TXA|...
OBX|1|ED|11492-6^History and Physical^LN||
^multipart^related^A^
MIME-Version: 1.0
Content-Type: multipart/related; boundary="HL7-CDA-boundary";
type="text/xml"; start="10.12.45567.43"
Content-Transfer-Encoding: BASE64

--HL7-CDA-boundary
Content-Type: text/xml; charset="US-ASCII"
Content-ID: <10.12.45567.43>

... Base 64 of base CDA document, which contains
...
<observationMedia classCode="OBS" moodCode="EVN">
  <id root="10.23.4567.345"/>
  <value mediaType="image/jpeg">
    <reference value="left_hand_image.jpeg"/>
  </value>
</observationMedia>
...

--HL7-CDA-boundary
Content-ID: <10.23.4567.345>
Content-Location: canned_left_hand_image.jpeg
Content-Type: image/JPEG

... Base64 image ...

--HL7-CDA-boundary--
...

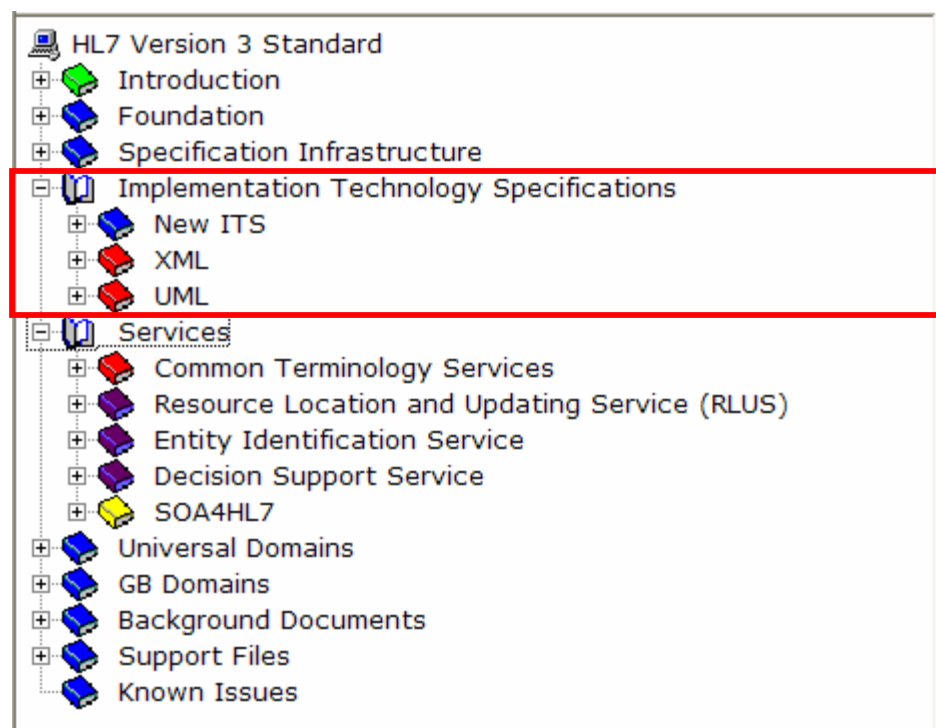
```


主要内容

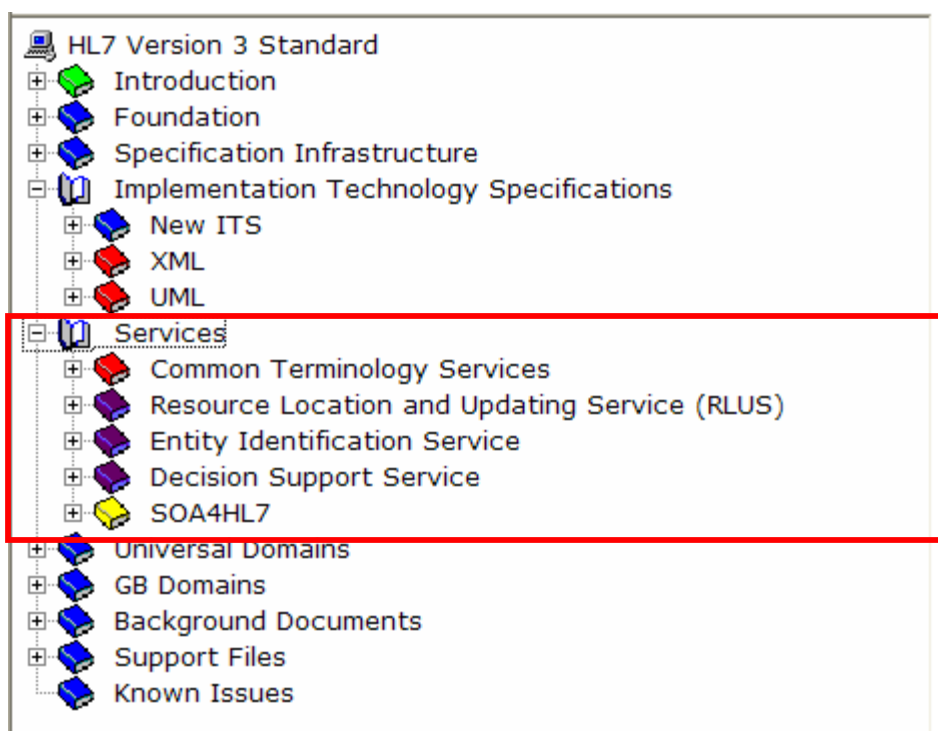
- HL7 V3 基础框架
- HL7 V3 实现技术规范（说明）
 - UML, XML
 - SOA4HL7
- Q&A

HL7 v3 技术基础

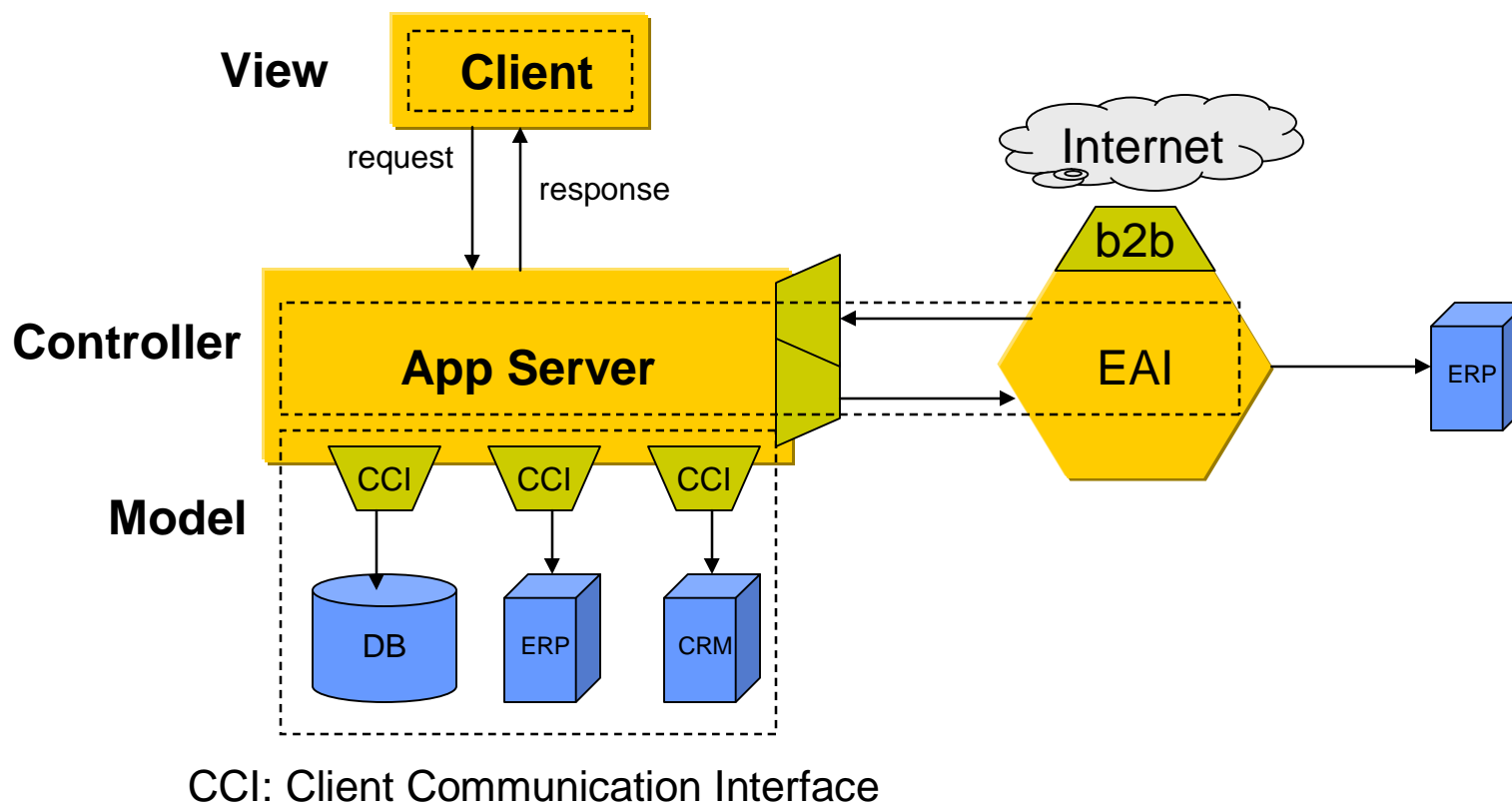
