Health Level Seven® International
Unlocking the Power of Health Information

January
Hyatt Regency San Antonio on the Riverwalk
San Antonio, Texas
January 15 – 20, 2012

Hotel Cutoff — December 26, 2011
Early Bird Cutoff — January 2, 2012
Online Cutoff — January 9, 2012

Health Level Seven® International
Unlocking the Power of Health Information

Working Group Meeting

Hyatt Regency San Antonio on the Riverwalk
San Antonio, Texas
January 15 – 20, 2012

CME Credits Available!
sponsored through the American College of Physicians
See page 3 for details.

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Hello, HL7 colleagues and friends!

This is my first address as Chair of HL7. So, first let me say what an honor it is to serve you and represent HL7 in this capacity.

Two words that I hope will characterize my term as chair are transformation and excitement. There will be many challenges facing us in the next two years, and to meet those challenges, we have to transform. We’ve gotten strong recommendations from the Advisory Council to be more proactive in our advocacy efforts, using our world-wide voice to inform and shape policy, as well as promote the value of standards. We’ve long discussed what it means to be a truly international organization. We now have to decide on and implement an international structure that’s a win-win for members, affiliates, and HL7 International.

We’ve made terrific strides in developing a road map of strategic projects that then turned into a set of strategic initiatives. We now have to build on that excellent foundation by developing a strategic plan that identifies areas of growth and resources to support that growth. Increasing our work in clinical concepts and data standards, as well as standards needed in other healthcare sectors, such as clinical research, quality measurement and patient safety, public/population health, and non-acute care settings, are but a few areas of potential growth. Certainly, the transition to Fresh Look provides an opportunity for major growth. On top of that, the strategic plan has to work in concert with a business model that drives value for our customers, members, and affiliates, and increases membership, the development and use of HL7 IP, the development and consumption of new products and services, and funding through grants and contracts.

All of what this transformation brings—a nimble, agile, aligned international organization; the opportunity to develop new standards that are responsive to customer needs, and realm initiatives that support the transformations we see going on in healthcare within our respective realms—will be extremely exciting! Yes, this is a lot of change. But we don’t have to do everything at once. We can take measured steps and test a concept before it is fully executed. But change we must, and to do that we all have to work together toward a vision and strategy and support HL7’s leadership. I look forward to working with all of you in this endeavor.

Donald J. Mon
Chair of the Board, 2012-2013, Health Level Seven® International
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 5-13.

Education Tracks

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 and CDA Core
HL7 Version 3 is HL7’s newest standard. 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 January 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 Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The American College of Physicians designates this live activity for a maximum of 23 AMA PRA Category 1 credit(s). Physicians should claim only the credit commensurate with the extent of their participation in the activity.

San Antonio, Texas
Schedule At A Glance

SATURDAY, JANUARY 14
9:00 – 5:00pm TSC Meeting

SUNDAY, JANUARY 15
8:30 – 5:00pm REGISTRATION
9:00 – 3:00pm Standards for Interoperability
1:45 – 5:00pm Version 3 Software Implementation
1:45 – 5:00pm Patient Care Coordination, HL7 and Integrating the Health Enterprise
1:45 – 5:00pm Architectural review Board (ArB) Meeting
10:30 – 11:00am Morning Break
12:30 – 1:30pm Lunch
3:00 – 3:30pm Afternoon Break

MONDAY, JANUARY 16
7:00 – 8:00am First-Time Attendees’ Orientation – FREE TUTORIAL
7:00 – 5:00pm REGISTRATION
7:30 – 8:30am Continental Breakfast
8:00 – 8:45am General Session – HL7 CEO and International Council Reports, Announcements
9:00 – 12:30pm Introduction to Electronic Health Record
9:00 – 12:30pm Introduction to Version 2, Part 1: Fundamentals
9:00 – 12:30pm Introduction to Version 3, Part 1: Fundamentals
9:00 – 12:30pm Introduction to Version 3, Part 2: Messaging
9:00 – 12:30pm Introduction to Version 2, Part 2: Orders and Observations
1:45 – 5:00pm Introduction to Version 2, Part 2: Orders and Observations
1:45 – 5:00pm Clinical Decision Support: HL7 Standards and Practical Applications
3:00 – 3:30pm Afternoon Break
5:15 – 7:00pm General Session – HL7 CEO and International Council Reports, Announcements
10:30 – 11:00am Morning Break
11:00 – 12:30pm Ambassador Program – HL7 Meaningful Use Update
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 Architectural review Board (ArB) Meeting
1:45 – 5:00pm Publishing / Modeling Tools
1:45 – 5:00pm Personal Health Record
1:45 – 5:00pm CDA Consolidation
1:45 – 5:00pm Newly Elected Co-Chair Training – FREE TUTORIAL
12:30 – 1:30pm Project Facilitators’ Roundtable Luncheon
12:30 – 1:30pm Project Facilitators’ Roundtable Luncheon
10:30 – 11:00am Continental Breakfast
10:30 – 11:00am Morning Break
12:30 – 1:30pm Lunch – Co-Chair reserved tables
12:30 – 1:30pm Lunch – First-Time Attendees’ Q & A reserved tables
11:00 – 12:30pm Ambassador Program – HL7 Meaningful Use Update
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10:30 – 11:00am Morning Break
12:30 – 1:30pm Lunch – Co-Chair reserved tables
12:30 – 1:30pm Lunch – First-Time Attendees’ Q & A reserved tables
11:00 – 12:30pm Ambassador Program – HL7 Meaningful Use Update
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12:00 – 1:30pm Lunch – First-Time Attendees’ Q & A reserved tables
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1:45 – 5:00pm Architectural review Board (ArB) Meeting
1:45 – 5:00pm Publishing / Modeling Tools
1:45 – 5:00pm Personal Health Record
1:45 – 5:00pm CDA Consolidation
1:45 – 5:00pm Newly Elected Co-Chair Training – FREE TUTORIAL
12:30 – 1:30pm Project Facilitators’ Roundtable Luncheon
12:30 – 1:30pm Project Facilitators’ Roundtable Luncheon
10:30 – 11:00am Continental Breakfast
10:30 – 11:00am Morning Break
12:30 – 1:30pm Lunch – Co-Chair reserved tables
12:30 – 1:30pm Lunch – First-Time Attendees’ Q & A reserved tables
11:00 – 12:30pm Ambassador Program – HL7 Meaningful Use Update
10:30 – 11:00am Morning Break
5:30 – 8:00 pm Modeling & Methodology (MnM) Facilitators’ Roundtable

TUESDAY, JANUARY 17
7:00 – 8:00am Organization & Process Orientation/Introduction – FREE TUTORIAL
7:00 – 5:00pm REGISTRATION
7:30 – 8:30am Continental Breakfast
8:00 – 8:45am General Session – HL7 CTO and TSC Reports, Announcements
9:00 – 5:00pm Working Group Meetings
10:30 – 11:00am Morning Break
11:00 – 12:30pm 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 Facilitators’ Roundtable Luncheon
1:45 – 5:00pm Architectural review Board (ArB) Meeting
1:45 – 5:00pm Version 3 Implementation
1:45 – 5:00pm Patient Care Coordination, HL7 and Integrating the Health Enterprise
1:45 – 5:00pm Standards for Interoperability
3:00 – 3:30pm Afternoon Break

