May Working Group Meeting

Hilton in the Walt Disney World® Resort
Lake Buena Vista, FL
May 15–20, 2011

Now offering CME credits
sponsored through the American College of Physicians
See page 4 for details.

Hotel Cutoff—April 15, 2011
Early Bird Registration Cutoff—May 2, 2011
Online Registration—May 9, 2011
Welcome to the 2011 May Working Group Meeting!

You’ll be glad to know that the HL7 international community is thriving. Membership is up. Working group attendance is strong. Our productivity is high and our efficiency is improving. We are making deliberate progress toward each of our strategic initiatives. These are good times for HL7. Across the globe, there is growing recognition of the need for semantic interoperability standards and the tremendous value HL7 brings to that equation.

For those of us who have been part of HL7 for a while now, please take an opportunity this week to reach out to one of the many first-time attendees and welcome them. Before we know it, they will be our friends and colleagues, arguing with us and engaging us in new and innovative ideas. Before they realize it, they will come to recognize the feeling of camaraderie that many have been fortunate to know for years. They will become part of a community that is focused on working together to improve patient care through health information technology.

In that spirit of growth, innovation, and camaraderie, I’m pleased to welcome you to the meeting.

Robert (Bob) H. Dolin, MD
Chair of the Board, 2010-2011, Health Level Seven® International
IHIC 2011 will be held on Friday and Saturday, May 13 and 14, in the same venue as the HL7 working group meeting. Early bird fees will be $300 for both days and $200 for one day. The regular rate is $350 for both days and $250 for one day. However, the costs may be reduced if sponsorships for the meeting are secured. The theme of the meeting is The Tomorrowland of Health. There will not be any breakout sessions. The plan is to stay together for all of the meetings. The two-day meeting will be broken into four half-day tracks. The presentations will be a combination of invited speakers and submitted papers. We plan to have a social event at one of the futuristic locations in either Disney World or Universal Studios on Friday evening.

The topics for the four tracks are outlined as follows:

**Theme: The Tomorrowland of Health**

**Meaningful Use**
- Security, privacy, and confidentiality
- How to generate value from incentive money
- Certification of systems
- Interoperability Framework (Doug Fridsma)

**Simulation, Virtual Environment**
- Virtual hospitals
- Virtual training
- Robotic surgery
- The virtual patient
- Social networking

**Future of Personal Health**
- Mobile devices
- Home devices, Continua
- Community
- Smoking, obesity
- Beacon grants
- Behavior change
- Electronic aids for aging and independence
- PHR, Google Health, Health Vault, recreational genetics

**Next Generation Architecture**
- Next Generation EHR
- SOA in health care
- SMArt platform
- Healthcare and the semantic web
- Modeling: LRA, openEHR, DCMs, Clinical Element Models
WHAT IS A WORKING GROUP MEETING?

HL7 working group meetings are held three times per year at varying locations. These working group meetings serve two important purposes: 1) They give the HL7 work groups a chance to meet face-to-face to work on the standards; 2) They provide an invaluable educational resource for the healthcare IT community.

Standards Development
HL7 has more than 40 work groups dedicated to specialized areas of interest such as Orders and Observations and Electronic Health Records. These work groups are directly responsible for the content of the standards and spend much of their time at the working group meetings hard at work on standards development. Attending a working group meeting is a great way to learn more about what’s happening in a particular area, so you are encouraged to participate in any meeting that interests you. Please see pages 17-19 for a complete schedule of meeting times throughout the week.

Educational Sessions
This working group meeting will offer numerous educational opportunities. Sessions will cover a full range of HL7-specific topics such as Version 2.x Implementation, Version 3, and the Clinical Document Architecture (CDA), among others. Educational sessions also branch out to cover general interest industry topics such as the Electronic Health Record, Clinical Decision Support, and Vocabulary Terminology. HL7 also now offers CME credit on a number of tutorials. For a full listing of course descriptions, please see pages 6-13.

EDUCATION TRACKS

HL7 has organized its courses into four tracks to make it easier to choose the educational offerings that are right for you:

Track 1 – Version 2 Core
HL7 Version 2 is the world’s most successful healthcare interoperability standard. Originally developed in the late 1980s, it has been continually enhanced over time. The introductory tutorials familiarize students with the Version 2 messaging standard and its core domain areas, while the implementation classes provide the “how to” basics of implementation. The track also includes courses that cover conformance and profiles and XML for Version 2.

Track 2 – Version 3 Core
HL7 Version 3 is HL7’s new flagship standard, adopted by major healthcare organizations, such as the NHS in England. This track is designed to give the attendee a thorough introduction to the Version 3 family of standards. It covers Version 3 fundamentals, the Reference Information Model (RIM), messaging, documents (Clinical Document Architecture), messaging infrastructure (wrappers, transport), and the XML Implementation Technology specification. It concludes with classes that address strategies for implementation.

Track 3 – HL7 Special Topics
The Special Topics track offers a variety of electives on important HL7 standards that may not fall in either the Version 2 or Version 3 family. These include HL7 standards for electronic health records (EHR), visual integration (CCOW), security and medical logic (Arden Syntax). The Special Topics track also offers advanced or specialized classes in Version 2 or Version 3 subjects that are not considered part of the basic core offerings. Examples include classes in Version 2 and Version 3 tooling, and domain classes such as clinical genomics.

Track 4 – Information Forums **FREE**
This track provides tutorials designed to support new member involvement, and help existing members become more effective in their participation in the HL7 standards development process. Tutorials included in this track are tutorials such as the first timers’ orientation, introduction to HL7 organization and process, and co-chair training.

These tracks are only suggested course groupings. Feel free to choose whatever courses you feel are right for you from among the four tracks.

CME CREDIT SPONSORED THROUGH THE AMERICAN COLLEGE OF PHYSICIANS

Many of the tutorials offered at the May Working Group Meeting qualify for continuing medical education for physicians. This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the American College of Physicians and Health Level Seven® International. The American College of Physicians is accredited by the ACCME to provide continuing medical education for physicians. The American College of Physician’s designates the educational activity for a maximum number of 24 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.
SATURDAY, MAY 14
9:00–5:00pm TSC Meeting

SUNDAY, MAY 15
8:30 – 5:00pm REGISTRATION
9:00 – 3:00pm HL7 International Council Meeting
9:00 – 3:00pm Architectural review Board (ArB) Meeting
1:45 – 3:00pm Modeling & Methodology (MnM) Meeting
3:30 – 5:00pm HL7 Activities with Other SDos
4:00 – 5:00pm First-Time Attendees’ Orientation – FREE TUTORIAL
5:00 – 6:00pm Organization and Process Orientation/Introduction – FREE TUTORIAL
7:00 – 9:00pm TSC Meeting

MONDAY, MAY 16
7:00 – 8:00am First-Time Attendees’ Orientation – FREE TUTORIAL
7:00 – 8:00am Continental Breakfast
7:00 – 5:00pm REGISTRATION
8:00 – 8:45am General Session – HL7 CEO and International Council Reports, Announcements
9:00 – 12:30pm HL7 Innovations Workshop
9:00 – 12:30pm Introduction to Version 2, Part 1: Control/Patient Administration
9:00 – 12:30pm Introduction to Version 3, Part 1: Fundamentals
9:00 – 12:30pm Introduction to Vocabulary in HL7
9:00 – 5:00pm Working Group Meetings
10:30 – 11:00am Morning Break
12:30 – 1:30pm Lunch – First-Time Attendees’ Q & A reserved tables
12:30 – 1:30pm Lunch – Co-Chair reserved tables
1:45 – 5:00pm Introduction to Version 2, Part 2: Orders and Observations
1:45 – 5:00pm Introduction to Version 3, Part 2: Messaging
1:45 – 5:00pm Advanced Application of Vocabulary in HL7
3:00 – 3:30pm Afternoon Break
5:15 – 7:00pm HL7 Networking Reception

TUESDAY, MAY 17
7:00 – 8:00am Organization and Process Orientation/Introduction – FREE TUTORIAL
7:00 – 8:00am Continental Breakfast
7:00 – 8:00am Nurses Meeting
7:00 – 5:00pm REGISTRATION
8:00 – 8:45am General Session – HL7 CTO and TSC Reports, Announcements
9:00 – 12:30pm Version 3 Implementation for Project Managers
9:00 – 12:30pm Version 3 XML ITS for CDA
9:00 – 12:30pm Introduction to Electronic Health Record
9:00 – 5:00pm Working Group Meetings
10:30 – 11:00am Morning Break
12:30 – 1:30pm Lunch – First-Time Attendees’ Q & A reserved tables
12:30 – 1:30pm Lunch – Co-Chair reserved tables
12:30 – 1:30pm TSC Luncheon/Meeting
12:30 – 1:30pm Education Work Group Luncheon Meeting
1:45 – 5:00pm CDA Communities and Strategies for Implementation

WEDNESDAY, MAY 18
7:00 – 7:45am GS1 Education Session – “GS1 System Landscape”
7:00 – 8:00am Continental Breakfast
7:30 – 5:00pm REGISTRATION
8:00 – 8:45am General Session – Board Report, Awards Presentations, Announcements
9:00 – 12:30pm Version 2.6 Control Specialist Certification Review
9:00 – 12:30pm Version 3 Messaging Implementation, Part 1: Analysis and Specification
9:00 – 12:30pm Introduction to Clinical Document Architecture
9:00 – 5:00pm Working Group Meetings
10:30 – 11:00am Morning Break
12:30 – 1:30pm Lunch – Project Facilitators’ Roundtable
1:45 – 5:00pm Clinical Document Architecture Advanced
1:45 – 5:00pm Version 3 Data Types Release 2
1:45 – 5:00pm Clinical Decision Support: HL7 Standards & Practical Applications
3:00 – 3:30pm Afternoon Break
3:30 – 5:00pm SAIF Architecture Program Update
5:15 – 7:00pm HL7 Networking Reception

THURSDAY, MAY 19
7:00 – 7:45am Newly Elected Co-Chair Training – FREE TUTORIAL
7:00 – 8:00am Continental Breakfast
7:30 – 5:00pm REGISTRATION
8:00 – 8:45am General Session – Announcements
9:00 – 12:30pm CDA Specialist Certification Exam Review
9:00 – 12:30pm Continuity of Care Document
9:00 – 12:30pm HL7 Standards for Meaningful Use
9:00 – 5:00pm Working Group Meetings
10:30 – 11:00am Morning Break
12:30 – 1:30pm Affiliate Chair or Designated Rep Luncheon/Meeting (Must register)
1:45 – 5:00pm Imaging Interoperability: DICOM, HL7 and IHE
1:45 – 5:00pm Version 3 Specification Development Tools
1:45 – 5:00pm Personal Health Record
1:45 – 5:00pm Architectural review Board (ArB) Meeting
3:00 – 3:30pm Afternoon Break
5:30 – 7:30pm Version 2.6 Control Specialist Certification Exam
5:30 – 7:30pm CDA Specialist Certification Exam
5:30 – 7:30pm Version 3 RIM Certification Exam
5:30 – 7:30pm Modeling & Methodology (MnM) Facilitators’ Roundtable

FRIDAY, MAY 20
8:00 – 8:45am No General Session
8:00 – 9:00am Continental Breakfast
8:00 – 10:00am Staff will be on hand for questions and assistance
9:00 – 5:00pm Working Group Meetings
10:30 – 11:00am Morning Break
12:30 – 1:30pm Lunch
3:00 – 3:30pm Afternoon Break

Note: Tutorials appear in bold
Note: In compliance with our status as an ANSI-accredited standards developing organization, HL7 meetings are open.
M1 – Introduction to Version 2, Part 1: Control/Patient Administration

Monday, May 16 / 9:00 am – 12:30 pm  

This tutorial introduces students to HL7 and the basic concepts of Version 2. It discusses the structure of the standard and covers two of the standard’s fundamental chapters: Control and Patient Administration.