- OO 面向对象技术
- UML 通用建模
- XML 消息定义语言



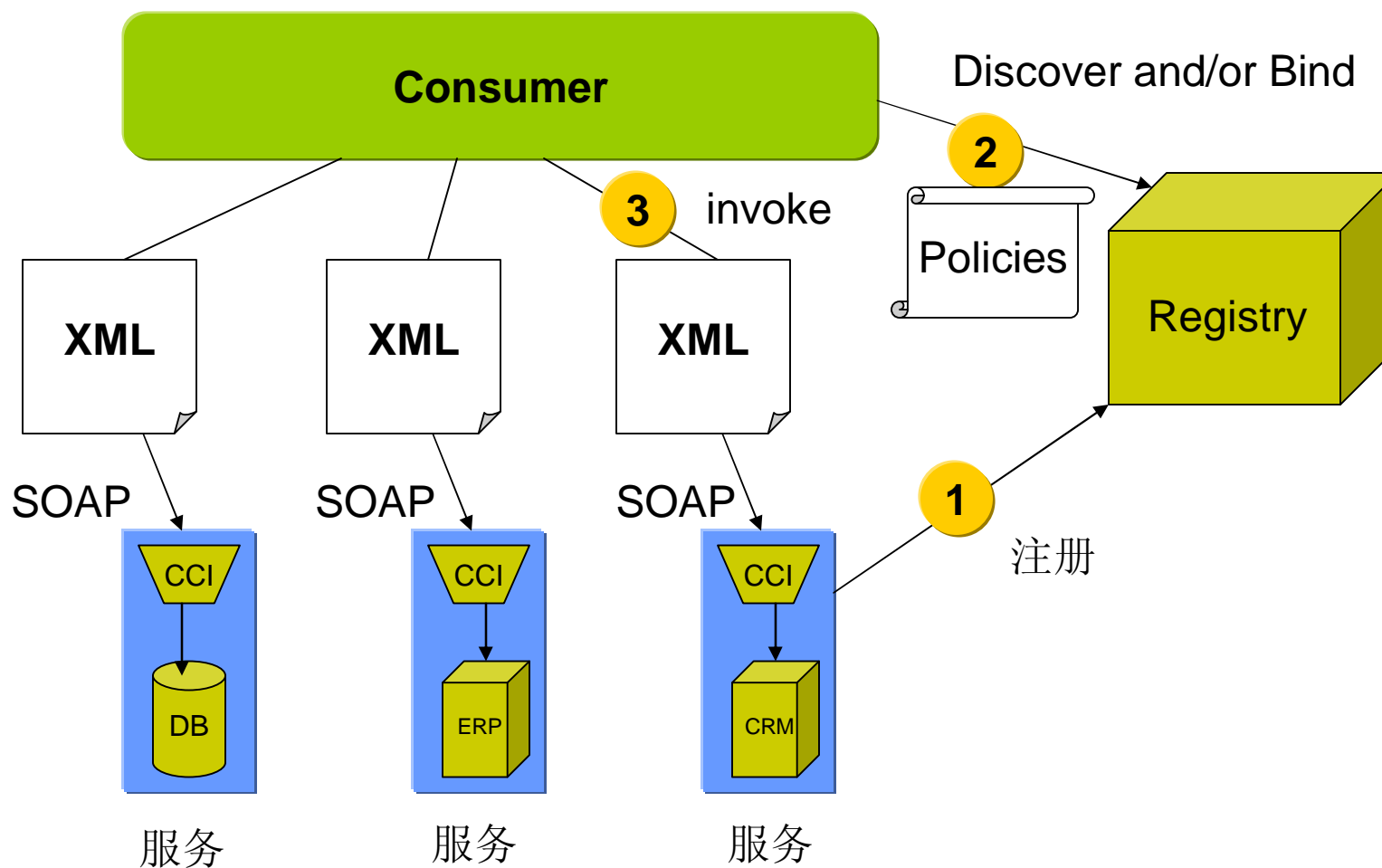
HL7 v3 SOA4HL7



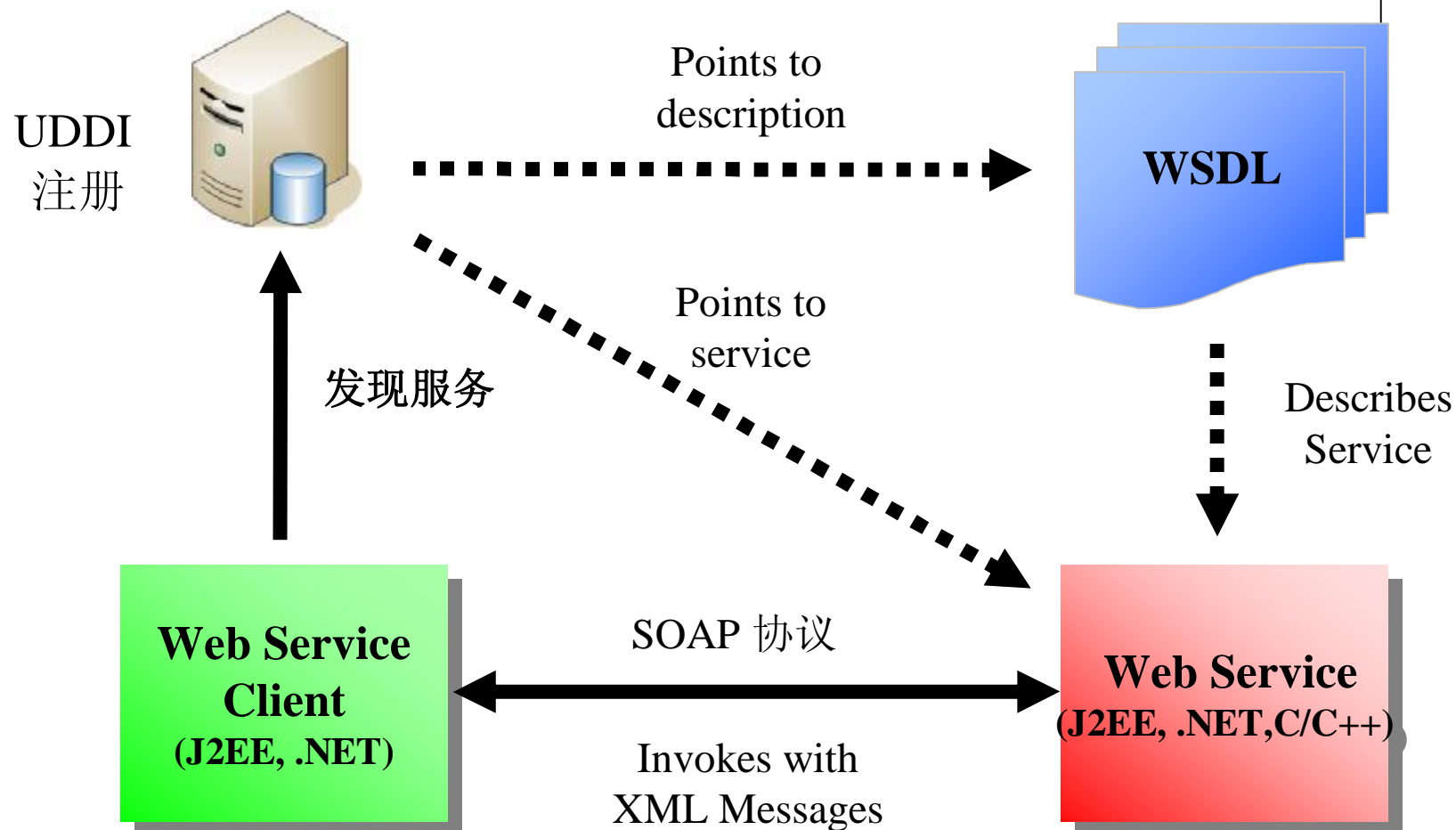
传统的交互架构



基于服务的交互架构



Web Services



WS-I (Web Services Interoperability)

WS-I is an open industry organization that promotes Web services interoperability across operating systems, and programming languages.

WS-I delivers practical guidance, best practices, and tools for developing interoperable Web services.