WEDNESDAY, JANUARY 18
7:00 – 7:45am Continental Breakfast
7:30 – 8:30am General Session – HL7 CEO and International Council Reports, Announcements
7:00 – 8:00am How to Design and Deliver an HL7 Tutorial – FREE TUTORIAL
7:00 – 8:00am RIM Based Application Architecture Overview – FREE TUTORIAL
7:30 – 8:30am Continental Breakfast
7:30 – 8:00pm REGISTRATION
8:00 – 8:45am General Session – HL7 Board Report, Awards Presentations, Announcements
9:00 – 12:30pm Version 2 Message Profiles and Conformance
9:00 – 12:30pm Introduction to Clinical Document Architecture
9:00 – 12:30pm Advanced Application of Vocabulary
9:00 – 5:00pm Working Group Meetings
10:30 – 11:00am Morning Break
12:30 – 1:30pm Lunch – Co-Chair reserved tables
10:30 – 11:00am Continental Breakfast
10:30 – 11:00am Morning Break
3:30 – 5:00pm Afternoon Break
3:30 – 5:00pm SAIF Architecture Program Update
5:15 – 7:00pm Networking Reception

THURSDAY, JANUARY 19
7:00 – 7:45am Newly Elected Co-Chair Training – FREE TUTORIAL
7:30 – 8:30am Continental Breakfast
7:30 – 5:00pm General Session – Announcements
8:00 – 8:45am General Session – Announcements
9:00 – 12:30pm CDA Specialist Certification Test Preparation
9:00 – 12:30pm Security Through Risk Analysis
9:00 – 12:30pm HL7 Standards for Meaningful Use
9:00 – 5:00pm Working Group Meetings
10:30 – 11:00am Continental Breakfast
10:30 – 11:00am Continental Breakfast
12:30 – 1:30pm Lunch – Co-Chair reserved tables
12:30 – 1:30pm Lunch – First-Time Attendees’ Q & A reserved tables
11:00 – 12:30pm Ambassador Program – HL7 Meaningful Use Update
12:30 – 1:30pm Lunch – Co-Chair reserved tables
12:30 – 1:30pm Lunch – First-Time Attendees’ Q & A reserved tables
10:30 – 11:00am Continental Breakfast
10:30 – 11:00am Morning Break
12:30 – 1:30pm Lunch – Co-Chair reserved tables
12:30 – 1:30pm Lunch – First-Time Attendees’ Q & A reserved tables
11:00 – 12:30pm Ambassador Program – HL7 Meaningful Use Update
10:30 – 11:00am Continental Breakfast
10:30 – 11:00am Morning Break
5:15 – 7:00pm Networking Reception
5:30 – 7:30pm HL7 V2.6 Control Specialist Certification Test Preparation
5:30 – 7:30pm HL7 V2.6 Control Specialist Certification Test Preparation
5:30 – 7:30pm HL7 Version 3 RIM Certification Test
5:30 – 8:00 pm Modeling & Methodology (MnM) Facilitators’ Roundtable

FRIDAY, JANUARY 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 Continental Breakfast
12:30 – 1:30pm Lunch

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, January 16 / 9:00 am – 12:30 pm** 3 CME Credits

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:**
Patrick Loyd: Co-Chair, Technical & Support Services Steering Division-HL7 Technical Steering Committee; Co-Chair, HL7 Clinical Statement Work Group; Co-Chair, HL7 Infrastructure and Messaging Work Group; Co-Chair, HL7 Orders and Observations Work Group; Sole Proprietor, ICode Solutions

**W13 – Version 2 Message Profiles and Conformance**
**Wednesday, January 18 / 9:00 am – 12:30 pm** 3 CME Credits

This tutorial reviews the message definition and 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 Test.

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

**Faculty:**
Hans Buitendijk: Co-Chair, HL7 Clinical Statement; Co-Chair, HL7 Orders and Observations; Siemens Healthcare HS Standards & Regulations Manager

**TH24 – HL7 Version 2.6 Control Specialist Certification Test**
**Thursday, January 19 / 5:30 pm – 7:30 pm**

Health Level Seven 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 test 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 Chapters 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).

**This Tutorial Will Benefit:**
- Anyone interested in HL7 interoperability

**Prerequisites:**
- Working knowledge of HL7 or other EDI standards (ASTM, X12)

**Faculty:**
AbdulMalik Shakir: Co-Chair, HL7 Education Work Group; Member, HL7 Architectural review Board; Principal Consultant, Shakir Consulting
Tutorials

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, January 16 / 9:00 am – 12:30 pm 3 CME Credits

Introduction to Version 3 is a rigorous introduction to HL7’s newly emerging standard. This class includes:

- 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:

Virginia Lorenzi: Manager, New York-Presbyterian Hospital; Associate, Department of Biomedical Informatics, Columbia University

**M5 – Introduction to Version 3, Part 2: Messaging**

Monday, January 16 / 1:45 pm – 5:00 pm 3 CME Credits

Health Level Seven 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 within the standard. Finally, it explores how a simple message is wrapped, transmitted, and acknowledged.

**T7 – Version 3 Data Types R2**

Tuesday, January 17 / 9:00 am – 12:30 pm 3 CME Credits

This tutorial provides an in-depth look at Release 2 of the Version 3 data types (ISO 21090). It focuses on implementation aspects but also covers abstract data type definitions.

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 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 datatypes
- The differences between R1 and R2 data types
- How to use the ‘difficult’ datatypes — CD, ED, PQ, and IVL
- How to avoid the most common implementation mistakes

Prerequisites:

- The course will assume that participants have basic O-O, UML and XML skills, and general knowledge of the Version 3 RIM concepts.
**T10 – Version 3 Software Implementation**  
**Tuesday, January 17 / 1:45 pm – 5:00 pm**  
3 CME Credits

This class gives an overview of current technical strategies for implementing solutions based on the Version 3 specifications. How is a message or a CDA document populated from our repository? What do we do when we receive a document or message? How do we process it? This tutorial will address implementation of Version 3 based applications from a practical point of view. Different architectural approaches will be examined and compared. The tutorial is designed to address the needs of the implementer/developer/application architect. The tutorial will address techniques and design patterns for manipulating Version 3 messages or documents: parsing and serialization, extended validation, communication, storage and retrieval and enablement of existing applications.

**This Tutorial Will Benefit:**
- Software architects responsible for integration projects
- Developers responsible for Version 3 implementation
- Technical specialists considering Version 3 adoption

**Prerequisites:**
- Knowledge of HL7 Version 3 and the HDF
- General knowledge of XML tooling principles and application development frameworks

**Note:** This class does not contain any hands-on programming exercises; the topics will be covered in a platform-agnostic conceptual manner.

**Faculty:**  
Rene Spronk: Co-Chair, HL7 RIMBAA Work Group; Tutor/Consultant, Ringholm bv

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**W14 – Introduction to Clinical Document Architecture**  
**Wednesday, January 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 describes CDA projects supporting meaningful use in the United States as well as others in Europe and Asia/Pacific. It reviews the tools available for CDA creation, management and distribution; and current work on CDA, summary documents, including the Consolidated CDA Templates Project and Continuity of Care Document (CCD).