This Tutorial Will Benefit:  
• Those new to HL7

Faculty:  
Ted Henderson, Faculty:  
Mike Henderson, Faculty:

M4 – Introduction to Version 2, Part 2: Orders and Observations

Monday, May 16 / 1:45 pm – 5:00 pm  

This tutorial provides the students with an overview of the Version 2 Orders and Observations messages and major concepts and provides a sampling of the type of information that can be communicated using these messages.

This Tutorial Will Benefit:  
• Those new to HL7 with a need to become familiar with Version 2 messages

Upon Completion of This Tutorial, Students Will Know:  
• Basic Order and Observation message structures  
• Sample messages  
• How to start to interpret the Version 2 Orders and Observation standards

Faculty:  
Han Buitendijk, FHL7: Treasurer, HL7 Board of Directors; Co-Chair, HL7 Orders and Observations Work Group; Co-Chair, HL7 Clinical Statements Work Group; Standards and Regulations Manager, Siemens Medical Solutions Health Services Corporation

W13 – Version 2.6 Control Specialist Certification Review

Wednesday, May 18 / 9:00 am – 12:30 pm  

This tutorial reviews the message definition, processing rules and data type definitions of the Control chapters of the HL7 Version 2.6 standard. Upon completion of this tutorial, students will be better prepared to take the HL7 Version 2.6 Control Specialist Certification Exam.

Note: Students are also expected to prepare for the exam by previous study of Chapter 2 (Control), Chapter 2A (Data Types), and Chapter 2B (Conformance) of the HL7 Version 2.6 standard.

This Tutorial Will Benefit:  
• Anyone preparing for the HL7 Control Specialist Certification Exam  
• Interface analyst specialists and managers who need to understand the technical aspects of HL7 interfaces

Faculty:  
Mike Henderson: Co-Chair, HL7 Education Work Group; Principal Consultant, Eastern Informatics

TH22 – Imaging Interoperability: DICOM, HL7 & IHE

Thursday, May 19 / 1:45 pm – 5:00 pm  

3 CME Credits

With the emergence of imaging in a broader range of healthcare environments (e.g., as facilitated by laptop ultrasound systems), there is increasing need for integration of imaging into a variety of clinical information systems. This course will look at imaging workflows and their associated standards, including DICOM, HL7 messaging, and Clinical Document Architecture (CDA™). It will also examine the role of Interoperating the Healthcare Enterprise (IHE) Profiles in improving the interoperability of systems participating in the imaging workflow.

This Tutorial Will Benefit:  
• Product managers and software developers of clinical information systems that will need to display images or image-related information such as diagnostic imaging reports  
• Product managers and software developers of imaging systems or image analysis or reporting applications  
• Integration specialists and consultants

Upon Completion of This Tutorial, Students Will Understand:  
• The use of DICOM and HL7 in the imaging workflow  
• The IHE integration profiles for intra-institutional and cross-enterprise data exchange  
• The CDA Implementation Guide for diagnostic imaging reports

Prerequisites:  
• CDA Introductory tutorial and the Introduction to Version 2 tutorials (recommended)

Faculty:  
Harry Solomon: Co-Chair, HL7 Imaging Integration Work Group; Interoperability Architect, GE Healthcare

TH25 – HL7 Version 2.6 Control Specialist Certification Exam

Thursday, May 19 / 5:30 pm – 7:30 pm  

3 CME Credits

Health Level Seven International is pleased to offer certification testing on HL7 Version 2.6, Chapter 2: Control. Certification testing is offered to those industry participants who are expected to have a working knowledge of the HL7 Messaging Standard. Interface analysts, healthcare systems analysts, medical software programmers, and medical informatics faculty and students are all potential candidates. The knowledge required to pass the exam can be obtained by participation in the HL7 working group meetings, by attending HL7 education sessions, by field work dealing with HL7 interfaces, or simply by self-study of Chapter 2 and 2A of the HL7 Standard Version 2.6 (the standard may be obtained via HL7 membership or non-member purchase on www.HL7.org).

Note: Simply taking the courses offered at this meeting will most likely not be sufficient to pass the test. We strongly recommend a combination of the aforementioned to fully prepare yourself for the exam.
**M2 – Introduction to Version 3, Part 1: Fundamentals**  
**Monday, May 16 / 9:00 am – 12:30 pm**  
3 CME Credits

Introduction to Version 3 is a rigorous introduction to HL7’s emerging standard. Included in the class is:

- General rationale for Version 3
- Explanation of Version 3’s two key concepts: messaging and documents (CDA)
- Overview of the Version 3 publication (ballot and standard)
- Essential concepts and terminology necessary to understand the static models of Version 3 used for both messages and documents

**This Tutorial Will Benefit:**

- Anyone interested in Version 3 implementation or standards development
- Anyone interested in more advanced Version 3 classes on messaging and CDA

**Upon Completion of This Tutorial, Students Will Have Obtained the Following:**

- General understanding of the purpose, function, and format of Version 3 messaging and documents
- Rudimentary knowledge of the Reference Information Model (RIM) with a focus on act, role, act relationship, and participation
- Rudimentary understanding of Version 3 Refined Message Information Models (RMIMs) and the refinement process
- Knowledge of scope, contents, and organization of the Version 3 publications

**Prerequisites:**

- Experience with healthcare interfacing would be helpful
- Experience or training with systems (development, integration, and/or implementation) required
- It is assumed that the student has some familiarity with the HL7 organization and its processes (balloting procedures, etc.)

**Faculty:**

Gora Datta: Corporate Member, HL7; Group Chairman & CEO, CAL2CAL Corporation

**M5 – Introduction to Version 3, Part 2: Messaging**  
**Monday, May 16 / 1:45 pm – 5:00 pm**  
3 CME Credits

Health Level Seven International is famous as a provider of messaging standards; that is, providing the standard format and interaction specifications required for two disparate healthcare systems to communicate at the application level. This tutorial builds on the morning Version 3 introduction class by focusing on how messaging is addressed with the Version 3 Standard. It reviews and expands on how Version 3 static models are used to represent messages. The Version 3 dynamic model, which is related to the interactions between systems, is introduced. The tutorial explains how message sets are documented with a focus on act, role, act relationship, and participation. It is assumed that the student has some familiarity with the HL7 RIM and its processes (balloting procedures, etc.).

**This Tutorial Will Benefit:**

- Anyone interested in more advanced classes on Version 3
- Anyone interested in Version 3 implementation or standards development
- Anyone interested in more advanced classes on Version 3

**Upon Completion of This Tutorial, Students Will Have Obtained the Following:**

- Rudimentary understanding of Version 3 static and dynamic models and associated terminology as needed to support Version 3 messaging
- General understanding of the following specific dynamic model concepts: storyboard, application role, trigger event, interaction
- General understanding of the following static model components: DMIM, HMD, and message type
- Summary of all functional areas in the current Version 3 ballot publication and their status
- Ability to read a Version 3 functional domain

**Prerequisites:**

- Introduction to Version 3, Part 1: Fundamentals

**Note:** Messaging builds directly on the concepts covered in Part 1 and is designed to be a continuation of the morning class. Most attendees of Messaging also take the Fundamentals class. If you would like to take Messaging without the Intro please contact the instructor.

**Note:** It is assumed that the attendee has basic familiarity with Version 3 including a general understanding of the RIM and how to interpret the RMIMs. This is covered in the Introduction to Version 3, Part 1 class.

**Faculty:**

AbdulMalik Shakir: Co-Chair, HL7 Education Work Group; Facilitator, HL7 Modeling and Methodology Work Group Member; Member, HL7 Architectural review Board; Principal Consultant, Shakir Consulting

**T7 – Version 3 XML ITS for CDA**  
**Tuesday, May 17 / 9:00 am – 12:30 pm**  
3 CME Credits

Clinical Document Architecture (CDA) is represented in XML and uses the Version 3 data types. This tutorial covers the CDA XML and the data types from an implementer’s perspective.

**This Tutorial Will Benefit:**

- Anyone who works with CDA in practice: Specification designers, analysts, and programmers

**Upon Completion of This Tutorial, Students Will Know:**

- The general design approach for the data types
- The key facts about the important data types
- What the actual CDA XML looks like, how it relates to the published models, and how it works with common tools
- How to avoid the most common implementation mistakes

**Prerequisites:**

- The course assumes that participants have basic XML skills and general knowledge of the Version 3 RIM concepts and the Clinical Document Architecture

**Faculty:**

Kai U. Heitmann, MD: Heitmann Consulting and Services (Germany); HL7 Germany, Chair-Elect
T8 – Version 3 Implementation for Project Managers
Tuesday, May 17 / 9:00 am – 12:30 pm  
3 CME Credits
This tutorial provides an overview of HL7 Version 3 for management focused individuals. It is particularly aimed at project managers involved in specification development as well as those that are developing or implementing applications with HL7 Version 3 based interfaces.

This Tutorial Will Benefit:
• Those interested in building a management level understanding of HL7 standards development (both at the international and realm level) and implementation

Upon Completion of This Tutorial, Students Will Understand:
• The purpose, function, and format of key “RIM-based” messaging and document constructs
• Key management considerations pertaining to HL7 Version 3 specification development as well as to the development and implementation of HL7 Version 3 based interfaces

Prerequisites:
• General experience in project management or project leadership would be helpful
• Experience with systems interfacing in the healthcare domain would be helpful but is not required
• It is assumed that the student has some familiarity with the HL7 organization and its processes (committee work, balloting procedures, etc.)

Faculty:
Marc Koehn: Partner, Gordon Point Informatics Ltd.

T10 – CDA Community and Strategies for Implementation
Tuesday, May 17 / 1:45 pm – 5:00 pm  
3 CME Credits
This tutorial focuses on how to implement CDA, the community that has grown up around it and how it is being used in a wide variety of settings. Several speakers from around the world will describe their CDA experience and lessons learned. Speakers will also discuss their preferred CDA implementation roadmap.