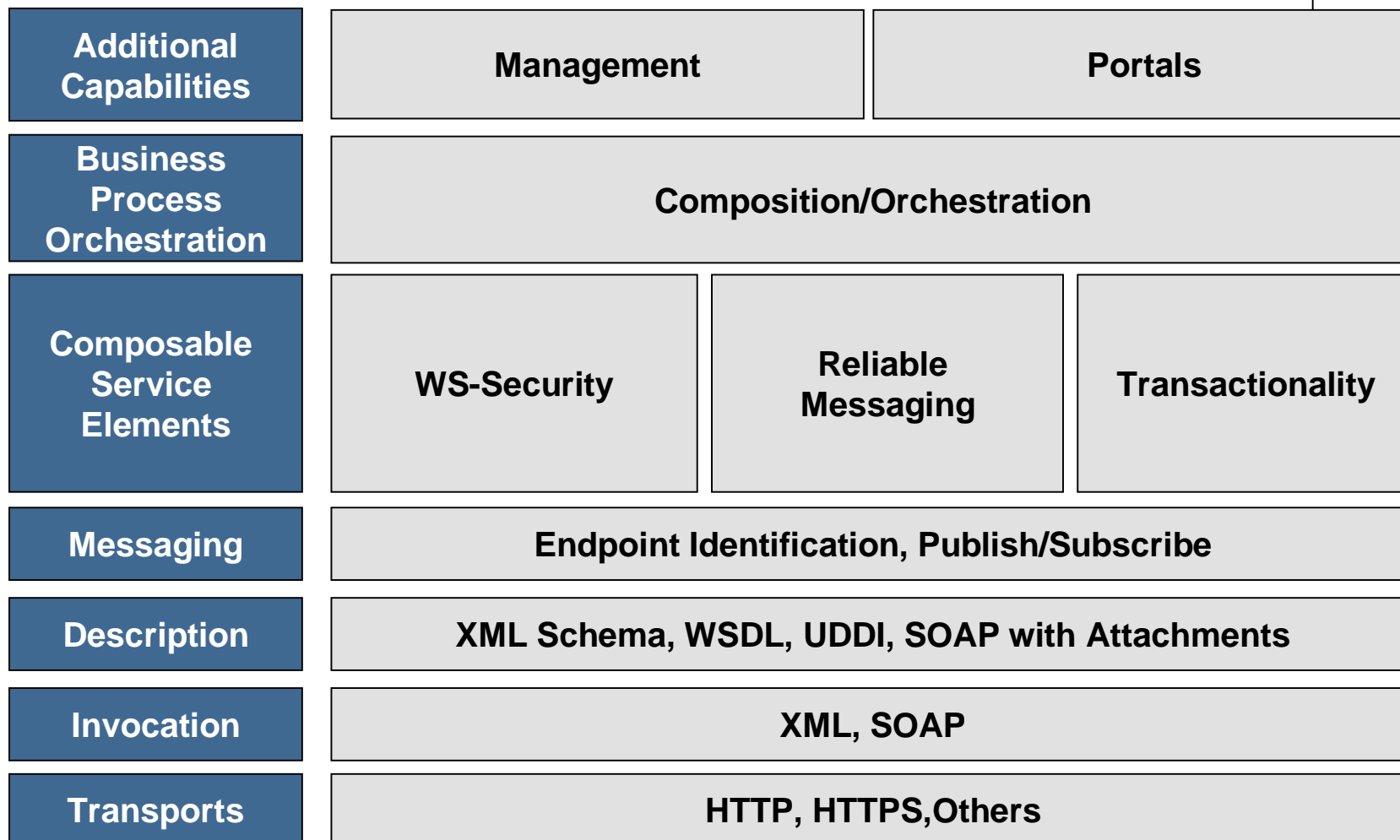
FEATURED
Basic Security Profile 1.0
March 30, 2007

Overview	Deliverables Index				
Deliverables Index ▶					
Basic Profile					
Basic Security Profile					
Reliable Secure Profile					
Requirements Gathering					
Sample Applications					
Testing Tools					
XML Schema Work Plan					

Working Group Deliverables					<input type="text" value="Show only Profile type"/> <input type="button" value="Apply filter"/> <input type="button" value="Hide descriptions"/>
Name	Type	Working Group	Status	Date ▼	
Basic Security Profile 1.0	Profile	Basic Security Profile	Final Material	30 March 2007	English: <small>html (321K)</small> <input type="button" value="Submit comments"/>
The Basic Security Profile 1.0 provides guidance on the use of WS-Security and the REL, Kerberos, SAML, UserName and X.509 security token formats.					
Basic Profile 1.2	Profile	Basic Profile	Board Approval Draft	28 March 2007	English: <small>html (271K)</small> <input type="button" value="Submit comments"/>
Basic Profile 1.2 builds on Basic Profile 1.1 by incorporating Basic Profile 1.1 errata, requirements from Simple SOAP Binding Profile 1.0, and adding support for WS-Addressing and MTOM.					
Basic Security Profile 1.1 Working Group Approval Draft	Profile	Basic Security Profile	Working Group Approval Draft	20 February 2007	English: <small>html (336K)</small> <input type="button" value="Submit comments"/>
The Basic Security Profile 1.1 provides guidance on the use of WS-Security 1.1 and the REL, Kerberos, SAML, UserName and X.509 security token formats.					
Attachments Profile 1.0 Second Edition	Profile	Basic Profile	Final	20 April 2006	English: <small>htm (107K)</small> Japanese: <small>htm (109K)</small> <input type="button" value="Submit comments"/>
The Attachment Profile 1.0 complements the Basic Profile 1.1 to add support for interoperable SOAP Messages with attachments-based Web services. This second edition includes all errata identified to date. Note that errata still needs to be applied to the Japanese translation. The 2nd edition has not yet been translated into Japanese.					
Basic Profile 1.1 Second Edition	Profile	Basic Profile	Final	10 April 2006	English: <small>htm (195K)</small> <input type="button" value="Submit comments"/>
The Basic Profile 1.1 Second Edition incorporates all to-date errata. This profile provides interoperability guidance for basic SOAP messaging for Web services.					