**This Tutorial Will Benefit:**
- Healthcare providers and exchange network architects considering CDA implementation
- Product managers considering support for CDA and those required to support it for meaningful use

**Faculty:**  
Robert Dolin, MD (Lead Speaker): Past Chair, HL7 Board of Directors; Co-Chair, HL7 Structured Documents Work Group; Co-Editor, CDA; Physician; President and Chief Medical Officer, Lantana Consulting Group

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**TH18 – CDA Specialist Certification Test Preparation**  
**Thursday, January 19 / 9:00 am – 12:30 pm**  
3 CME Credits

**Upon Completion of This Tutorial:**
- Students will be better prepared to take the CDA Certification Test

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

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 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 – Rochester, MN

TH21 – CDA Consolidation
Thursday, January 19 / 1:45 pm – 5:00 pm 3 CME Credits

This tutorial will provide an overview of the clinical documents supported by the CDA Consolidation guide, including:
- Continuity of Care Document 1.1
- History and Physical
- Consult Note
- Discharge Summary
- Diagnostic Imaging Report
- Procedure Note
- Operative Note
- Progress Note
- Unstructured Document

This Tutorial Will Benefit:
- Users of systems designed to provide documentation of clinical encounters in a healthcare setting
- Administrators, system purchasers and policy makers in both the inpatient and outpatient setting who need to understand the HL7 specifications for clinical documentation in use
- Product managers, software developers and integration specialists who are responsible for implementing solutions for clinical documentation

Upon Completion of This Tutorial, Students Will Know:
- History and need for the CDA Consolidation Project
- How to read and understand the implementation guide
- Similarities and differences across document types in the guide
- Use cases for each of the document types

Faculty:
Keith W. Boone: Director, HL7 Board of Directors; Standards Architect, GE Healthcare

TH25 – HL7 CDA Specialist Certification Test
Thursday, January 19 / 5:30 pm – 7:30 pm

Health Level Seven is pleased to offer certification testing on HL7 CDA Release 2. Certification testing is offered to those participants who want to demonstrate that they have a working knowledge of the CDA Release 2 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 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.

TH26 – HL7 Version 3 RIM Certification Test
Thursday, January 19 / 5:30 pm – 7:30 pm

Health Level Seven 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 Electronic Health Record
Monday, January 16 / 9:00 am – 12:30 pm 3 CME Credits

This informative tutorial and review provides an in-depth look at the American National Standards Institute (ANSI) and International Organization for Standardization (ISO) approved EHR System Functional Model (EHR-S FM), Release 1. The EHR-S FM includes conformance criteria, along with background information, including an overview of other EHR standards initiatives. The tutorial will also cover ongoing EHR Work Group projects such as the Personal Health Record, EHR Glossary, Functional Profiles, and the EHR Interoperability Model as well as EHR industry-related information such as EHR system certification efforts and health care information technology standards selection and usage efforts.

This Tutorial Will Benefit:
- Those seeking information on functionality and standardization of electronic health records
- This tutorial focuses on EHR system functionality and will be helpful for those looking to implement EHR systems, those wishing to evaluate EHR systems, or those that have an interest in garnering a bit of EHR system industry background information

Upon Completion of This Tutorial, Students Will Know:
- Background and status of the EHR System Functional Model as an ANSI and International Organizational for Standardization (ISO) standard
- Options to use the functional model for conformance and care setting profiles
- Background and status on HL7 and industry projects supporting EHR standards

TRACK 3—HL7 SPECIAL TOPICS
**M6 – Clinical Decision Support: HL7 Standards and Practical Applications**

**Monday, January 16 / 1:45 pm – 5:00 pm**

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 standard 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) standard, Healthcare Quality Measure Format, Order Set standard and Virtual Medical Record (vMR)

**Faculty:**

- **Robert A. Jenders, MD, MS, FACP, FACMI (Lead Speaker):** Co-Chair, 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, Clinical Decision Support Work Group; Assistant Professor, Department of Biomedical Informatics, University of Utah
- **Kensaku Kawamoto, MD, PhD (Co-Speaker):** Co-Chair, Clinical Decision Support Work Group; Assistant Professor, Department of Biomedical Informatics, University of Utah

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**T8 – Introduction and Overview of the SAIF Canonical Ballot**

**Tuesday, January 17 / 9:00 am – 12:30 pm**

Over the past three years, the HL7 Services-Aware Interoperability Framework (SAIF) has moved from a directive from the CTO to the Architectural review Board (ArB) to develop an Enterprise Architecture for HL7, to a set of four frameworks – Information, Behavioral, Governance, and Conformance and Compliance – which collectively define SAIF as a set of canonical concepts, constructs, and processes. In particular, each framework specifies a “grammar” that can be used to explicitly describe those aspects of various software components – e.g. messages, services, objects, etc. – that most directly impact the ability of those components to interoperate with other components in the same or other enterprise architectures. The SAIF grammars are collected in an HL7 balloted document referred to as the “SAIF Canonical Definition and Description.” This HL7 specification is being used by HL7 and other organizations (e.g. NCI, DoD, NeHTA, Canada Infoway) to define SAIF implementation guides (IG) which instantiate the various SAIF canonical grammars in terms of specific concepts, constructs, processes, etc. within the larger context of the SAIF IG’s developing organization.

This tutorial is focused on tracing the evolution and maturation of SAIF Canonical to provide attendees with an overview and relatively detailed understanding of each of the four SAIF Canonical Frameworks, how they are inter-related/inter-connected, and how they are instantiated in a SAIF implementation guide. In particular, the tutorial will discuss the use of the ISO standard Reference Model for Open Distributed Processing (RM-ODP) in the SAIF Canonical, as well as how the SAIF Canonical can serve as an adjunct to any number of established enterprise architecture frameworks including TOGAF, Zachman2, RM-ODP, etc.

**This Tutorial Will Benefit:**

- All HL7 participants interested in understanding the concepts behind the emerging HL7 SAIF Implementation Guide

**Upon Completion of This Tutorial, Participants Will Understand:**

- Why HL7 has undertaken the effort of defining SAIF Canonical (in addition to the SAIF IG), i.e. the HL7 SAIF Canonical Value Proposition
- The relationship of services and Service-Oriented Architectures (SOAs) to SAIF Canonical
- The relationship of SAIF Canonical to legacy HL7 specifications and activities, particularly messages and documents (CDA)
- The basic structure and function of SAIF Canonical, including the content of the Information, Behavioral, Governance, and Enterprise Conformance and Compliance frameworks
- The difference between SAIF Canonical and HL7’s Implementation Guide of SAIF (i.e. the HL7 SAIF IG)
- SAIF-based relationships between the HL7 ArB, Technical Steering Committee, and other HL7 work groups
- Implications of SAIF (both Canonical and IG) to HL7 with respect to external groups such as CDISC, OMG, etc.

**Prerequisites:**

- Awareness of the difficulties and complexities of achieving semantic interoperability using HL7 (or other equivalent) specifications in an increasingly complex international deployment environment

**Faculty:**

- **Ron Parker:** Vice Chair, HL7 ArB Work Group; Canada Health Infoway
T9 – Introduction to Integrating the Healthcare Enterprise
Tuesday, January 17 / 9:00 am – 12:30 pm 3 CME Credits

Integrating the Healthcare Enterprise (IHE) is an organization devoted to the promotion of standards-based interoperability in healthcare. The goal of IHE is to improve the effectiveness and efficiency of healthcare provider organizations, and the system developers that support them, through the value proposition of interoperability standards. The IHE process is use case driven, and includes development of implementation guides, hosting industry-wide interoperability testing events (Connectathons), and public demonstrations (such as the HIMSS Interoperability Showcase). IHE is a public-private collaboration of over 400 organizations, including professional societies, government agencies, standards developing organizations (including HL7), health IT system vendors and implementers. It operates through a dozen specialty domains and across all regions of the world; its profiles form the basis for many interoperability efforts at the departmental, institutional, regional, national, and international levels.

This tutorial will provide an overview of the IHE organization and its processes, the scope of use cases (Profiles) addressed, and how those Profiles are being used in real world implementations.