This Tutorial Will Benefit:
• Analysts, architects, and/or developers interested in learning from others’ implementation experience

Upon Completion of This Tutorial, Students Will Know:
• Various CDA implementations around the world
• Various implementation challenges others have faced
• Various approaches to implementing CDA

Prerequisites:
• This will not be a CDA tutorial. While attendees are not required to have a firm understanding of CDA, it is anticipated that a CDA background will aid the understanding of suggested approaches and previously encountered challenges

Faculty:
Diego Kaminker: Chair, HL7 Argentina; Co-Chair, HL7 Education Work Group; Co-Author and Coordinator, HL7 e-Learning Course, Argentina; Chief Developer and Manager, Kern-IT SRL

TUTORIALS

Wednesday, May 18 / 9:00 am – 12:30 pm  
3 CME Credits
The use of HL7 Version 3 to implement interfaces within a particular application context can have hidden complexities. While Version 3 has been designed to reduce the amount of required site-specific negotiation, it is not possible to simply pull the message specification(s) “out of the box” and install it. This tutorial guides the student through the analysis process, and addresses issues necessary for building robust interface solutions.

It covers:
• Documentation of message specifications
• Implementation considerations for data types
• Managing vocabulary from the implementation perspective
• Procedures to address refinement and localization of the standard
• Tips and strategies for successful implementation

This class also provides a lead-in for Version 3 Implementation, Part 2: Implementation Mechanics.

This Tutorial Will Benefit:
• Analysts and architects who need to map HL7 Version 3 messages to or between computer applications
• Project managers responsible for Version 3 implementation projects
• Anyone considering Version 3 early adoption

Upon Completion of This Tutorial, Students Will Know:
• How to develop and carry out a plan for creating Version 3 interfaces
• How to read and write Version 3 message specifications
• How to design tips and strategies

Prerequisites:
• A basic understanding of Version 3 is a requirement (such as the Introduction to Version 3 Tutorials). More advanced tutorials (XML ITS and Wrappers) are encouraged as well. Previous experience in Version 2 implementations will be of value.

Faculty:
Mead Walker, FHL7: Member, HL7 Architectural review Board; Health Data and Interoperability Inc.

W15 – Introduction to Clinical Document Architecture
Wednesday, May 18 / 9:00 am – 12:30 pm  
3 CME Credits
The Clinical Document Architecture (CDA™) is HL7’s specification for standards-based exchange of clinical documents. CDA is based on the concept of scalable, incremental interoperability and uses Extensible Markup Language (XML), the HL7 Reference Information Model (RIM), and controlled terminology for structure and semantics. This tutorial presents the business case for CDA, its primary design principles, and an overview of the technical specification. The session examines CDA projects in the United States, Europe and Asia/Pacific; the tools available for CDA creation, management and distribution; and current work on CDA implementation guides including the Continuity of Care Document (CCD), History and Physical and Healthcare-Associated Infection Reports.

This Tutorial Will Benefit:
• Healthcare providers and exchange network architects considering CDA implementation
• Product managers considering support for CDA
• Public health officials and those with structured information reporting requirements
• Implementers of all kinds beginning to work with CDA

Faculty:
Argentina; Chief Developer and Manager, Kern-IT SRL
Marc Koehn:
Chair, HL7 Argentina; Co-Chair, HL7 Education
Wednesday, May 18 / 9:00 am – 12:30 pm  
3 CME Credits
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It covers:
• Documentation of message specifications
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• Procedures to address refinement and localization of the standard
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This class also provides a lead-in for Version 3 Implementation, Part 2: Implementation Mechanics.

This Tutorial Will Benefit:
• Analysts and architects who need to map HL7 Version 3 messages to or between computer applications
• Project managers responsible for Version 3 implementation projects
• Anyone considering Version 3 early adoption

Upon Completion of This Tutorial, Students Will Know:
• How to develop and carry out a plan for creating Version 3 interfaces
• How to read and write Version 3 message specifications
• How to design tips and strategies

Prerequisites:
• A basic understanding of Version 3 is a requirement (such as the Introduction to Version 3 Tutorials). More advanced tutorials (XML ITS and Wrappers) are encouraged as well. Previous experience in Version 2 implementations will be of value.

Faculty:
Mead Walker, FHL7: Member, HL7 Architectural review Board; Health Data and Interoperability Inc.

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This Tutorial Will Benefit:
• Healthcare providers and exchange network architects considering CDA implementation
• Product managers considering support for CDA
• Public health officials and those with structured information reporting requirements
• Implementers of all kinds beginning to work with CDA

Faculty:
Diego Kaminker: Chair, HL7 Argentina; Co-Chair, HL7 Education Work Group; Co-Author and Coordinator, HL7 e-Learning Course, Argentina; Chief Developer and Manager, Kern-IT SRL
W16 – Clinical Document Architecture Advanced
Wednesday, May 18 / 1:45 pm – 5:00 pm 3 CME Credits

CDA implementation requires understanding the CDA refinement of the RIM (the CDA RMIM), the Version 3 data types and how these combine with controlled vocabularies to form “clinical statements.” This tutorial reviews the principles of semantic interoperability with CDA and how these are reflected in the CDA model and implemented in the CDA schema. It reviews the CDA RMIM, schema and data types. In addition, the tutorial gives a detailed walkthrough of samples of CDA documents, coded using clinical statements.

This Tutorial Will Benefit:
• Those needing to learn more about CDA, Release 2—its derivation from the RIM and issues relevant to implementing CDA 2.0 solutions
• Implementers needing to work with CDA, and wanting a review of the details

Upon Completion of This Tutorial, Students Will Know:
• Have an overview of CDA's components
• Have insight into the XML markup required to implement solutions
• Have a better understanding of the issues surrounding semantic interoperability using CDA

Prerequisites:
• Completion of the Clinical Document Architecture Introductory tutorial recommended, but not required
• Basic knowledge of the Version 3 standards (as can be obtained from the Introduction to Version 3 tutorial series)

Faculty:
Robert Dolin, MD, FHL7 (Lead Speaker): Chair, HL7 Board of Directors; Co-Chair, HL7 Structured Documents Work Group; President and Chief Medical Officer, Lantana Consulting Group
Calvin E. Beebe (Co-Speaker): Co-Chair, Structure & Semantic Design Steering Division—HL7 Technical Steering Committee; Co-Chair, HL7 Structured Documents Work Group; Co-Editor, CDA; Technical Specialist, Information Services, Mayo Clinic

TH19 – CDA Specialist Certification Exam Review
Thursday, May 19 / 9:00 am – 12:30 pm 3 CME Credits

Upon Completion of This Tutorial:
• Students will be better prepared to take the CDA Specialist Certification Exam

This Tutorial Will Benefit:
• Anyone preparing for the CDA Specialist Certification Exam
• System analysts or clinical application developers wanting in-depth understanding of the CDA Release 2 standard

Prerequisites:
• Participants are encouraged to carefully read the CDA Release 2 standard
• Introduction to Version 3 (Part 1) as well as the CDA Introductory and Advanced tutorials are strongly recommended

Faculty:
Calvin E. Beebe: Co-Chair, Structure & Semantic Design Steering Division—HL7 Technical Steering Committee; Co-Chair, HL7 Structured Documents Work Group, Co-Editor, CDA; Technical Specialist, Information Services, Mayo Clinic - Rochester, MN

W17 – Version 3 Data Types Release 2
Wednesday, May 18 / 1:45 pm – 5:00 pm 3 CME Credits

This tutorial provides an in-depth look at Release 2 (R2) of the Version 3 data types. It covers both the abstract data types and the implementation (ISO 21090).

This Tutorial Will Benefit:
• Anyone who works with the Version 3 data types: Specification designers, analysts, and programmers. Most of the content will apply to the Release 1 (R1) data types as well. The data types have been called “a graduate level course in health informatics” – so anyone working in health informatics may find this useful

Upon Completion of This Tutorial, Students Will Know:
• The general scope and architecture of the Version 3 data types
• What is different between R1 and R2 data types
• How to use the ‘difficult’ data types – CD, ED, PQ, and IVL
• How to avoid the most common implementation mistakes

Prerequisites:
• Anyone who works with CDA, Release 1 – ‘difficult’ data types
• How to implement Release 1

Faculty:
Keith W. Boone: Director, HL7 Board of Directors; Past Co-Chair, HL7 Structured Documents Work Group, Interoperability Architect, GE Healthcare

TH 20 – Continuity of Care Document
Thursday, May 19 / 9:00 am – 12:30 pm 3 CME Credits

This tutorial will cover the HL7 Continuity of Care Document (CCD™) and the Level 3 entries, and related CDA specifications, including the ANSI/HITSP Consumer Empowerment Registration and Medication Summary, IHE Profiles making use of the CCD, and other HL7 specifications making use of CCD constructs (e.g., Health Story).

This Tutorial Will Benefit:
• Implementers of the CCD specification or related specifications will benefit by understanding how to read the CCD specification and related specifications

Upon Completion of This Tutorial, Students Will Know:
• How to implement the CCD

Prerequisites:
• CDA Introduction and Advanced

Faculty:
Keith W. Boone: Director, HL7 Board of Directors; Past Co-Chair, HL7 Structured Documents Work Group, Interoperability Architect, GE Healthcare
This tutorial will provide a step-by-step understanding of the tools that work group contributors and facilitators use to develop and submit content for HL7 Version 3 ballots. It will also cover tooling that work groups and implementers can use to better document their specifications, including the ability to develop documentation targeted at different user groups. This will be a “hands-on” session with participants following along by running the tools on their own laptop computers. Instructions on downloading and installing the necessary tools will be provided to students in advance of the tutorial. www.hl7.org/library/datamodel/V3Tooling/toolsIndex.htm

This Tutorial Will Benefit:
• Individuals who are supporting HL7 work groups, related project teams, and others involved in the documentation of messaging standards, and the creation and documentation of message designs

Scope:
The intent is to provide an overview of the tooling that supports ballot tooling from “end-to-end” including:
• Tooling architecture, including the place and potential uses of the HL7 Model Interchange Format (MIF)
• HL7 repositories—overview of contents and organization (brief)
• RoseTree—Use as a RIM and Vocabulary Browser (brief)
• Publication database—including WYSIWYG editing with XML Spy
• RMIM Design Tool in Visio—including design steps, use of shadows, textual documentation, validation, saving designs
• Publication Database—documenting and describing the dynamic aspects of messaging
• HL7 Version 3 Generator—taking the artifacts produced by previous components to generate MIF, XML Schema, and human readable documents
• Publishing Desktop—the production of the ballot and normative editions is created from MIF and other formats (brief)
• Emerging Tools—a short look at tools in active development (brief)

Prerequisites:
• This tutorial assumes a detailed familiarity with Version 3 terminology. At a minimum, the prospective student should have taken or have previous knowledge of the material addressed in the Introduction to Version 3 tutorials. Other courses on the Version 3 track, especially the Version 3 Implementation, Part 1 class, are suggested as well. The tutorial will not cover Version 3 terminology, the RIM, representation of concepts in an RMIM, cloning, application roles, etc. It is presumed that the participants are conversant with these topics and simply need to know how to capture the artifacts with the tools

Faculty:
Lloyd McKenzie, P.Eng (Lead Speaker): Co-Chair, HL7 Modeling and Methodology Work Group; Co-Chair, Tooling Work Group; Modeling and Methodology Facilitator-at-Large; Principal Consultant, LM&A Consulting Ltd.
George (Woody) Beeler, PhD, FHL7 (Co-Speaker): Co-Chair, Foundation & Technology Steering Division-HL7 Technical Steering Committee; Co-Chair, HL7 Publishing – Version 3 Work Group; Co-Chair, HL7 Modeling and Methodology Work Group; Principal, Beeler Consulting, LLC
Andy Stechishin (Co-Speaker): Co-Chair, HL7 Implementable Technology Specifications Work Group; Co-Chair, HL7 Publishing Work Group; Co-Chair, HL7 Tooling Work Group; Healthcare Informatics Consultant, Gordon Point Informatics Ltd.