Kerberos Token Profile Working Group Draft	Profile	Basic Security Profile	Superseded	20 January 2006	English: <small>html (51K)</small> <input type="button" value="Submit comments"/>
This is the interoperability profile for the Kerberos security token that is used with WS-Security.					
REL Token Profile Working Group Draft	Profile	Basic Security Profile	Superseded	20 January 2006	English: <small>html (44K)</small> <input type="button" value="Submit comments"/>

二零零七年十月十八日

The Web Services Standards Stack



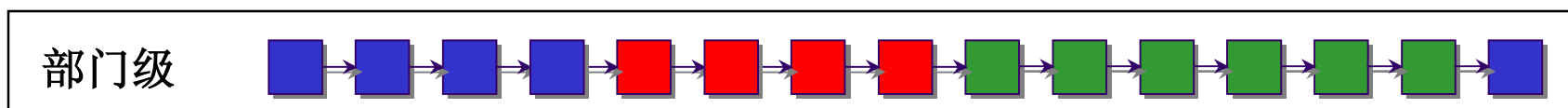
基于SOA的交互



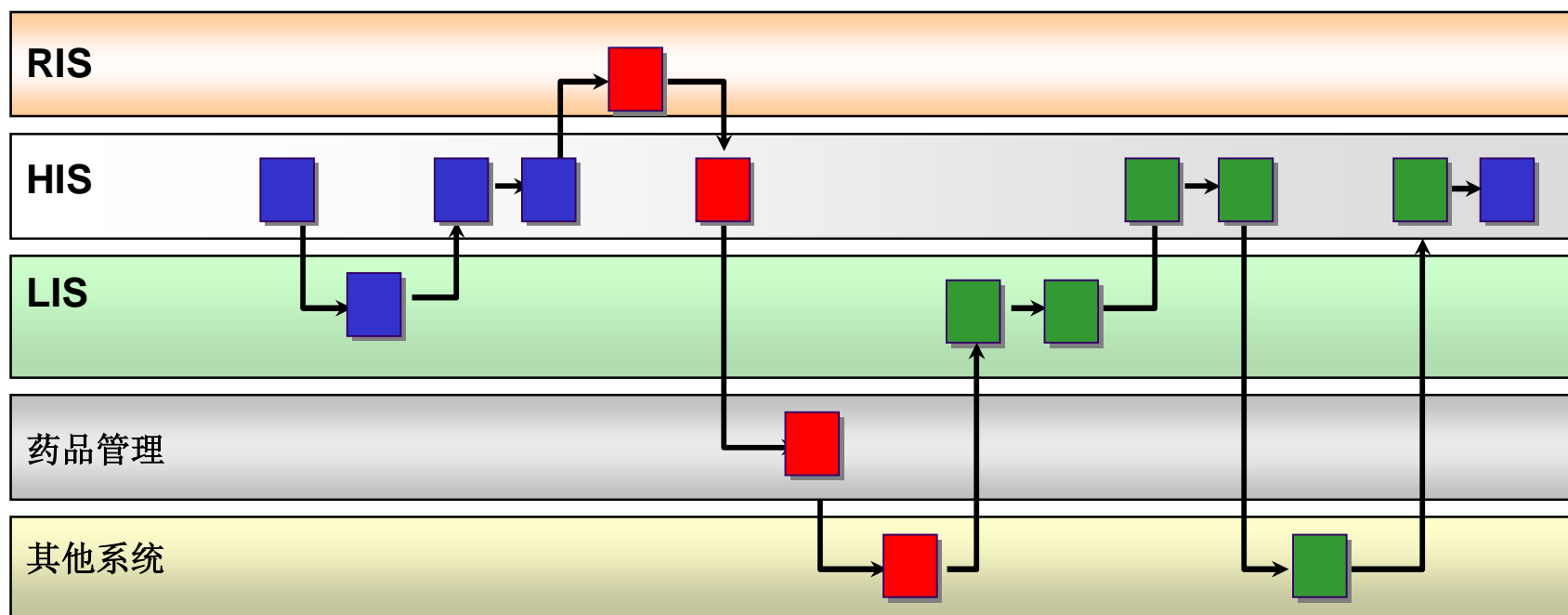
基于 SOA 架构，可以
轻易实现跨两大技术体
系J2EE 或 .NET之上
的整合

基于SOA的应用交互

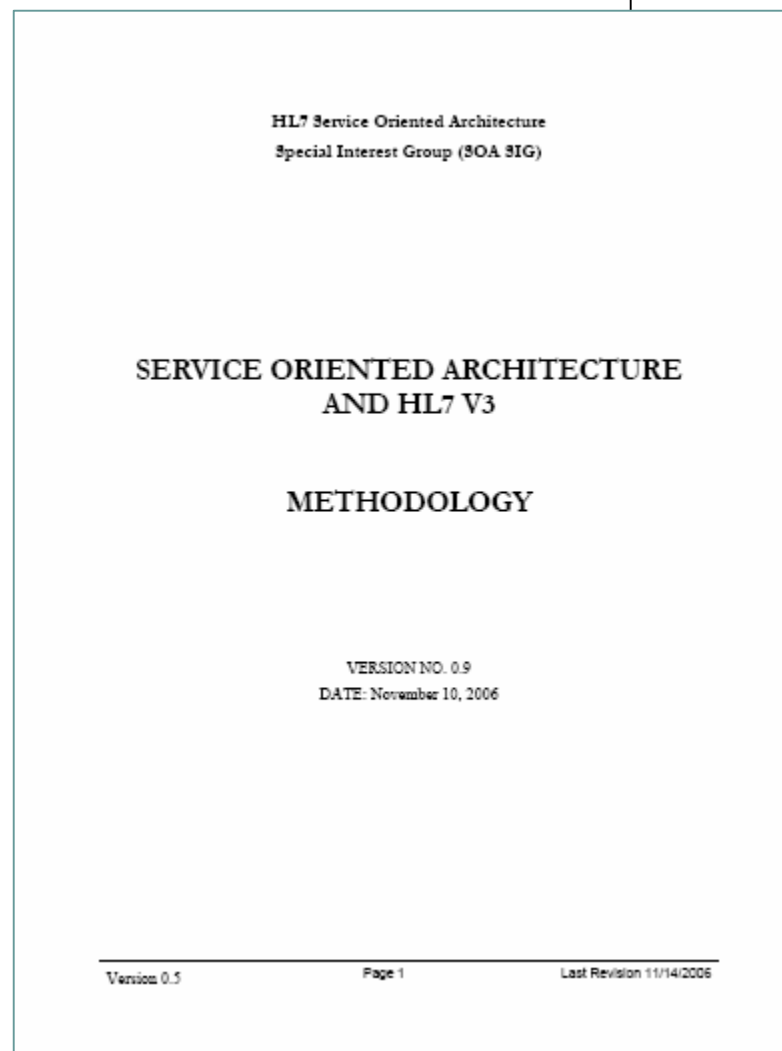
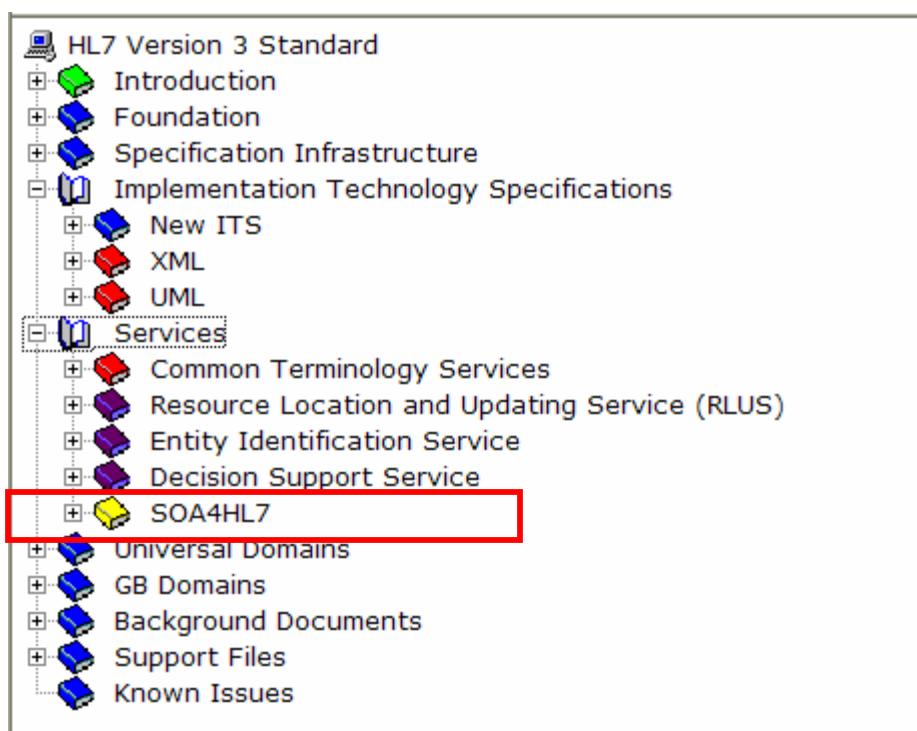
从传统的顺序的，竖直的业务模式



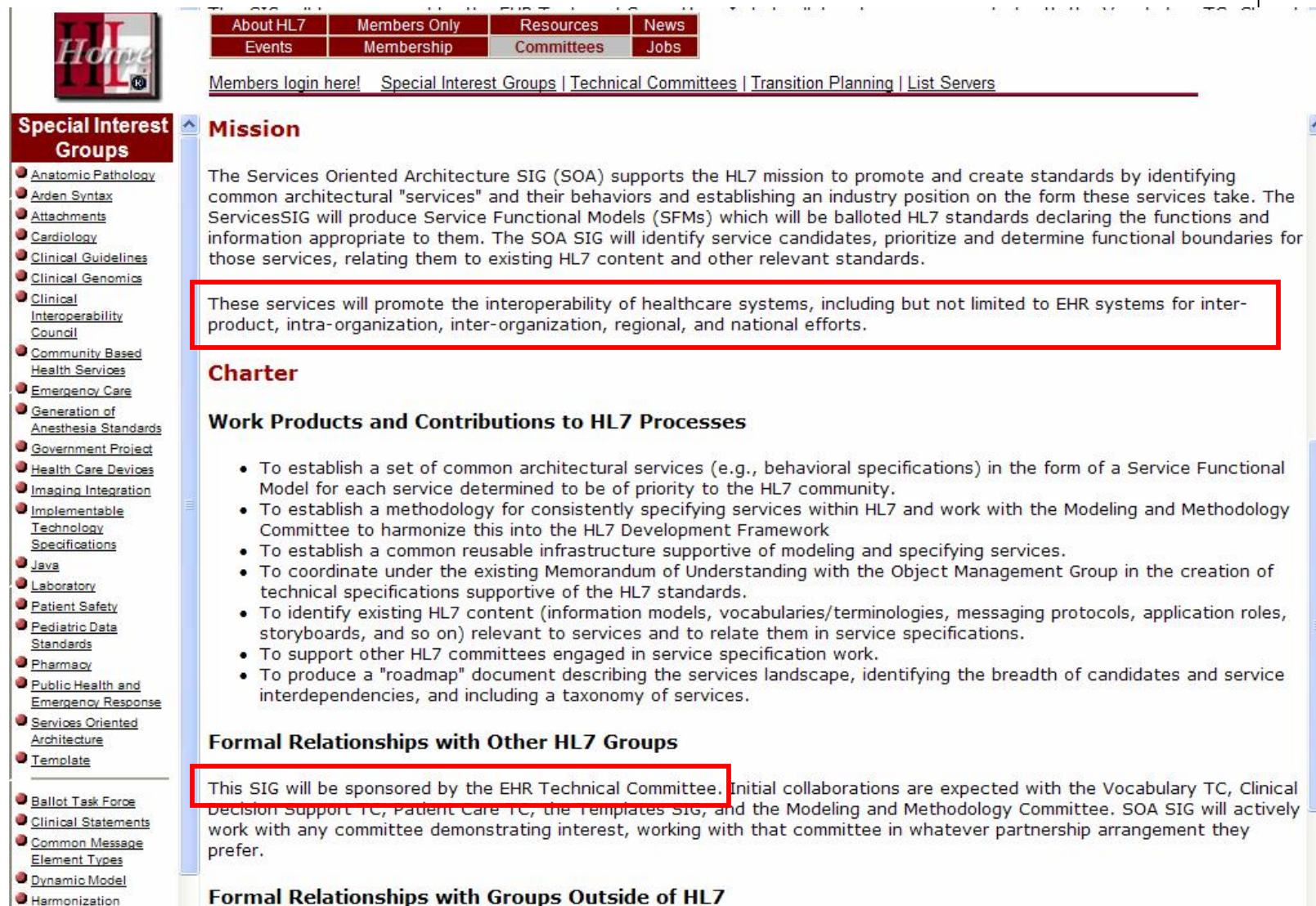
到并行的，协同的业务模式



HL7 v3 SOA4HL7



HL7 v3 SOA4HL7



The screenshot shows the HL7 v3 SOA4HL7 website. At the top, there is a navigation bar with links: About HL7, Members Only, Resources, News, Events, Membership, Committees, and Jobs. Below this, a banner reads "Members login here! Special Interest Groups | Technical Committees | Transition Planning | List Servers".