This Tutorial Will Benefit:
• Users of health IT systems (clinicians, public health, researchers) who have interoperability use cases that need to be addressed
• Healthcare administrators, system purchasers, and policy makers who need to understand the scope of what is available for interoperability, and how to leverage IHE Profiles for effective system specification and procurement
• Product managers, software developers, and integration specialists for clinical information systems that need to interoperate with other systems

Upon Completion of This Tutorial, Students Will Understand:
• The value proposition for standards-based interoperability, and the challenges to implementation
• The IHE process for use case driven interoperability specification, testing, and deployment
• The IHE Integration Profiles for intra-institutional and cross-enterprise data exchange

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

T12 – Standards for Interoperability
Tuesday, January 17 / 1:45 pm – 5:00 pm 3 CME Credits

This tutorial provides an introduction to the main health interoperability standards, 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:
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: Co-Chair, HL7 Vocabulary Work Group; Klein Consulting Inc

TH19 – Security Through Risk Analysis
Thursday, January 19 / 9:00 am – 12:30 pm 3 CME Credits

Healthcare today has some of the most diverse needs with regard to sharing of data and the need to securely move patient information among systems. Within Health Level Seven (HL7) there are multiple verticals that consider messaging, structures, data models, coding and the like. Security is the common thread that connects all of them. Increasingly, healthcare organizations and technology vendors are performing assessments (threat risk assessments, privacy impact assessments, business impact assessments, etc.) to ensure installed healthcare technology will have a positive impact on healthcare delivery. These assessments, often called risk assessments, are even mandated for healthcare delivery organizations in some countries. Unfortunately, key decision makers often have difficulty understanding the relevance of the risks identified, and often overlook them.

HL7 has instituted a Security Risk Assessment Cookbook process for use when HL7 standards are developed. This process will assure that standards that have potential risks to privacy and security include specific “Security Considerations”. Using this process will facilitate the identification of gaps in a standard’s baseline security and privacy, allowing the working group to either update the standard on their own or to send a request to the Security Work Group for assistance in filling the gap. This will lead to standards that include privacy and security as part of their base, reducing the need to “bolt” security on later. As a result, the HL7 standards will better support patient safety and improved patient outcomes. Security and privacy considerations can then be communicated to the software developers.

When software systems are put into an operational environment, further risk assessment needs to be done to protect safety and security. IEC 80001 - “Application of risk management for IT-networks medical devices” is a family of new international standards that recognize the need to apply risk assessment methodology when incorporating medical devices into IT-networks to address safety, effectiveness, and security. This standard is specific to medical devices, but can be applied more broadly to any system.

This Tutorial Will Benefit:
- HL7 work group members wanting to understand how to consider security when writing standards
- All those using HL7 standards wanting to understand how to use the security considerations

Upon Completion of This Tutorial, Students Will Learn:
- How to publish standards that have taken privacy and security considerations into account
- How to facilitate completing a security risk assessment for a specific standard
- A method for identifying gaps in security and privacy
- How to assess and prioritize risks
- How to communicate risks and mitigations
- How to import risks that have been communicated

Faculty:
John Moehrke: Co-Chair, HL7 Security Work Group; Principal Engineer: Interoperability and Security, GE Healthcare

TH20 – HL7 Standards for Meaningful Use
Thursday, January 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 health providers clear visibility into the health status of their patient populations
- Applying clinical decision support designed by health care 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 eligible provider under Medicare is $44,000 and under Medicaid is $63,500; for eligible hospitals it is a $2M base payment. 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

The HL7 Standards That Have Influenced The Meaningful Use Legislation Are:
- Certified EHR (certification criteria based upon the HL7 EHR System Functional Model standard)
- HL7 HQMF (Quality Measure & HL7 QRDA (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 “Meaningful Use” is, who defined it, and what it means
• How it is 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; HL7 Ambassador; Group Chairman & CEO, CAL2CAL Corporation

TH22 – Personal Health Record
Thursday, January 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; HL7 Ambassador; Group Chairman & CEO, CAL2CAL Corporation

TH23 – Publishing / Modeling Tools
Thursday, January 19 / 1:45 pm – 5:00 pm 3 CME Credits

This tutorial will provide a step-by-step understanding of the tools that committee 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/toolsIndextm

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
  • Creation of HMD and Message Type-creating these designs in RoseTree, once the RMIM is saved from Visio
  • Creation of XML and Excel exports-Exporting these representations of an HMD with RoseTree, and formatting of the Excel view
  • Generation of XML schemas-Creation of XML schemas for the message designs using HL7-defined XSLT processes.
  • Time permitting, we will also cover likely (or known) future changes to these tools

Prerequisites:
• This tutorial pre-supposes 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:
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.

George (Woody) Beeler, PhD (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
Tutorials

**F1/F4 – First-Time Attendees’ Orientation – FREE TUTORIAL**
Sunday, January 15 / 4:00 pm – 5:00 pm
Monday, January 16 / 7:00 am – 8:00 am

This is a special orientation session for first-time attendees. It will give those new to HL7 the lay of the land and help make sure they get the very most out of their first Working Group Meeting experience. The session will consist of a quick meeting “tour” and a question and answer session that will help attendees make informed choices and maximize their time at the meeting. The session will be offered twice during the meeting—once on Sunday evening and again on Monday morning.

**Faculty:**
*Ken Mccaslin:* Co-Chair, Electronic Services Work Group; Manager, Connectivity Standards, Quest Diagnostics, Inc.

*Patrick Loyd:* Co-Chair, Technical & Support Services Steering Division-HL7 Technical Steering Committee; Co-Chair, HL7 Clinical Statement Work Group; Co-Chair, HL7 Infrastructure and Messaging Work Group; Co-Chair, HL7 Orders and Observations Work Group; Sole Proprietor, ICode Solutions

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**F2/F5 – Organization and Process Orientation/Introduction – FREE TUTORIAL**
Sunday, January 15 / 5:00 pm – 6:00 pm
Tuesday, January 17 / 7:00 am – 8:00 am

This session provides a brief history of the HL7 organization and answers the question “What is HL7?” An overview of the current work group structure and content domains will be presented. Attendees will learn the formal work group process and protocol and how to effectively participate in the work of the work groups. This tutorial has been added at the request of first time attendees seeking to gain deeper knowledge of the organization and its work processes.

**Faculty:**
*John Quinn:* HL7 Chief Technical Officer

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**F3/F6 – How to Design & Deliver an HL7 Tutorial – FREE TUTORIAL**
Sunday, January 15 / 5:00 pm – 6:00 pm
Wednesday, January 18 / 7:00 am – 8:00 am

This is an information session which introduces design and delivery of HL7 tutorials and provides tools and resources to assist in these tasks. The course will assist in production of focused, outcome driven educational activities.

**This Tutorial Will Benefit:**
- Anyone who delivers or intends to deliver or develop tutorial information for HL7

**Upon Completion of This Tutorial, Students Will Understand:**
- The need to identify appropriate content and methodology to meet stakeholder need
- How to develop competencies to meet need

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**F7 – RIM Based Application Architectures Overview – FREE TUTORIAL**
Wednesday, January 18 / 7:00 am – 8:00 am

This free tutorial provides an overview of the use of the HL7 RIM in the context of RIM Based Application Architectures (RIMBAA). RIMBAA applications use the HL7 RIM, or RIM based models, as a persistence model, and/or as an in-memory business object layer. The generic nature of the HL7 RIM data model lends itself to be used as the basis for clinical data repositories. If one were to create a new clinical data repository, what are the advantages and disadvantages of adopting the HL7 RIM? That question lies at the heart of this tutorial.