TH26 – HL7 CDA Specialist Certification Exam
Thursday, May 19 / 5:30 pm – 7:30 pm
Health Level Seven International is pleased to offer certification testing on HL7 CDA Release 2.0.
Certification testing is offered to those participants who want to demonstrate that they have a working knowledge of the CDA Release 2.0 standard. Healthcare systems analysts, medical software programmers, and medical informatics faculty and students are all potential candidates.
The knowledge required to pass the exam can be obtained by attending HL7 education sessions, by field work dealing with HL7 CDA based applications, or simply by self-study of the HL7 CDA Release 2.0 standard. Please refer to the Study Guide on the HL7 Training and Certification page of the HL7 website for details on the content covered by the test.

Note: Simply taking the courses offered at this meeting will most likely not be sufficient to pass the test. We strongly recommend a combination of the aforementioned to fully prepare yourself for the exam.

TH27 – HL7 Version 3 RIM Certification Exam
Thursday, May 19 / 5:30 pm – 7:30 pm
Health Level Seven International is pleased to offer certification testing on the HL7 Version 3 Reference Information Model (RIM) 2.11 (the version of the RIM on Version 3 Normative Edition 2006). Note that the RIM is the foundational base of all Version 3 artifacts. Certification testing is offered to those industry participants who are expected to have a working knowledge of the HL7 Version 3 RIM or its derived artifacts. Interface analysts, healthcare systems analysts, medical software programmers, and medical informatics faculty and students are all potential candidates.
The knowledge required to pass the exam can be obtained by self study of the RIM and its associated normative structural vocabulary as well as through participation in the HL7 working group meetings, HL7 education sessions, and field work implementing HL7 Version 3 artifacts. Please refer to the Study Guide on the HL7 Training and Certification page of the HL7 website for details on the content covered by the test.

Note: Simply taking the courses offered at this meeting will most likely not be sufficient to pass the test. We strongly recommend a combination of the aforementioned to fully prepare yourself for the exam.

M3 – Introduction to Vocabulary in HL7
Monday, May 16 / 9:00 am – 12:30 pm
Brief topics include an overview of terminologies and value sets, concept representation in information models and messages, some commonly used vocabularies in healthcare, and Common Terminology Services. Some of these topics are dealt with more deeply and completely in the Advanced Vocabulary tutorial.

This Tutorial Will Benefit:
• Those seeking an overview to terminology in models and messaging, with specific examples in LOINC and SNOMED, and how they are applied in HL7

Upon Completion of This Tutorial, Students Will Know:
• Vocabulary basics – why you need to know about terminology
• Detailed overview of HL7 vocabulary fundamentals

Note:
Thursday, May 19 / 1:45 pm – 5:00 pm
3 CME Credits

This tutorial will benefit:
• Those seeking an overview to terminology in models and messaging, with specific examples in LOINC and SNOMED, and how they are applied in HL7

Upon Completion of This Tutorial, Students Will Know:
• Vocabulary basics – why you need to know about terminology
• Detailed overview of HL7 vocabulary fundamentals

Note:
• Tooling overview including: IHTSDO Workbench, RoseTree, and other browsers
• An introduction to Common Terminology Services
• Vocabulary implementation, maintenance and conformance challenges and considerations

Faculty:
Beverly Knight: Co-Chair, HL7 Vocabulary Work Group; Terminology Services Manager, Canada Health Infoway

M6 – Advanced Application of Vocabulary in HL7
Monday, May 16 / 1:45 pm – 5:00 pm  3 CME Credits

This Tutorial Will Cover The Following Topics:
• The need for using standard coded terminologies in HL7
• The Vocabulary Work Group, its current role and mission within HL7, and its current activities
• A brief summary of Version 2.x terminology strategy
• An overview of the Version 3 terminology strategy with a focus on coded data types
• How coded terminologies are represented in Version 3 models and messages and bound to them
• The HL7 vocabulary model and the use of these objects in Version 3 structures
• Maintenance of the HL7 vocabulary
• A brief summary of the purpose of the Common Terminology Services specification

This Tutorial Will Benefit:
• Individuals wanting to participate in the work of the Vocabulary Work Group, and those planning to implement HL7 messages

Upon Completion of This Tutorial, Students Will Know:
• The history of the Vocabulary Work Group
• How to access and manipulate terminology in HL7 Version 2.x (tables)
• How coded data is represented in Version 3 messages
• How to understand and use value sets and concept domains
• How to register a terminology for use in HL7 messages
• The functions and capabilities of Common Terminology Services
• Who to ask if they have questions

Prerequisites:
• Introduction to Vocabulary

Faculty:
Ted Klein, MS, FHL7: Co-Chair, HL7 Vocabulary Work Group; Klein Consulting, Inc

T11 – Pharmacy Building Blocks for Modeling Messages
Tuesday, May 17 / 1:45 pm – 5:00 pm  3 CME Credits

Pharmacy as a domain stretches from prescribing and administering medication to patients working with medicine data to enable medicines management and decision support.

The Pharmacy Work Group has built up a store of modeling patterns for all of these. This tutorial will give a detailed introduction to these patterns and show how they can be used to work with real world applications, including those based on CDA.

The Tutorial Will Cover the Following Major Areas:
• Scope of pharmacy domain and the basic use cases to be addressed
• Main building blocks of pharmacy models – how we deal with some of the special issues like timing and dosage
• A walkthrough of the Pharmacy DMIM to get the big picture
• Architectures and dynamic behaviour – looking at patterns from Canada, the Netherlands and the UK and how these apply much more widely
• Ballot topics
• Implementation through classical messaging or CDA

The tutorial focuses on Version 3 and will not cover Version 2.

This Tutorial Will Benefit:
• Analysts, architects, and/or developers interested working with medicines

Upon Completion of This Tutorial, Students Will Know:
• How underlying business architectures have required different messaging patterns
• How the activities of prescribing, dispensing and administration of medicines should be represented
• The role of the Common Product Model in correct representation of medicines
• How the details of dose quantity and timing should be represented
**Prerequisites:**

- Students should understand the basics of HL7 modeling but a detailed knowledge of the classes and terminology related to pharmacy is NOT expected

**Tools Needed:**

- A laptop is not essential though some of the models are large and it is frequently easier to explore them on a laptop either through ballot content or the HL7 modeling tools. This is not a tooling tutorial and there will not be time to help solve tooling issues during the class

**Faculty:**
*Hugh Glover*: HL7 Facilitator, Modeling and Methodology and Pharmacy Work Groups; Partner, Blue Wave Informatics LLP

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**T12 – Standards for Interoperability**

**Tuesday, May 17 / 1:45 pm – 5:00 pm**

3 CME Credits

This tutorial provides a survey of the healthcare interoperability standards landscape, pointing out the main features of the terrain and how they link together to perform useful functions. The tutorial has three main parts covering (1) messaging standards such as HL7 Version 2 and Version 3, (2) clinical document standards such as CDA, CCD, CCR and IHE XDS, and (3) terminology standards, such as SNOMED CT and LOINC. It explains how and why these were developed and their complementary roles, each best suited to particular tasks.

In the time available, the treatment of each standard is necessarily brief, but this tutorial will provide an introduction to other more detailed tutorials.

**This Tutorial Will Benefit:**

- Relative newcomers to health interoperability, who are still unsure about how everything fits together

**Upon Completion of This Tutorial, Students Will Know:**

- How the main healthcare interoperability standards relate to each other and which is most suited for particular roles

**Faculty:**
*Tim Benson*: Abies Ltd. *(Author: Principles of health interoperability HL7 and SNOMED, Springer, 2010)*

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**W18 – Clinical Decision Support: HL7 Standards and Practical Applications**

**Wednesday, May 18 / 1:45 pm – 5:00 pm**

3 CME Credits

This tutorial will address the general theme of clinical decision support (CDS) in two parts. First, the presenters will provide introductory material regarding CDS that will enable those unfamiliar with its use to understand the scientific evidence supporting its use, the technical details regarding implementation and a process for deploying it to meet quality, clinical and administrative goals. Second, the presenters will review the details of the entire portfolio of HL7 CDS standards, ranging from accepted ANSI standards, draft standards for trial use and work in progress. These will include Arden Syntax, GELLO, Infobutton, Decision Support Services (DSS), Healthcare Quality Measure Format, Order Set, and Virtual Medical Record (vMR).

**This Tutorial Will Benefit:**

- Electronic health record system developers, implementers, administrators and users who desire an introduction to the context and use of clinical decision support
- Implementers who desire to learn the details of accepted and nascent HL7 standards for clinical decision support
- HL7 members who want to learn about how clinical decision support standards relate to other HL7 standards

**Upon Completion of This Tutorial, Students Will Know:**

- The context of clinical decision support, scientific literature supporting its use, system details needed to provide it, and a process for employing it in practical situations
- Details of HL7 clinical decision support standards, draft standards and work in progress, including the Arden Syntax, GELLO, Infobutton, Decision Support Services (DSS), Healthcare Quality Measure Format, Order Set, and Virtual Medical Record (vMR)

**Faculty:**
*Robert A. Jenders, MD, MS, FACP, FACMI (Speaker):* Co-Chair, HL7 Clinical Decision Support and Arden Syntax Work Groups; Staff Scientist, National Library of Medicine, US National Institutes of Health; Professor of Medicine, Georgetown University

*Guilherme Del Fiol, MD, PhD (Co-Speaker):* Co-Chair, HL7 Clinical Decision Support Work Group; Assistant Professor, Department of Community and Family Medicine, Duke University

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**TH21 – HL7 Standards for Meaningful Use**

**Thursday, May 19 / 9:00 am – 12:30 pm**

3 CME Credits

Under the 2009 US American Recovery & Reinvestment Act (ARRA) regulation, the Health Information Technology for Economic and Clinical Health (HITECH) section legislated that eligible healthcare professionals and hospitals can qualify for Medicare and Medicaid incentive payments when they adopt certified EHR Technology and use it to achieve specified objectives. One of the two regulations announced defines the “Meaningful Use” objectives that providers must meet to qualify for the bonus payments, and the other regulation identifies the technical capabilities required for certified EHR Technology.