Special Interest Groups

- Anatomic Pathology
- Arden Syntax
- Attachments
- Cardiology
- Clinical Guidelines
- Clinical Genomics
- Clinical Interoperability Council
- Community Based Health Services
- Emergency Care
- Generation of Anesthesia Standards
- Government Project
- Health Care Devices
- Imaging Integration
- Implementable Technology Specifications
- Java
- Laboratory
- Patient Safety
- Pediatric Data Standards
- Pharmacy
- Public Health and Emergency Response
- Services Oriented Architecture
- Template
- Ballot Task Force
- Clinical Statements
- Common Message Element Types
- Dynamic Model
- Harmonization

Mission

The Services Oriented Architecture SIG (SOA) supports the HL7 mission to promote and create standards by identifying common architectural "services" and their behaviors and establishing an industry position on the form these services take. The ServicesSIG will produce Service Functional Models (SFM) which will be balloted HL7 standards declaring the functions and information appropriate to them. The SOA SIG will identify service candidates, prioritize and determine functional boundaries for those services, relating them to existing HL7 content and other relevant standards.

These services will promote the interoperability of healthcare systems, including but not limited to EHR systems for inter-product, intra-organization, inter-organization, regional, and national efforts.

Charter

Work Products and Contributions to HL7 Processes

- To establish a set of common architectural services (e.g., behavioral specifications) in the form of a Service Functional Model for each service determined to be of priority to the HL7 community.
- To establish a methodology for consistently specifying services within HL7 and work with the Modeling and Methodology Committee to harmonize this into the HL7 Development Framework
- To establish a common reusable infrastructure supportive of modeling and specifying services.
- To coordinate under the existing Memorandum of Understanding with the Object Management Group in the creation of technical specifications supportive of the HL7 standards.
- To identify existing HL7 content (information models, vocabularies/terminologies, messaging protocols, application roles, storyboards, and so on) relevant to services and to relate them in service specifications.
- To support other HL7 committees engaged in service specification work.
- To produce a "roadmap" document describing the services landscape, identifying the breadth of candidates and service interdependencies, and including a taxonomy of services.

Formal Relationships with Other HL7 Groups

This SIG will be sponsored by the EHR Technical Committee. Initial collaborations are expected with the Vocabulary TC, Clinical Decision Support TC, Patient Care TC, the Templates SIG, and the Modeling and Methodology Committee. SOA SIG will actively work with any committee demonstrating interest, working with that committee in whatever partnership arrangement they prefer.

Formal Relationships with Groups Outside of HL7

HL7 v3 SOA4HL7

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5 Guidance for Design Decisions.....	45
5.1 Service Design Considerations.....	45
5.2 Security	50
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Why “services” and not just “messages”?

- | 公认的行业最佳业务实践
 - | A common practice in healthcare but not yet healthcare IT
 - | Common place usage across “IT” outside of healthcare
 - | Many key products use them but do not expose interfaces
- | 服务明确的定义行为而数据传输是隐性的
 - | Ensures functional consistency across applications
 - | Furthers authoritative sources of data
 - | Minimizes duplication across applications, reuse
- | 服务不排除使用消息
 - | Services rely upon underlying transport protocols
 - | Messages can be used as payloads for service calls
 - | Messaging infrastructure may be used as underlying transport

Services and SOA

- | Services are NOT just “synchronous request-reply”
SOA covers asynchronous and synchronous equally. Both have their place.
- | SOA is NOT just web services or even just technology
Aspects of process, methodology and behavior are more important than technology. However, the unprecedented cooperation and alignment of many IT organizations has provided a uniquely widespread technology underpinning.
- | SOA is NOT just a “fad”
Like messaging, SOA is part of the natural progression or evolution of the IT industry. The specific technologies used today will continue to evolve. It is really the culmination of many best practices that have evolved over the years. Personal view – combined with EDA, BPM and further “Semantic” based concepts, I don’t believe that concepts will actually evolve that much further.