**This Tutorial Will Benefit:**
- Those currently implementing, or considering to implement, clinical data repositories, e.g. EHRs, clinical trial data repositories, or public health data repositories
- Those interested in the use of the RIM for reasons other than interoperability

**Upon Completion of This Tutorial, Students Will Have:**
- An understanding of multiple architectural approaches and techniques for using the HL7 RIM data model in clinical data repositories

**Prerequisites:**
- Knowledge of the HL7 RIM and basic knowledge of the specialization methodology (the HDF) to create RIM based artifacts

**Faculty:**
*Rene Spronk:* Co-Chair, HL7 RIMBAA Work Group; Tutor/Consultant, Ringholm bv

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**F8 – Newly Elected Co-Chair Training – Free Tutorial**
Thursday, January 19 / 7:00 am – 7:45 am

This session is intended for newly elected work group co-chairs. The purpose of the session is to introduce the co-chair responsibilities, review work group and balloting procedures, share tips on managing a work group, provide a framework for common operation among all work groups, and general Q&A session.

**Faculty:**
*Karen Van Hentenryck:* HL7 Associate Executive Director
### Tutorials at a Glance

<table>
<thead>
<tr>
<th>Track 1—Version 2.x</th>
<th>Topic</th>
<th>Class ID</th>
<th>Speaker</th>
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<td>Introduction to Version 2, Part 1: Control/Patient Administration</td>
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<td>Shakir</td>
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<td>Version 2.6 Control Specialist Certification Test Preparation</td>
<td>W16</td>
<td>Henderson</td>
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<td>Track 2—Version 3 and CDA</td>
<td>Introduction to Version 3, Part 1: Fundamentals</td>
<td>M2</td>
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<td>Version 3 Software Implementation</td>
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<td>Spronk</td>
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<td>Track 3—HL7 Special Topics</td>
<td>Introduction to Electronic Health Record</td>
<td>M3</td>
<td>Stevens</td>
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<td>Clinical Decision Support: HL7 Standards and Practical Applications</td>
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<td>Jenders/Del Fiol/ Kawamoto</td>
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<td>Benson</td>
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<td>Advanced Application of Vocabulary</td>
<td>W15</td>
<td>Klein</td>
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## Meetings Only—No Joint Sessions Listed

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<td>Board of Directors’ Meeting</td>
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<td>12:30-5:00</td>
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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>
<thead>
<tr>
<th>Meetings at a Glance</th>
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<td><strong>Sunday</strong></td>
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<td>International Mentoring Committee</td>
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<td>ISO TC215-WG2</td>
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<td>Marketing Council</td>
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<td>Modeling &amp; Methodology</td>
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<td>Networking Reception</td>
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<td>Nurses Meeting</td>
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<td>Open Space Meetings (Self Organized)</td>
<td>6:00-8:00</td>
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<tr>
<td>Orders &amp; Observations</td>
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<tr>
<td>Organization and Process Orientation/Introduction</td>
<td>5:00-6:00</td>
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<tr>
<td>Patient Administration</td>
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<td>Patient Safety</td>
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<td>Pharmacy</td>
<td>★ ★ Q1</td>
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<td>Policy Advisory Committee</td>
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<td>Process Improvement Committee</td>
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<td>Project Services</td>
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<td>Public Health and Emergency Response</td>
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<td>Publishing</td>
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<td>Regulated Clinical Research Information Management</td>
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<tr>
<td>RIM Based Application Architecture</td>
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<td>SAIF Architecture Program Update</td>
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<td>Security</td>
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<td>Services Oriented Architecture</td>
<td>★ ★ Q4</td>
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<td>Steering Divisions: Domain Experts Foundation &amp; Technology Structure &amp; Semantic Design Technical &amp; Support Services</td>
<td>7:00-8:30</td>
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<td>Structured Documents</td>
<td>★ ★ ★ ★ ★ Q2</td>
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<td>TSC Meetings (Note: There is also a meeting scheduled for Saturday, 1/14, 9:00-5:00 pm)</td>
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<td>Templates</td>
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<td>Vocabulary</td>
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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.
### General Session Room

Please plan to attend the Monday through Thursday General Sessions for daily highlights, meeting announcements and changes.

**Monday**
- 8:00 – 8:45 am: HL7 CEO and International Council Reports, Announcements
- 8:00 – 8:45 am: HL7 CTO and TSC Reports, Announcements
- 8:00 – 8:45 am: HL7 Board Report, Awards Presentations, Announcements
- **Friday:** NO GENERAL SESSION

Meeting times and locations are subject to change.

**NOTE:** In compliance with our status as an ANSI-accredited standards development organization, anyone may register to attend HL7 meetings.

### Registration Hours

<table>
<thead>
<tr>
<th>Day</th>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>Sunday</td>
<td>8:30 – 5:00 pm</td>
<td>Registration</td>
</tr>
<tr>
<td>Monday – Tuesday</td>
<td>7:00 – 5:00 pm</td>
<td>Registration</td>
</tr>
<tr>
<td>Wednesday – Thursday</td>
<td>7:30 – 5:00 pm</td>
<td>Registration</td>
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<tr>
<td>Friday</td>
<td>8:00 – 1:00 pm</td>
<td>Staff on Hand For Assistance</td>
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### Meals and Breaks

<table>
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<tr>
<td>Monday – Thursday</td>
<td>7:30 – 8:30 am</td>
<td>Continental Breakfast</td>
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<td>Friday</td>
<td>8:00 – 9:00 am</td>
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<tr>
<td>Monday – Friday</td>
<td>10:30 – 11:00 am</td>
<td>Morning Break</td>
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<tr>
<td>Monday – Friday</td>
<td>12:30 – 1:30 pm</td>
<td>Lunch</td>
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<tr>
<td>Monday – Thursday</td>
<td>3:00 – 3:30 pm</td>
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### Meetings