**The key components of the Meaningful Use objectives are:**

- **Tracking key patient-level clinical information** in order to give healthcare providers clear visibility into the health status of their patient populations
- **Applying clinical decision support** designed by healthcare providers to help improve adherence to evidence-based best practices
- **Executing electronic health care transactions** (prescriptions, receipt of drug formulary information, eligibility checking, lab results, basic patient summary data exchange) with key stakeholders
- **Reporting a focused set of meaningful care outcomes and evidence-based process metrics** (for example, the percentage of patients with hypertension whose blood pressure is under control), which will be required by virtually any conceivable new value-based payment regimes.

Evidence of Meaningful Use provides financial incentives to “Eligible Providers” and “Eligible Hospitals” over a five year period: 2011 to 2015. For example, maximum EHR implementation reimbursement available to an individual provider under Medicare is $44,000. Additional clarifications (including exceptions) will be explained during the tutorial.
The HL7 Standards that are specified in the Meaningful Use legislation are:
• HL7 Version 2 (specific versions will be detailed in the tutorial)
• HL7 CDA and CCD
• Certified EHR (certification criteria based upon the HL7 EHR System Functional Model)
• HL7 Quality Measure & Quality Reporting standards

This Tutorial Will Benefit:
• Providers and hospitals in the US who are eligible to receive the financial incentives under the legislation
• Countries that are considering the introduction of national incentives to encourage EHR adoption

Upon Completion of This Tutorial, Students Will Know:
• What is “Meaningful Use”, who has defined it, and what does it mean
• How is it relevant and related to HL7
• Which HL7 standards are mentioned in the “Meaningful Use” regulations

Prerequisites:
• Standards for Interoperability tutorial

Faculty:
Gora Datta: Corporate Member, HL7; Group Chairman & CEO, CAL2CAL Corporation

TH24 – Personal Health Record (PHR)
Thursday, May 19 / 1:45 pm – 5:00 pm  3 CME Credits

This informative tutorial and review provides an in-depth look at the Personal Health Record System Functional Model (PHR-S FM), the difference between the EHR and the PHR, the relationship between the PHR-S FM and the EHR-S FM, and PHR initiatives around the world.

This Tutorial Will Benefit:
• Those seeking information on the functionality and standardization of personal health records
• Those wishing to implement or evaluate PHR systems, or those who have an interest in understanding how PHR-S functionality relates to broader industry discussions related to personal health records, including consumer empowerment

Upon Completion of This Tutorial, Students Will Know:
• Background and status of the PHR-S Functional Model as an impending ANSI standard
• The structure and content of functional requirements for PHR systems, as shown by the model
• The differences between the PHR-S FM and the EHR-S FM
• Options to use the functional model for conformance and care setting profiles
• Background and status on HL7 and industry projects supporting PHR standards
• How the PHR-S FM supports broader industry concepts related to the personal health records, such as consumer empowerment

Note: This tutorial focuses on functionality, not interoperability. While interoperability is a component of functionality, this tutorial is primarily focused on core functionality, not systems integration. The PHR-S FM is a functional standard, not a records/data standard.

Faculty:
Gora Datta: Corporate Member, HL7; Group Chairman & CEO, CAL2CAL Corporation
## Tutorials at a Glance

### Track 1 — Version 2 Core

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<th>Topic</th>
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### Track 3 — HL7 Special Topics

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### Track 4 — Information Forums — FREE TUTORIALS

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Q1 = 9:00 – 10:30 am; Q2 = 11:00 – 12:30 pm; Q3 = 1:45 – 3:00 pm; Q4 = 3:30 – 5:00 pm

DISCLAIMER: Meeting times are subject to change.
<table>
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<tr>
<th>Meetings at a Glance</th>
<th>Meetings Only—No Joint Sessions Listed</th>
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**Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
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**International Mentoring Committee**

**Marketing Council**

**Modeling & Methodology**

**Networking Reception**

**Nurses Meeting**

**Open Space Meetings (Self Organized)**

**Orders & Observations**

**Organization and Process Orientation/Introduction**

**Organizational Relations Committee**

**Patient Administration**

**Patient Care**

**Patient Safety**

**Pharmacy**

**Policy Advisory Committee**

**Process Improvement Committee**

**Project Services**

**Public Health Emergency Response**

**Publishing**

**Regulated Clinical Research**

**Information Management**

**RIM Based Application Architecture**

**SAIF Architecture Program Update**

**Security**

**Services Oriented Architecture**

**Steering Divisions:**

- **Domain Experts**
- **Foundation & Technology**
- **Structure & Semantic Design**
- **Technical & Support Services**

**Structured Documents**

**TSC Meetings** (Note: There is also a meeting scheduled for Saturday, 5/14, 9:00-5:00 pm)

**Templates**

**Tooling**

**Vocabulary**

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Q1 = 9:00 – 10:30 am; Q2 = 11:00 – 12:30 pm; Q3 = 1:45 – 3:00 pm; Q4 = 3:30 – 5:00 pm  
**DISCLAIMER:** Meeting times are subject to change.
## REGISTRATION & TUTORIAL HANDBOOK HOURS
- **Sunday**: 8:30 am – 5:00 pm  
  Registration
- **Monday – Tuesday**: 7:00 am – 5:00 pm  
  Registration
- **Wednesday – Thursday**: 7:30 am – 5:00 pm  
  Registration
- **Friday**: 8:00 am – 1:00 pm  
  Staff on Hand for Assistance

## MEALS AND BREAKS
- **Monday – Thursday**: 7:00 – 8:00 am  
  Continental Breakfast
- **Friday**: 8:00 – 9:00 am  
  Continental Breakfast
- **Monday – Friday**: 10:30 – 11:00 am  
  Morning Break
- **Monday – Friday**: 12:30 – 1:30 pm  
  Lunch
- **Monday – Friday**: 3:00 – 3:30 pm  
  Afternoon Break

## AFFILIATE DUE DILIGENCE COMMITTEE
- **Tuesday**: 1:45 – 3:00 pm  
  MEETING

## AMBASSADOR BRIEFING
- **Tuesday**: 5:15 – 5:45 pm  
  Services Oriented Architecture

## ANATOMIC PATHOLOGY (AP)
- **Monday**: 9:00 – 5:00 pm  
  MEETING
- **Tuesday**: 9:00 – 10:30 am  
  MEETING
- **Tuesday**: 11:00 – 12:30 pm  
  Hosting: II
- **Tuesday**: 1:45 – 5:00 pm  
  MEETING

## ANESTHESIOLOGY (GAS)
- **Monday**: 1:45 – 5:00 pm  
  MEETING
- **Tuesday**: 9:00 – 5:00 pm  
  MEETING
- **Wednesday**: 9:00 – 12:30 pm  
  MEETING

## ARCHITECTURAL REVIEW BOARD (ArB)
- **Sunday**: 9:00 – 3:00 pm  
  MEETING
- **Monday**: 3:30 – 5:00 pm  
  Joint w/EHR
- **Tuesday**: 3:30 – 5:00 pm  
  MEETING
- **Wednesday**: 9:00 – 10:30 am  
  Joint w/SA
- **Tuesday**: 1:45 – 3:00 pm  
  Joint w/PC, SOA
- **Thursday**: 1:45 – 5:00 pm  
  MEETING

## ARDEN SYNTAX (AS)
- **Tuesday**: 9:00 – 5:00 pm  
  MEETING

## ATTACHMENTS
- **Monday – Thursday**: 9:00 – 5:00 pm  
  MEETING

## BOARD OF DIRECTORS’ MEETING
- **Tuesday**: 3:30 – 9:00 pm  
  MEETING

## BUSINESS MODEL TASK FORCE MEETING
- **Tuesday**: 9:00 – 10:30 am  
  MEETING

## CHILD HEALTH (CH)
- **Monday**: 9:00 – 5:00 pm  
  MEETING
- **Tuesday**: 9:00 – 12:30 pm  
  MEETING

## CLINICAL CONTEXT OBJECT WORKGROUP (CCOW)
- **Wednesday**: 9:00 – 12:30 pm  
  MEETING
- **1:45 – 3:00 pm**  
  Joint w/Sec
- **3:00 – 5:00 pm**  
  MEETING

## CLINICAL DECISION SUPPORT (CDS)
- **Tuesday**: 3:30 pm – 5:00 pm  
  MEETING
- **Wednesday**: 9:00 – 10:30 am  
  Joint w/SP, Pharm
- **11:00 – 5:00 pm**  
  MEETING
- **Thursday**: 9:00 – 10:30 am  
  MEETING
- **11:00 – 12:30 pm**  
  Joint w/DOE
- **1:45 – 3:00 pm**  
  Hosting: Clin Gen
- **3:30 – 5:00 pm**  
  MEETING

## CLINICAL GENOMICS (CLIN GEN)
- **Tuesday**: 3:30 – 5:00 pm  
  MEETING
- **Wednesday**: 9:00 – 5:00 pm  
  MEETING
- **Thursday**: 9:00 – 10:30 am  
  Joint w/O&O
  - 11:00 – 12:30 pm  
  Joint w/RCRIM
  - 1:45 – 3:00 pm  
  Joint w/CDS
  - 3:30 – 5:00 pm  
  MEETING

## CLINICAL INTEROPERABILITY COUNCIL (CIC)
- **Tuesday**: 9:00 – 10:30 am  
  Hosting: EHR, Dev
- **1:45 – 5:00 pm**  
  MEETING
- **Wednesday**: 9:00 – 10:30 am  
  Joint w/PC, CBCC, PHER
- **3:30 – 5:00 pm**  
  MEETING
- **Thursday**: 9:00 – 5:00 pm  
  MEETING

## CLINICAL STATEMENT
- **Thursday**: 1:45 – 3:00 pm  
  Hosting: O&O
  - 3:30 – 5:00 pm  
  Joint w/SD

## CO-CHAIR INFORMATION
- **Monday**: 5:15 – 7:00 pm  
  Co-Chairs Dinner/Meeting
  (Open Meeting, however open for dinner ONLY to Co-Chairs. Co-Chairs MUST register if you wish to attend the dinner/meeting)
- **Monday – Tuesday**: 12:30 – 1:30 pm  
  Lunch tables reserved for Co-Chairs
- **Thursday**: 7:00 – 7:45 am  
  Newly Elected Co-Chair Training