Coupling - SOA, HL7 Messaging (and also EDA)

- ∅ Services (SOA) : “Provider - do something and (optionally) let me know the result”
- ∅ HL7 Messaging: “Receiver - This happened, here is the information, and I expect you to do this in this interaction pattern”
- ∅ Events (EDA): “Anyone - This happened - do what you will about it”

Coupling Type	SOA	HL7 Messaging	EDA
Business Function	Tight	Tight	Loose
Business Process	Loose	Tight	Loose
Technology (Middleware)	Loose	Varies	Varies
Technology (Endpoint)	Loose	Loose	Loose

Achieving SOA Benefits

There are three main areas where realizing the benefits of SOA may be impaired using HL7 V3 and the Web Services Profile:

- | Business
 - | SOA defines services top-down based on business processes, maximizes alignment and agility to adapt to business needs. Driving from messages will not align functionally as well (sometimes it will)
 - | Adaptability/Responsiveness to change. Use of simple, dynamic/ad-hoc intermediary capability within SOA is key to this flexibility. Constraints and complexity need to be minimized.
- | Development Tools
 - | Standard web service tooling makes it (relatively) cheap and easy for organizations to incorporate services into the enterprise (both on client and server side). These are increasingly configured to work with domain independent OASIS, WS-I standards etc. Should not handle different content in different ways
- | Infrastructure
 - | Standards based infrastructure for security, policy definition and run time evaluation, reliable messaging etc. Again, needs to deal with all content in same way for time and cost efficiencies and simplicity

Where would these specifications be used

Inter-Enterprise (such as NHIN, RHIOs, LHINs)

- | By functionally specifying behavior, roles between applications and products are clarified, and the technologies supporting them can be profiled and sharpened

Intra-Enterprise

- | Standardization on functionality allows for better integration of off-the-shelf and custom development environments, and promotes more of a “plug and play” environment

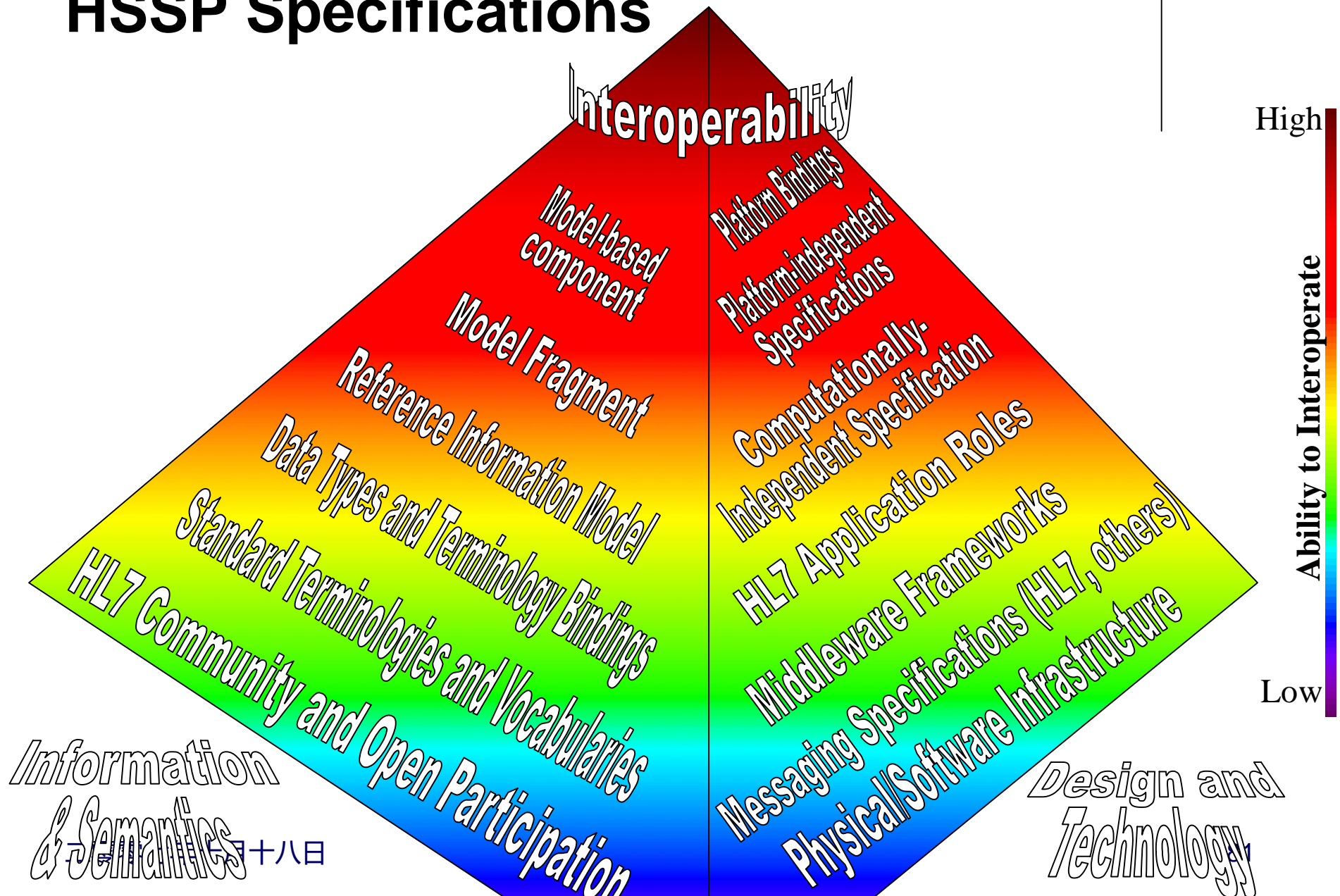
Intra-Product

- | Facilitates vendors ability to integrate third-party value-add components and speed design phase with higher confidence

Custom-Implementation

- | Affords organizations wishing to custom-develop the opportunity to later integrate off-the-shelf

HSSP Specifications



References

HSSP Wiki

- | <http://hssp.wikispaces.com>

HL7 Website:

- | <http://www.hl7.org>

OMG Website:

- | <http://www.omg.org>

**谢谢参加电子病历委员会厂商培
训讨论班， 欢迎提供反馈意见**

haitong.wang@oracle.com