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<th>Activity</th>
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<tr>
<td>AFFILIATE AGREEMENT TASK FORCE (AATF)</td>
<td>Monday</td>
<td>1:45 – 5:00 pm</td>
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<tr>
<td>AFFILIATE DUE DILIGENCE COMMITTEE</td>
<td>Tuesday</td>
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<td>MEETING</td>
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<td>AMBASSADOR PROGRAM</td>
<td>Monday</td>
<td>11:00 – 12:30 pm</td>
<td>HL7 Meaningful Use Update</td>
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<td>ANATOMIC PATHOLOGY (AP)</td>
<td>Monday</td>
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<td>MEETING</td>
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<tr>
<td>ANESTHESIOLOGY (GAS)</td>
<td>Sunday</td>
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<tr>
<td>Architectural review BOARD (ArB)</td>
<td>Sunday</td>
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<td></td>
<td>Tuesday</td>
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<td></td>
<td>Wednesday</td>
<td>9:00 – 10:30 am</td>
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<td>Thursday</td>
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<td>ARDEN SYNTAX (AS)</td>
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<td>1:45 – 5:00 pm</td>
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<td>Wednesday – Friday</td>
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<td>BOAR OF DIRECTORS’ MEETING</td>
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<td>1:45 – 3:00 pm</td>
<td>Hosting: PHER</td>
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<td>CLINICAL GENOMICS (CLIN GEN)</td>
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<td></td>
<td>Wednesday</td>
<td>9:00 – 10:30 am</td>
<td>Joint w/PC, CBCC, PHER, EC</td>
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<tr>
<td>CLINICAL STATEMENT (CS)</td>
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<td>1:45 – 3:00 pm</td>
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<td>3:30 – 5:00 pm</td>
<td>MEETING</td>
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<tr>
<td>CO-CHAIR INFORMATION</td>
<td>Monday</td>
<td>5:15 – 7:00 pm</td>
<td>Co-Chairs Dinner/Meeting</td>
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<td>(Open Meeting, however open for dinner ONLY to Co-Chairs. <strong>Co-Chairs MUST register</strong> if you wish to attend the dinner/meeting)</td>
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<td></td>
<td>Monday – Tuesday</td>
<td>12:30 – 1:30 pm</td>
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<td>7:00 – 7:45 am</td>
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<td>COMMUNITY BASED COLLABORATIVE CARE (CBCC)</td>
<td>Monday</td>
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<td>Joint w/PC, CBCC, PHER, EC</td>
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<td>MEETING</td>
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<td>CONFORMANCE &amp; GUIDANCE FOR IMPLEMENTATION/TESTING (CGIT)</td>
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<td>Thursday</td>
<td>9:00 – 10:30 am</td>
<td>Joint w/Voc, SD</td>
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<td></td>
<td>11:00 – 12:30 pm</td>
<td>MEETING</td>
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<tr>
<td>DICOM WG-10</td>
<td>Friday</td>
<td>9:00 – 12:30 pm</td>
<td>MEETING</td>
</tr>
<tr>
<td>EDUCATION</td>
<td>Monday</td>
<td>1:45 – 3:00 pm</td>
<td>MEETING</td>
</tr>
<tr>
<td></td>
<td>3:30 – 5:00 pm</td>
<td>Joint w/ITS</td>
<td></td>
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<tr>
<td></td>
<td>Tuesday</td>
<td>9:00 – 12:30 pm</td>
<td>MEETING</td>
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<tr>
<td></td>
<td>12:30 – 1:30 pm</td>
<td>Education Facilitators’ Roundtable Luncheon</td>
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<tr>
<td></td>
<td>Thursday</td>
<td>1:45 – 5:00 pm</td>
<td>MEETING</td>
</tr>
<tr>
<td>ELECTRONIC HEALTH RECORDS (EHR)</td>
<td>Monday</td>
<td>9:00 – 5:00 pm</td>
<td>MEETING</td>
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<tr>
<td></td>
<td>Tuesday</td>
<td>9:00 – 10:30 am</td>
<td>Joint w/CIC</td>
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<td>11:00 – 5:00 pm</td>
<td>MEETING</td>
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<td></td>
<td>Wednesday</td>
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<td>Joint w/CIC</td>
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<td>11:00 – 12:30 pm</td>
<td>Hosting: PC, PS, PHER</td>
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<td></td>
<td>Wednesday</td>
<td>1:45 – 5:00 pm</td>
<td>MEETING</td>
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<tr>
<td></td>
<td>Thursday</td>
<td>9:00 – 5:00 pm</td>
<td>MEETING</td>
</tr>
</tbody>
</table>
## Meetings

### Electronic Services
- **Thursday 11:00 – 12:30 pm**

### Emergency Care (EC)
- **Monday 1:45 – 5:00 pm**
- **Tuesday 9:00 – 5:00 pm**
- **Wednesday 9:00 – 10:30 am** Joint w/PC, CBCC, CIC, PHER
- **11:00 – 5:00 pm**
- **Thursday 9:00 – 5:00 pm**
- **Friday 9:00 – 12:30 pm**

### Financial Management (FM)
- **Monday – Thursday 9:00 – 5:00 pm**

### First-Time Attendees' Meetings
- **Sunday 4:00 – 5:00 pm** Orientation Meeting
- **Monday 7:00 – 8:00 am** 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

### Foundation Task Force
- **Wednesday 3:30 – 5:00 pm**

### Fresh Look Task Force
- **Monday 9:00 – 5:00 pm**

### Governance and Operations Committee (GOC)
- **Tuesday 11:00 – 12:30 pm**

### Government Projects (GP)
- **Monday 9:00 – 12:30 pm**
- **3:30 – 5:00 pm**
- **Tuesday 9:00 – 12:30 pm**
- **Thursday 1:45 – 3:00 pm**

### GS1 Education Session
- **Wednesday 7:00 – 7:45 am**

### Health Care Devices (Dev)
- **Monday – Thursday 9:00 – 5:00 pm**
- **Friday 9:00 – 12:30 pm**

### Imaging Integration (II)
- **Wednesday 9:00 – 10:30 am** Joint w/O&O, AP
- **11:00 – 12:30 pm**
- **1:45 – 3:00 pm** Joint w/SD
- **3:30 – 5:00 pm**
- **Thursday 9:00 – 12:30 pm**

### Implementable Technology Specification (ITS)
- **Monday 9:00 – 3:00 pm**
- **3:30 – 5:00 pm** Hosting CGI
- **Tuesday 1:45 – 3:00 pm** Joint w/SD, MnM, Publishing V-3, Tooling
- **Wednesday 9:00 – 5:00 pm**
- **Thursday 9:00 – 12:30 pm**

### Infrastructure & Messaging (InM)
- **Tuesday 9:00 – 12:30 pm** Hosting: CGI
- **1:45 – 3:00 pm**

### International Council Meeting
- **Sunday 9:00 – 3:00 pm**
- **12:30 – 1:30 pm** Lunch
- **Thursday 12:30 – 5:00 pm** Affiliate Chair or their Designated Rep Luncheon/Meeting

### International Membership and Affiliation Task Force (IMATF)
- **Wednesday 9:00 – 12:30 pm**

### International Mentoring Committee (IMC)
- **Sunday 3:30 – 5:00 pm**

### ISO TC215-WG2
- **Friday 9:00 – 5:00 pm**

### Marketing Council
- **Monday 1:45 – 3:00 pm**
- **3:30 – 5:00 pm** Joint w/Education
- **Thursday 3:30 – 5:00 pm**

### Modeling & Methodology (MnM)
- **Sunday 1:45 – 5:00 pm**
- **Monday 9:00 – 3:00 pm**
- **3:30 – 5:00 pm** Hosting: PC
- **Tuesday 9:00 – 12:30 pm**
- **1:45 – 3:00 pm** Joint w/SD, ITS, Publishing V-3
- **3:30 – 5:00 pm**
- **Wednesday 9:00 – 10:30 am** Hosting: Voc
- **1:45 – 3:00 pm** Joint w/O&O
- **Friday 9:00 – 12:30 pm**

### Networking Reception
- **Wednesday 5:15 – 7:00 pm**

### Nurses Meeting
- **Tuesday 7:00 – 8:00 am** Breakfast 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 – 3:00 pm**
- **3:30 – 5:00 pm** Hosting: PC
- **Tuesday 9:00 – 10:30 am** Hosting: Pharm, PS
- **11:00 – 12:30 pm** Hosting: II, AP
- **1:45 – 5:00 pm**
- **Wednesday 9:00 – 10:30 am** Hosting: MnM
- **11:00 – 12:30 pm** Hosting: II, AP
- **1:45 – 5:00 pm**
- **Thursday 9:00 – 12:30 pm** Hosting: PS
- **1:45 – 3:00 pm** Joint w/CS
- **Friday 9:00 – 10:30 am**

### 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 3:30 – 5:00 pm**

### Patient Administration (PA)
- **Monday 9:00 – 10:30 am**
- **11:00 – 12:30 pm** Joint w/PS
- **1:45 – 5:00 pm**
- **Tuesday 9:00 – 10:30 am** Joint w/PS
- **11:00 – 12:30 pm**
- **1:45 – 3:00 pm**
- **Thursday 9:00 – 10:30 am** Joint w/50A
- **11:00 – 5:00 pm**