## COMMUNITY BASED COLLABORATIVE CARE (CBCC)
- **Monday**: 1:45 – 5:00 pm  
  Hosting: Sec
- **Tuesday**: 1:45 – 5:00 pm  
  MEETING
- **Wednesday**: 9:00 – 10:30 am  
  Joint w/PC, CIC, PHER
  - 1:45 – 5:00 pm  
  MEETING

## EDUCATION
- **Monday**: 1:45 – 3:00 pm  
  Hosting: Marketing
- **3:30 – 5:00 pm**  
  MEETING
- **Tuesday**: 9:00 – 10:30 am  
  Joint w/PC, CIC, PHER
  - 1:45 – 5:00 pm  
  MEETING

## ELECTRONIC HEALTH RECORDS (EHR)
- **Monday**: 9:00 – 10:30 am  
  MEETING
  - 11:00 – 3:00 pm  
  Hosting: EC
  - 3:30 – 5:00 pm  
  Hosting: ArB
- **Tuesday**: 9:00 – 10:30 am  
  Joint w/CIC, Dev
  - 11:00 – 12:30 pm  
  Hosting: EC
  - 1:45 – 3:00 pm  
  Hosting: SOA, GP, PHER
  - 3:30 – 5:00 pm  
  Hosting: EC
- **Wednesday**: 9:00 – 10:30 am  
  MEETING
  - 11:00 – 5:00 pm  
  Hosting: EC
- **Thursday**: 9:00 – 12:30 pm  
  MEETING

## ELECTRONIC SERVICES
- **Wednesday**: 9:00 – 12:30 pm  
  MEETING
EMERGENCY CARE (EC)
Monday  9:00 – 10:30 am  MEETING
11:00 – 3:00 pm  Joint w/EHR
Tuesday  9:00 – 10:30 am  MEETING
11:00 – 12:30 pm  Joint w/EHR
1:45 – 3:00 pm  Joint w/EHR
Wednesday  9:00 – 10:30 am  MEETING
11:00 – 5:00 pm  Joint w/EHR
Thursday  1:45 – 3:00 pm  MEETING
FACILITATORS’ ROUNDTABLE
Wednesday  12:30 – 1:30 pm  Project Facilitators’ Roundtable

FINANCIAL MANAGEMENT (FM)
Monday  1:45 – 5:00 pm  MEETING
Tuesday – Wednesday  9:00 – 5:00 pm  MEETING
Thursday  9:00 – 12:30 pm  MEETING

FIRST-TIME ATTENDEES’ MEETINGS
Sunday  4:00 – 5:00 pm  ORIENTATION MEETING
Monday – Tuesday  6:00 – 8:00 pm  ORIENTATION MEETING
12:30 – 1:30 pm  Lunch Tables Reserved for Q & A
Tuesday  12:30 – 1:30 pm  Lunch Tables Reserved for Q & A

GOVERNANCE AND OPERATIONS COMMITTEE (GOC)
Tuesday  11:00 – 12:30 pm  MEETING

GOVERNMENT PROJECTS (GP)
Tuesday  1:45 – 3:00 pm  Joint w/EHR, SOA, PHER
3:30 – 5:00 pm  MEETING

GS1 EDUCATION SESSION
Wednesday  7:00 – 7:45 am  “GS1 System Landscape” - GS1 and OIDs: the example of location ID and partner ID

HL7 ACTIVITIES WITH OTHER SDOs
Sunday  3:30 – 5:00 pm  MEETING

HL7 INNOVATIONS WORKSHOP
Monday  9:00 – 12:30 pm  WORKSHOP

HEALTH CARE DEVICES (Dev)
Monday  9:00 – 5:00 pm  MEETING
Tuesday  9:00 – 10:30 am  Joint w/CIC, EHR
11:00 – 5:00 pm  MEETING
Wednesday – Thursday  9:00 – 5:00 pm  MEETING
Friday  9:00 – 3:00 pm  MEETING

IMAGING INTEGRATION (II)
Tuesday  9:00 – 10:30 am  MEETING
11:00 – 12:30 pm  Joint w/AC
1:45 – 5:00 pm  MEETING
Wednesday  9:00 – 10:30 am  Joint w/O&O

IMPLEMENTABLE TECHNOLOGY SPECIFICATION (ITS)
Monday  9:00 – 5:00 pm  MEETING
Tuesday  9:00 – 10:30 am  MEETING
1:45 – 5:00 pm  MEETING
Wednesday  9:00 – 3:00 pm  MEETING
Thursday  9:00 – 12:30 pm  MEETING

IMPLEMENTATION/CONFORMANCE (IC)
Monday  9:00 – 12:30 pm  MEETING
1:45 – 3:00 pm  Hosting: SD
3:30 – 5:00 pm  MEETING
Tuesday  9:00 – 10:30 am  MEETING
1:45 – 3:00 pm  MEETING
Wednesday  9:00 – 10:30 am  MEETING
11:00 – 12:30 pm  Hosting: Tooling, RIMBA

INFRASTRUCTURE & MESSAGING (InM)
Tuesday  9:00 – 12:30 pm  MEETING

INTERNATIONAL COUNCIL MEETING
Sunday  9:00 – 3:00 pm  MEETING
12:30 – 1:30 pm  LUNCH
Thursday  12:30 – 5:00 pm  Affiliate Chair or their Designated Rep
Luncheon/Meeting

INTERNATIONAL MENTORING COMMITTEE (IMC)
Thursday  9:00 – 12:30 pm  MEETING

MARKETING COUNCIL
Monday  1:45 – 3:00 pm  Joint w/Education
3:30 – 5:00 pm  MEETING
Tuesday  1:45 – 3:00 pm  MEETING

MODELING & METHODOLOGY (MnM)
Sunday  1:45 – 3:00 pm  MEETING
Monday  9:00 – 3:00 pm  MEETING
3:30 – 5:00 pm  Joint w/SD
Tuesday  9:00 – 5:00 pm  MEETING
Wednesday  9:00 – 10:30 am  Hosting: Voc
1:45 – 3:00 pm  MEETING
Thursday  5:30 – 7:30 pm  FACILITATORS ROUNDTABLE
Friday  9:00 – 12:30 pm  MEETING

NETWORKING RECEPTION
Wednesday  5:15 – 7:00 pm  RECEPTION

NURSES MEETING
Tuesday  7:00 – 8:00 am  MEETING

‘OPEN SPACE’ MEETINGS
Monday – Tuesday  6:00 – 8:00 pm  Open Forums – Self-organized –
Sign up sheet will be on bulletin board

ORDERS & OBSERVATIONS (O&O)
Monday  9:00 – 5:00 pm  MEETING
Tuesday  9:00 – 10:30 am  Hosting: Pharm
11:00 – 12:30 pm  Hosting: Pharm, PS, RCRIM, PHER
1:45 – 5:00 pm  MEETING
Wednesday  9:00 – 10:30 am  Hosting: II
11:00 – 5:00 pm  MEETING
Thursday  9:00 – 10:30 am  Hosting: Clin Gen
11:00 – 12:30 pm  Hosting: CDS
1:45 – 3:00 pm  Joint w/CIS
1:45 – 3:00 pm  MEETING
Friday  9:00 – 12:30 pm  MEETING

ORGANIZATION AND PROCESS ORIENTATION/INTRODUCTION
Sunday  5:00 – 6:00 pm  ORIENTATION/INTRODUCTION
Tuesday  7:00 – 8:00 am  ORIENTATION/INTRODUCTION

ORGANIZATIONAL RELATIONS COMMITTEE (ORC)
Monday  9:00 – 10:30 am  MEETING

PATIENT ADMINISTRATION (PA)
Monday  9:00 – 10:30 am  MEETING
1:45 – 5:00 pm  MEETING
Tuesday  9:00 – 10:30 am  Joint w/PC
11:00 – 5:00 pm  MEETING
Wednesday  9:00 – 5:00 pm  MEETING
Thursday  9:00 – 12:30 pm  Joint w/SOA
1:45 – 5:00 pm  MEETING

PATIENT CARE (PC)
Monday  9:00 – 12:30 pm  MEETING
Tuesday  9:00 – 10:30 am  Hosting: PA
11:00 – 3:00 pm  MEETING
3:30 – 5:00 pm  Hosting: CDS, Pharm
### MEETINGS

#### 5:00 – 9:00

#### 11:00

#### 2:00

#### 10:30

#### 3:30

#### 12:30

#### 11:00

#### 7:00

#### 1:45

#### 9:00

#### 9:00 – 10:30 am

<table>
<thead>
<tr>
<th>Day</th>
<th>Time</th>
<th>Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>9:00 – 10:30 am</td>
<td>Hosting: CBCC, CIC, PHER</td>
</tr>
<tr>
<td>Thursday</td>
<td>9:00 – 10:30 am</td>
<td>MEETING</td>
</tr>
<tr>
<td>Friday</td>
<td>9:00 – 12:30 pm</td>
<td>Hosting: Templates, SD</td>
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### PHARMACY (PHARM)

<table>
<thead>
<tr>
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<tbody>
<tr>
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<td>MEETING</td>
</tr>
<tr>
<td>Tuesday</td>
<td>9:00 – 10:30 am</td>
<td>Joint w/O&amp;O, Pharm, PCRM, PCRM, PHER</td>
</tr>
<tr>
<td>Wednesday</td>
<td>9:00 – 12:30 pm</td>
<td>Joint w/O&amp;O, PCRM, PHER</td>
</tr>
<tr>
<td>Thursday</td>
<td>9:00 – 10:30 am</td>
<td>Joint w/O&amp;O, PCRM, PHER</td>
</tr>
<tr>
<td>Wednesday</td>
<td>9:00 – 5:00 pm</td>
<td>Joint w/O&amp;O, PCRM, PHER</td>
</tr>
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### PATIENT SAFETY (PS)

<table>
<thead>
<tr>
<th>Day</th>
<th>Time</th>
<th>Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
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<td>MEETING</td>
</tr>
<tr>
<td>Tuesday</td>
<td>9:00 – 10:30 am</td>
<td>Joint w/O&amp;O, Pharm, PCRM, RCRM, PHER</td>
</tr>
<tr>
<td>Wednesday</td>
<td>9:00 – 5:00 pm</td>
<td>Joint w/O&amp;O, PCRM, PHER</td>
</tr>
<tr>
<td>Thursday</td>
<td>9:00 – 10:30 am</td>
<td>Joint w/O&amp;O, PCRM, PHER</td>
</tr>
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### SECURITY (SEC)

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<thead>
<tr>
<th>Day</th>
<th>Time</th>
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<td>Joint w/CBCC</td>
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<tr>
<td>Tuesday</td>
<td>9:00 – 12:30 pm</td>
<td>MEETING</td>
</tr>
<tr>
<td>Wednesday</td>
<td>11:00 – 12:30 pm</td>
<td>Joint w/ArB</td>
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</table>

### SERVICES ORIENTED ARCHITECTURE (SOA)

<table>
<thead>
<tr>
<th>Day</th>
<th>Time</th>
<th>Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>1:45 – 5:00 pm</td>
<td>Joint w/CBCC</td>
</tr>
<tr>
<td>Tuesday</td>
<td>9:00 – 12:30 pm</td>
<td>Joint w/EHR, GP, PHER</td>
</tr>
<tr>
<td>Wednesday</td>
<td>9:00 – 10:30 am</td>
<td>Joint w/ArB</td>
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### STEERING DIVISIONS

<table>
<thead>
<tr>
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<th>Time</th>
<th>Meeting</th>
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</thead>
<tbody>
<tr>
<td>Monday</td>
<td>7:00 – 8:30 pm</td>
<td>Structure &amp; Semantic Design</td>
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### STRUCTURED DOCUMENTS (SD)

<table>
<thead>
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<th>Day</th>
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<tbody>
<tr>
<td>Monday</td>
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<td>Hosting: MnM</td>
</tr>
<tr>
<td>Tuesday</td>
<td>9:00 – 10:30 am</td>
<td>Hosting: Tooling, Publishing – V3</td>
</tr>
<tr>
<td>Wednesday</td>
<td>9:00 – 10:30 am</td>
<td>Hosting: CIC</td>
</tr>
<tr>
<td>Thursday</td>
<td>9:00 – 10:30 am</td>
<td>Joint w/PC, Templates</td>
</tr>
<tr>
<td>Friday</td>
<td>9:00 – 12:30 pm</td>
<td>Joint w/ArB</td>
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### TSC MEETINGS

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<tbody>
<tr>
<td>Saturday</td>
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### VACCINATIONS (VOC)

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<tbody>
<tr>
<td>Monday</td>
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<td>Joint w/CBCC</td>
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<tr>
<td>Tuesday</td>
<td>9:00 – 3:00 pm</td>
<td>Joint w/OC</td>
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<td>Wednesday</td>
<td>9:00 – 10:30 am</td>
<td>Joint w/MnM</td>
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### TOOLING

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<tr>
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<td>9:00 – 12:30 pm</td>
<td>Joint w/SD, Publishing – V3</td>
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<tr>
<td>Tuesday</td>
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<td>Joint w/IC, RIMBAA</td>
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<td>Friday</td>
<td>9:00 – 12:30 pm</td>
<td>Joint w/ArB</td>
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### VOCUS ARCHITECTURE PROGRAM UPDATE

<table>
<thead>
<tr>
<th>Day</th>
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<th>Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wednesday</td>
<td>3:30 – 5:00 pm</td>
<td>UPDATE</td>
</tr>
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Disclaimer: Meeting times are subject to change. Please attend the daily General Sessions for room changes, meeting changes, additions and deletion notification. Also check the bulletin boards near the HL7 Registration Desk for updates each day.
GENERAL INFORMATION

“EARLY BIRD” RATE DEADLINE
Advance meeting registration, including payment, is required by May 2, 2011 to receive the discounted rates. Otherwise the full fee structure will apply. Consult the registration form (pages 21-22) for a schedule of meeting fees.

TO REGISTER
Please complete the registration form on pages (21-22) and mail it (along with a check payable to Health Level Seven International in US funds ONLY) to:

Health Level Seven International
3300 Washtenaw Ave., Suite #227
Ann Arbor, MI 48104 USA

If paying by credit card, the registration may be faxed to: +1 (734) 677-6622.

Online registration is also available via our website (www.HL7.org). For your convenience, you can pay via a credit card directly from the site or print the registration form and mail it along with payment. Advance registrations MUST include payment. No balance dues will be accepted and registrations received without payment will not be processed until the time that payment is received. Registrations received with payment by the Early Bird deadline will receive the Early Bird discount. Registrations where payment is not received by then will require the full registration fee. Advance registrations will be accepted until May 9, 2011. After that time, registrations can only be made on-site. All on-site registrations require payment in full at the time of registration.

CANCELLATION POLICY
Prepaid registrants who cancel prior to the Early Bird deadline will receive a full refund minus a $50 processing fee. After that time, no refunds will be made.

TUTORIAL CANCELLATION
The tutorial schedule is subject to change. A tutorial may be cancelled if expected registration numbers are not met. If a tutorial is cancelled, pre-registrants will be notified via email. The registrant can select another tutorial at that time, or a full refund of the tutorial fee will be made. However, registration fees will not be refunded.

DRESS
The dress code will be casual for all HL7 functions. Layered clothing is advised, as room temperatures vary.

MEALS
Continental breakfasts, refreshment breaks and lunches are included in the meeting registration fee and will be provided for all registered attendees Monday through Friday.

Vegetarian and diabetic meals are available upon request. You must register for each day’s lunch on your registration form in order to receive lunch tickets.

GROUND TRANSPORTATION AND PARKING
The Hilton in the Walt Disney World® Resort is approximately 25 minutes or 15 miles from the Orlando International Airport.

Airport to Hotel: Mears Transportation
Mears transportation offers shuttles that are approximately $34 round trip for adults.

Taxi service is also available at approximately $50 one way.

Parking
The Hilton in the Walt Disney World® Resort offers secured self parking at $12 per day, and secured valet parking at $18 per day with in and out privileges.

HOTEL INFORMATION
HL7’s May Working Group Meeting will be held at:
The Hilton in the Walt Disney World® Resort
1751 Hotel Plaza Blvd.
Lake Buena Vista, Florida 32830
Phone: +1-407-827-4000
Reservation Phone: +1-800-782-4414
Fax: +1-407-827-6369

To reserve your room, the hotel has set up a special website registration process just for HL7 attendees. HL7 attendees should log on to http://www.hilton.com/en/hi/groups/personalized/O/ORLDWHH-HL7-20110513/index.jhtml?WT.mc_id=POG and simply follow the reservation instructions. The Group Name is “HL7 Working Group Meeting” and the Group Code is ‘HLG’.

Please note the group rate rooms are run of the house, which means the room type is based on the best available at check in, not prior to arrival. You will see the room type on the registration form, but it is only a request. Requests will be noted and based on availability.

Alternatively, you can call the hotel direct at +1-800-782-4414 for reservations. Be sure to mention Health Level Seven to receive the discounted room rate of $149 per night single and $169 for double occupancy, $189 for triple occupancy and $209 for quads. These rates will be offered 3 days prior and 3 days after the meeting dates, subject to availability of rooms at the time of reservation. Remember, space is limited, so reserve your room early. Discounted room rates are available only on reservations made before April 15, 2011. Room rates are subject to all applicable state and local taxes in effect at time of check in. High speed internet service is available in the rooms and is billed at a rate of $9.95 per day plus tax.

If you need to cancel your room reservation, please do so 72 hours (3 days) prior to your arrival date, and obtain a cancellation number. If you cancel within the three days, you will be charged one night reservation fee.

Those making a reservation under the government rate of $104 should log on to http://www.hilton.com/en/hi/groups/personalized/O/ORLDWHH-HLG-20110512/index.jhtml?WT.mc_id=POG and simply follow the reservation instructions. Alternatively, you can call the hotel direct at +1-800-782-4414 Group Name: HL7 Working Group Meeting, Group Code: HLG. You must show your ID to receive this rate once on site.

PLEASE BOOK YOUR ROOM AT THE HL7 MEETING HOTEL
HL7 urges all meeting attendees to secure their hotel reservation at the HL7 Working Group Meeting Host Hotel. This hotel has been contracted to provide the best rate and service to our HL7 meeting attendees, including the vast number of meeting rooms that HL7 uses. In order to secure the required meeting space, HL7 has a contractual obligation to fill our sleeping room blocks. If you make a reservation at a different hotel, HL7 risks falling short on its obligation, which translates to HL7 paying additional costs (penalties) to the hotel. Should this occur, HL7 will likely be forced to pass these costs onto our attendees through increased meeting registration fees. Therefore, to help avoid such fee increases, we urge you to book your hotel room at our host hotel. Thank you!
### 1. Contact Information

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
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<table>
<thead>
<tr>
<th>Title/Position</th>
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<table>
<thead>
<tr>
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<tbody>
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<tr>
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<table>
<thead>
<tr>
<th>Email</th>
<th>Nickname for Badge</th>
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</thead>
<tbody>
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</tbody>
</table>

Are you a member within the last 30 days? Emergency Contact

### 2. Survey & Information

<table>
<thead>
<tr>
<th>I am a/an:</th>
<th>Affiliate Chair</th>
<th>Facilitator — Vocabulary</th>
<th>HL7 Board Member</th>
<th>Tutorial Speaker</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Facilitator — MnM</td>
<td>Facilitator — Steering Division</td>
<td>HL7 Work Group Co-Chair</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Facilitator — Publishing</td>
<td>First-Time WGM Attendee</td>
<td>Past Board Chair</td>
<td></td>
</tr>
</tbody>
</table>

☐ I am a member of an HL7 International Affiliate, employee of an HL7 organizational member or member of another eligible organization (ASC X12, ADA, ASTM, CDISC, CEN/TC 251, CHCF, DICOM, GS1, The Health Story Project, IEEE, IHE, Mediquest, NAACCR, NCPDP, SNOMED/IHTSDO) and eligible for the member rate. Please list affiliate or organization:

☐ I am an approved participant in the student program and eligible to receive ☐ Discounted fees ☐ Waived fees (appropriate forms have been completed and sent to HL7).

University attending: Student #

<table>
<thead>
<tr>
<th>Meal Requirements:</th>
<th>Diabetic</th>
<th>Regular</th>
<th>Vegetarian</th>
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</tbody>
</table>

Please indicate if you plan to attend any of these functions:

☒ International Council (Sunday) ☐ Co-Chair Dinner/Meeting (Monday)

☒ HL7 Networking Reception (Wednesday) ☐ Affiliate Chair or Designated Rep Luncheon (Thursday)

#### Deadline for Discounted Rates:
Payment must be received by May 2, 2011 to qualify for the “Early Bird” rate. The full fee structure applies to all other registrations where payment is received after this date.

#### Cancellation/Refund Policy:
Prepaid registrants who cancel prior to the Early Bird deadline will receive a full refund less a $50 processing fee. After this date, no refunds will be given for ANY reason.

#### Payment Policy:
Registrations for the meeting on-site can only be paid for in US currency.

### 3. Registration and Tutorial Fees:
You must register for either the ALL WEEK OPTION or the DAILY FEE in addition to any tutorials that you attend.

#### IHIC 2011: Friday, May 13 – Saturday, May 14

or choose a day to attend: ☐ Friday ☐ Saturday

#### Sunday Meeting Fee:
This fee must be included if you will be attending any of the Sunday meetings. This fee is in addition to the Monday-Friday option fee. This fee does not apply to those attending the First-Time Attendee Orientation or the HL7 Organization and Process Orientation/Introduction.

#### Monday – Friday Option:
Please register me for the entire week. Please note that the Monday-Friday Option does not include the cost of tutorials. Please register separately for any tutorials you would like to attend.