### Patient Care (PC)
- **Monday 9:00 – 12:30 pm**
- **1:45 – 3:00 pm** Joint w/MnM
- **3:30 – 5:00 pm** Joint w/O&O
- **Tuesday 9:00 – 3:00 pm**
- **3:30 – 5:00 pm** Hosting: PS
- **Wednesday 9:00 – 10:30 am** Hosting: CBCC, CIC, PHER, EC
- **11:00 – 12:30 pm** Joint w/EHR, PS, PHER
- **1:45 – 5:00 pm**

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**Powerpoint Slides:**
- Title: "Meeting Notes January"  
- Description: "Summary of activities and discussions from the January Working Group Meeting."
Thursday 9:00 – 10:30 am  MEETING
11:00 – 12:30 pm  Hosting: Templates
Friday 9:00 – 10:30 am  Joint w/Templates, Tooling

PATIENT SAFETY (PS)
Monday 9:00 – 10:30 am  MEETING
11:00 – 12:30 pm  Hosting: PA
1:45 – 5:00 pm  MEETING
Tuesday 9:00 – 10:30 am  Hosting: PHER
11:00 – 12:30 pm  Joint w/O&O, Pharm
1:45 – 3:00 pm  Joint w/RIM
3:30 – 5:00 pm  Joint w/PC
Wednesday 9:00 – 10:30 am  MEETING
11:00 – 12:30 pm  Joint w/EHR, PC, PHER
Thursday 9:00 – 10:30 am  MEETING

PHARMACY (PHARM)
Monday 9:00 – 5:00 pm  MEETING
Tuesday 9:00 – 10:30 am  MEETING
11:00 – 12:30 pm  Joint w/O&O, PS
1:45 – 5:00 pm  MEETING
Wednesday 9:00 – 10:30 am  MEETING
11:00 – 12:30 pm  Joint w/SD
1:45 – 5:00 pm  MEETING
Thursday 9:00 – 5:00 pm  MEETING
Friday 9:00 – 12:30 pm  MEETING

POLICY ADVISORY COMMITTEE
Wednesday 9:00 – 10:30 am  MEETING

PROCESS IMPROVEMENT COMMITTEE (PIC)
Thursday 9:00 – 10:30 am  MEETING

PROJECT SERVICES
Tuesday 1:45 – 3:00 pm  MEETING
Wednesday 12:30 – 1:30 pm  Project Facilitators’ Roundtable Luncheon
Thursday 1:45 – 3:00 pm  MEETING

PUBLIC HEALTH & EMERGENCY RESPONSE (PHER)
Monday 9:00 – 3:00 pm  MEETING
3:30 – 5:00 pm  Joint w/SD
Tuesday 9:00 – 10:30 am  Joint w/PS
11:00 – 12:30 pm  Joint w/AS, CDS
1:45 – 5:00 pm  MEETING
Wednesday 9:00 – 10:30 am  Joint w/PC, CBCC, CIC, EC
11:00 – 12:30 pm  Joint w/PC, PS, EHR
1:45 – 3:00 pm  Joint w/CDS
3:30 – 5:00 pm  MEETING
Thursday 9:00 – 3:00 pm  MEETING

PUBLISHING
Tuesday 1:45 – 3:00 pm  V3 – Joint w/SD, ITS, MnM
Wednesday 1:45 – 3:00 pm  V3 – MEETING
Thursday 1:45 – 3:00 pm  V2 – MEETING
Friday 11:00 – 12:30 pm  V3 – MEETING

REGULATED CLINICAL RESEARCH INFORMATION MANAGEMENT (RCRIM)
Monday 1:45 – 5:00 pm  MEETING
Tuesday 9:00 – 10:30 am  MEETING
1:45 – 3:00 pm  Hosting: PS
3:30 – 5:00 pm  MEETING
Wednesday 9:00 – 5:00 pm  MEETING
Thursday 9:00 – 12:30 pm  Joint w/SD
1:45 – 3:00 pm  Joint w/SD
3:30 – 5:00 pm  MEETING

RIM BASED APPLICATION ARCHITECTURE (RIMBAA)
Monday 11:00 – 12:30 pm  MEETING
1:45 – 3:00 pm  Joint w/Tooling
Wednesday 7:00 – 9:00 am  MEETING
Thursday 9:00 – 10:30 am  MEETING

SAIF ARCHITECTURE PROGRAM UPDATE
Wednesday 3:30 – 5:00 pm  UPDATE

SECURITY (SEC)
Monday 1:45 – 5:00 pm  Joint w/CBCC
Tuesday 9:00 – 5:00 pm  MEETING
Wednesday 9:00 – 10:30 am  Joint/EHR
11:00 – 12:30 pm  Joint w/SA
Thursday 9:00 – 5:00 pm  MEETING

SERVICES ORIENTED ARCHITECTURE (SOA)
Monday 1:45 – 5:00 pm  MEETING
Tuesday 9:00 – 12:30 pm  MEETING
3:30 – 5:00 pm  MEETING
Wednesday 9:00 – 10:30 am  Hosting: ArB
11:00 – 12:30 pm  Hosting: Sec
3:30 – 5:00 pm  MEETING
Thursday 9:00 – 10:30 am  Hosting: PA
11:00 – 5:00 pm  MEETING
Friday 9:00 – 10:30 am  MEETING

STEERING DIVISIONS
Monday 7:00 – 8:30 pm  Domain Experts
Foundation & Technology
Structure & Semantic Design
Technical & Support Services

STRUCTURED DOCUMENTS (SD)
Monday 1:45 – 3:00 pm  MEETING
3:30 – 5:00 pm  Hosting: PHER
Tuesday 9:00 – 10:30 am  Hosting: Attachments
11:00 – 12:30 pm  MEETING
1:45 – 3:00 pm  Hosting: ITS, MnM, Publishing V-3
3:30 – 5:00 pm  MEETING
Wednesday 9:00 – 10:30 am  Hosting: Pharm
11:00 – 12:30 pm  Hosting: II
1:45 – 3:00 pm  MEETING
3:30 – 5:00 pm  MEETING
Thursday 9:00 – 10:30 am  Joint w/Voc, CGIT
11:00 – 12:30 pm  MEETING
1:45 – 3:00 pm  Hosting: RCRIM
3:30 – 5:00 pm  MEETING
Friday 9:00 – 12:30 pm  MEETING

TSC MEETINGS
Saturday 9:00 – 5:00 pm  MEETING
Sunday 5:15 – 6:30 pm  MEETING
Tuesday 12:30 – 1:30 pm  LUNCHEON MEETING

TEMPLATES
Thursday 11:00 – 12:30 pm  Joint w/PC
Friday 9:00 – 10:30 am  Hosting: PC, Tooling

TOOLING
Monday 1:45 – 3:00 pm  Hosting: RIMBAA
Tuesday 9:00 – 12:30 pm  MEETING
7:00 – 9:00 pm  RESOURCES FOR HEALTH FORUM
Thursday 9:00 – 12:30 pm  MEETING
Friday 9:00 – 10:30 am  Joint w/Templates, PC

VOCABULARY (VOC)
Saturday 1:45 – 5:00 pm  MEETING
Sunday 9:00 – 10:30 am  Joint w/MnM
11:00 – 12:30 pm  Joint w/AP
Thursday 9:00 – 10:30 am  Hosting: CGIT, SD
11:00 – 5:00 pm  MEETING
Friday 9:00 – 12:30 pm  MEETING

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 January 2, 2012 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 U.S. 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 January 9. 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, prepaid registrants will be notified via email. The registrant may select another tutorial or a full refund of the tutorial fee will be made. However, meeting registration fees will not be refunded.