#### Per Day Fees:
Please register me for the following days. Please note that daily fees do not include the cost of tutorials. Please register separately for any tutorials you would like to attend.

<table>
<thead>
<tr>
<th>Members</th>
<th>Non-Members</th>
<th>Amount Due</th>
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</thead>
<tbody>
<tr>
<td>Before</td>
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<td>Before</td>
</tr>
<tr>
<td>$300</td>
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<td>$300</td>
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<td>$200/day</td>
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<tr>
<td>$220/day</td>
<td>$290/day</td>
<td>$220/day</td>
</tr>
</tbody>
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Registrations received by mail or fax will not be processed until payment is received. The “Early Bird” rate will not apply if payment is received after the cutoff date.

Registration questions: Please e-mail reginfo@HL7.org. You will receive confirmation of registration by email. If you have not received a confirmation of registration within two weeks after registration, please call Mary Ann Boyle at +1 (734) 677-7777. Please bring your confirmation materials to the meeting with you.

---

### Mail/Overnight

Health Level Seven, International
3300 Washenaw Ave. Online www.HL7.org
Suite #227 Ann Arbor, MI 48104 USA

Fax +1 (734) 677-6622
### Tutorial Fees:
Please register me for the following tutorials:

(Please note that you must also register for the days you are taking tutorials.)

<table>
<thead>
<tr>
<th>Course</th>
<th>Members Before 5/2</th>
<th>Members After 5/2</th>
<th>Non-Members Before 5/2</th>
<th>Non-Members After 5/2</th>
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<td>CME Credit:</td>
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#### SUNDAY
- □ Track 4 – Information Forums: First-Time Attendees’ Orientation – FREE TUTORIAL (F1) — MUST SIGN UP to attend this tutorial (Please check the box.)
- □ Track 4 – Information Forums: Organization & Process Orientation/Intro – FREE TUTORIAL (F2) — MUST SIGN UP to attend this tutorial (Please check the box.)

#### MONDAY
**Morning Sessions**
- □ Track 4 – Information Forums: HL7 First-Time Attendees’ Orientation – FREE TUTORIAL (F3) — MUST SIGN UP to attend this tutorial (Please check the box.)
  - $110
  - $110
  - $110
  - $110

**Afternoon Sessions**
  - $110
  - $110
  - $110
  - $110

- □ Track 2 – Version 2: Introduction to Version 3, Part 1 (M2)
  - $110
  - $110
  - $110
  - $110

- □ Track 3 – Special Topics: Introduction to Vocabulary in HL7 (M3)
  - $110
  - $110
  - $110
  - $110

#### TUESDAY
**Morning Sessions**
- □ Track 4 – Information Forums: Organization & Process Orientation/Intro – FREE TUTORIAL (F4) — MUST SIGN UP to attend this tutorial (Please check the box.)
  - $110
  - $110
  - $110
  - $110

**Afternoon Sessions**
- □ Track 1 – Version 2: Introduction to Version 2, Part 2 (M4)
  - $110
  - $110
  - $110
  - $110

- □ Track 2 – Version 3: Introduction to Version 3, Part 2 (M5)
  - $110
  - $110
  - $110
  - $110

- □ Track 3 – Special Topics: Advanced Application of Vocabulary in HL7 (M6)
  - $110
  - $110
  - $110
  - $110

#### WEDNESDAY
**Morning Sessions**
- □ Track 2 – Version 2: 2.6 Control Specialist Certification Exam Review (W13)
  - $110
  - $110
  - $110
  - $110

- □ Track 2 – Version 3: Messaging Implementation, Part 1 (W14)
  - $110
  - $110
  - $110
  - $110

- □ Track 2 – Version 3: Introduction to Clinical Document Architecture (W15)
  - $110
  - $110
  - $110
  - $110

**Afternoon Sessions**
- □ Track 1 – Version 3: Clinical Document Architecture Advanced (W16)
  - $110
  - $110
  - $110
  - $110

- □ Track 2 – Version 3: Data Types Release 2 (W17)
  - $110
  - $110
  - $110
  - $110

- □ Track 3 – Special Topics: Clinical Decision Support (W18)
  - $110
  - $110
  - $110
  - $110

#### THURSDAY
**Morning Sessions**
- □ Track 4 – Information Forums: Newly Elected Co-Chair Training – FREE TUTORIAL (F5) — MUST SIGN UP to attend this tutorial (Please check the box.)
  - $110
  - $110
  - $110
  - $110

- □ Track 2 – Version 3: CDA Specialist Certification Exam Review (TH19)
  - $110
  - $110
  - $110
  - $110

- □ Track 2 – Version 3: Continuity of Care Document (TH20)
  - $110
  - $110
  - $110
  - $110

- □ Track 3 – Special Topics: HL7 Standards for Meaningful Use (TH21)
  - $110
  - $110
  - $110
  - $110

**Afternoon Sessions**
- □ Track 1 – Version 2: Imaging Interoperability (TH22)
  - $110
  - $110
  - $110
  - $110

  - $110
  - $110
  - $110
  - $110

- □ Track 3 – Special Topics: Personal Health Record (TH24)
  - $110
  - $110
  - $110
  - $110

**Evening Sessions**
- □ Track 1 – Version 2: Version 2.6 Control Specialist Certification Exam (TH25)
  - $145
  - $145
  - $145
  - $145

- □ Track 2 – Version 3: CDA Specialist Certification Exam (TH26)
  - $145
  - $145
  - $145
  - $145

- □ Track 2 – Version 3: Version 3 RIM Certification Exam (TH27)
  - $145
  - $145
  - $145
  - $145

Total Amount Due $___________

### 4. Payment Information
Payment must be included in order to process your registration. Method of Payment (U.S. Dollars, Drawn on U.S. Bank Only)

- □ Check (Please make payable to: Health Level Seven International) Credit Card: □ Visa □ Master Card □ American Express □ Discover

| Number: | Expiration Date: | Billing Street Address: | Signature: |
UPCOMING CO-CHAIR ELECTIONS

The following HL7 work groups will conduct co-chair elections at this Working Group Meeting:

<table>
<thead>
<tr>
<th>Work Group</th>
<th># being elected</th>
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</thead>
<tbody>
<tr>
<td>Anatomic Pathology</td>
<td>2</td>
</tr>
<tr>
<td>Arden Syntax</td>
<td>1</td>
</tr>
<tr>
<td>Child Health</td>
<td>3</td>
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<tr>
<td>Electronic Services</td>
<td>1</td>
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<tr>
<td>Financial Management</td>
<td>1</td>
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<tr>
<td>Generation of Anesthesia Standards</td>
<td>1</td>
</tr>
<tr>
<td>Modeling &amp; Methodology</td>
<td>1</td>
</tr>
<tr>
<td>Orders &amp; Observations</td>
<td>2</td>
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<tr>
<td>Patient Administration</td>
<td>1</td>
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<tr>
<td>Patient Care</td>
<td>2</td>
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<tr>
<td>Pharmacy</td>
<td>1</td>
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<tr>
<td>RCRIM</td>
<td>2</td>
</tr>
<tr>
<td>Services Oriented Architecture</td>
<td>1</td>
</tr>
<tr>
<td>Vocabulary</td>
<td>1</td>
</tr>
</tbody>
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UPCOMING WORKING GROUP MEETINGS

San Diego, CA
25th Annual Plenary and Working Group Meeting
Sept. 11 – 16, 2011 • Town and Country Resort and Convention Center

San Antonio, TX
Working Group Meeting
Jan. 15 – 20, 2012 • Hyatt Regency on the Riverwalk

Phoenix, AZ
Working Group Meeting
Jan. 13 – 18, 2013 • Pointe Hilton at Squaw Peak Resort

HL7 INNOVATIONS WORKSHOP

Monday, May 16, 2011 • 9:00 – 12:30 pm

Have a new idea but it does not fit as an HL7 project? Does your idea need some help or development? Submit your concept and present it at the HL7 Innovations Workshop!

Due to the success of this workshop at the 2010 May Working Group Meeting and the October Plenary and Working Group Meeting, another has been scheduled for the May Working Group Meeting in Lake Buena Vista, FL. This TSC-hosted workshop will explore how new ideas can more effectively be introduced to HL7 International and incubated prior to a formal standards development project starting. This may include help identifying the relevant work groups, help engaging with stakeholders and finding project funding.

Individuals are encouraged to register a concept via the Innovations Listserv innovations@lists.hl7.org. There are three pieces of information required to register:
1. Concept Name
2. Contact Name and e-mail address
3. Problem or Issue addressed

Registered concepts will be provided a wiki page to document the concept and a slot on the agenda on May 16th to present the concept to the workshop attendees.
If you're staying at Hilton in the WALT DISNEY WORLD® Resort, you'll be right within the Downtown Disney Resort® area. Set amidst 23 beautifully landscaped acres, the hotel is next door to the Downtown Disney Marketplace, Pleasure Island, Downtown Disney’s Westside, and Cirque de Soleil.

You’ll have easy access to WALT DISNEY WORLD Theme Parks: Magic Kingdom, Animal Kingdom, Disney Hollywood Studios, and Epcot Center. And you can visit other nearby theme parks such as Cypress Gardens, SeaWorld, and Universal Studios Orlando.

In addition to being home to some of the largest theme parks in the world, Orlando also boasts first-rate entertainment complexes with state-of-the-art movie theaters, a science center, parks and gardens, and an array of other entertaining, educational and unique attractions. Take a trip to the Kennedy Space Center, discover casino cruises, or tour the Florida Everglades and beaches.

Dining
Nobody combines thrilling entertainment and delicious food better than Orlando area dinner theaters. From Broadway musicals to hilarious hoedowns, your many options will leave you satisfyingly full and happily entertained. Enjoy dinner theater featuring themes such as Pirate Adventures, Medieval Times, Arabian Nights, Detective Mysteries, Hawaiian Luauas and more.

Shopping
Sporting an eclectic mix of luxury department stores, upscale boutiques, outlet malls, antique shops, farmers markets and entertainment complexes combining shopping with dining and entertainment, Orlando has been propelled into the spotlight as a major player in the retail market and a virtual shopping mecca. Orlando offers an abundance of stores for the serious (or casual) shopper in you. From shopping centers and malls to antique shops and markets, you're bound to find just what you're looking for in Orlando.

Nightlife
After a long day of meetings, you owe it to yourself to get out and enjoy the fabulous nightlife that Orlando has to offer. If you feel like laughing until it hurts, catching a concert or dancing the night away, you'll find so many choices for the perfect evening. Orlando, with its many nightclubs, lounges, pubs, bars, concert venues and evening “happenings” is the perfect place for those night owls whose fun begins when the stars come out.

Photos and copy of the above courtesy of the Orlando/Orange County CVB and Hilton in the Walt Disney World Resort.
Photo courtesy of SteamFan. Cinderella Castle by day (Nikon D80); October 29, 2006.