**DRESS**
The dress code is 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.

**HOTEL INFORMATION**
HL7’s January Working Group Meeting will be held at the Hyatt Regency San Antonio on the Riverwalk.

**Hyatt Regency San Antonio on the Riverwalk**
123 Losoya Street
San Antonio, TX 78205
+1 (210) 222-1234 phone
+1 (210) 227-4925 fax

To reserve your room, the hotel has set up a special website registration process just for HL7 attendees. HL7 attendees should log on to https://resweb.passkey.com/Resweb.do?mode=welcome_ei_new&eventID=3316723 and simply follow the reservation instructions. 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. Room type will be available on the registration form, but it is only a request. Requests will be noted and are based on availability.

Alternatively, you can call +1 (888) 421-1442 for reservations. Be sure to mention Health Level Seven to receive the discounted room rate of $184 per night for single or double occupancy. These rates will be offered three days prior and three 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 December 26, 2011. Room rates are subject to all applicable state and local taxes in effect at time of check in.

For those making a reservation under the government rate of $106, log on to the same website and click GVT under Room Type. There are also a limited number of government rooms available at the discounted rate so reserve your room early!

**GROUND TRANSPORTATION AND PARKING**
The Hyatt Regency San Antonio is approximately 12 miles from the San Antonio International Airport.

**Taxi Costs**
From the airport—approximately $20 one way per car. Pick up is on the lower level of the airport.
Yellow/Checker Cab: +1 (210) 222-2222
Concord Cab: +1 (210) 444-2222
SA Trans is $14 one way or $24 round trip. Advanced reservations are not required for individuals, though recommended. +1 (210) 281-9900

**Parking**
The Hyatt Regency San Antonio offers self-parking as well as Valet parking for hotel guests in the Central Parking Garage located across the street from the main hotel entrance. Valet parking is available at the hotel’s front entrance. The garage features 300 hotel parking spaces, including (10) handicapped parking zones and has 6’9” clearance. A special rate of $16/per day for self parking is available for all HL7 attendees.

**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 reservations at a different hotel, HL7 risks falling short on its obligation, which translates in 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

First Name        Last Name
Title/Position         Organization
Address         City      State      Zip
Country        Telephone      Fax
Email         Nickname for Badge

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

2. Survey & Information

I am a/an:  
- Affiliate Chair
- Facilitator — Vocabulary
- HL7 Board Member
- Tutorial Speaker
- Facilitator — MnM
- Facilitator — Steering Division
- HL7 Work Group Co-Chair
- Facilitator — Publishing
- First-Time WGM Attendee
- Past Board Chair

I am a member of an HL7 International Affiliate, employee of an HL7 organizational member or member of another eligible organization (ASC-X12, AHIP, ASTM, CEN/TC 251, CHCf, CLSI, CHA, DICOM, GSI, IEEEB, HIE, IHTSDO, LOINC, NCPDP, NAACCR, OMG, The Health Story Project, WEDI) and eligible for the member rate. Please list affiliate or organization:

I am a full time student.

University attending:  Student 

Meal Requirements:  Diabetic Regular Vegetarian Other: 

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

- International Council Meeting (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 January 2, 2012 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.

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<th>Members After 1/2</th>
<th>Non-Members Before 1/2</th>
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Registrations for the meeting on-site can only be paid for in US currency.

Registrations sent 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, call Mary Ann Boyle at +1 (734) 677-7777. Please bring your confirmation materials to the meeting with you.
**Meeting Registration Form (continued)**

**Tutorial Fees:** Please register me for the following tutorials:

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

- [ ] Members
- [ ] Non-Members

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**CME Credit:**

CME credit eligible only to physicians. (Must complete one of the approved tutorials.)

- [ ] $25
- [ ] $25
- [ ] $25
- [ ] $25

**SUNDAY**

- [ ] Track 4 – Info. Forums: First-Time Attendees’ Orientation – **FREE TUTORIAL** (F1) — MUST SIGN UP to attend this tutorial (Please check the box.)
- [ ] Track 4 – Info. Forums: Organization & Process Orientation/Intro – **FREE TUTORIAL** (F2) — MUST SIGN UP to attend this tutorial (Please check the box.)
- [ ] Track 4 – Info. Forums: How to Design and Deliver an HL7 Tutorial – **FREE TUTORIAL** (F3) — MUST SIGN UP to attend this tutorial (Please check the box.)

**MONDAY**

**Morning Sessions**

- [ ] Track 4 – Info. Forums: First-Time Attendees’ Orientation – **FREE TUTORIAL** (F4) — MUST SIGN UP to attend this tutorial (Please check the box.)
- [ ] Track 2 – Version 3 and CDA: Intro to Version 2, Part 1: Control/Patient Administration (M1) $110
- [ ] Track 2 – Version 3 and CDA: Intro to Version 3, Part 1: Fundamentals (M2) $110
- [ ] Track 3 – Special Topics: Intro to Electronic Health Record (M3) $110

**Afternoon Sessions**

- [ ] Track 1 – Version 2.x: Orders and Observations (M4) $110
- [ ] Track 2 – Version 3 and CDA: Messaging (M5) $110
- [ ] Track 3 – Special Topics: Clinical Decision Support (M6) $110

**TUESDAY**

**Morning Sessions**

- [ ] Track 4 – Info. Forums: Organization & Process Orientation/Intro – **FREE TUTORIAL** (F5) — MUST SIGN UP to attend this tutorial (Please check the box.)
- [ ] Track 2 – Version 3 and CDA: Version 3 Data Types R2 (T7) $110
- [ ] Track 3 – Special Topics: Intro and Overview of the SAIFF Canonical Ballot (T8) $110
- [ ] Track 3 – Special Topics: Intro to Integrating the Health Enterprise (T9) $110

**Afternoon Sessions**

- [ ] Track 2 – Version 3 and CDA: Software Implementation (T10) $110
- [ ] Track 3 – Special Topics: Patient Care Coordination (T11) $110
- [ ] Track 3 – Special Topics: Standards for Interoperability (T12) $110

**WEDNESDAY**

**Morning Sessions**

- [ ] Track 4 – Info. Forums: How to Design and Deliver an HL7 Tutorial – **FREE TUTORIAL** (F6) — MUST SIGN UP to attend this tutorial (Please check the box.)
- [ ] Track 4 – Info. Forums: RIM Based Application Architectures Overview – **FREE TUTORIAL** (F7) — MUST SIGN UP to attend this tutorial (Please check the box.)
- [ ] Track 1 – Version 2.x: Version 2 Message Profiles and Conformance (W13) $110
- [ ] Track 2 – Version 3 and CDA: Intro to Clinical Document Architecture (W14) $110
- [ ] Track 2 – Version 3 and CDA: Advanced Application of Vocabulary (W15) $110

**Afternoon Sessions**

- [ ] Track 1 – Version 2.x: Version 2.6 Control Specialist Certification Test Prep (W16) $110
- [ ] Track 2 – Version 3 and CDA: Clinical Document Architecture Advanced (W17) $110

**THURSDAY**

**Morning Sessions**

- [ ] Track 4 – Info. Forums: Newly Elected Co-Chair Training – **FREE TUTORIAL** (F8) — MUST SIGN UP to attend this tutorial (Please check the box.)
- [ ] Track 2 – Version 3 and CDA: CDA Specialist Certification Test Preparation (TH18) $110
- [ ] Track 3 – Special Topics: Security Through Risk Analysis (TH19) $110
- [ ] Track 3 – Special Topics: HL7 Standards for Meaningful Use (TH20) $110

**Afternoon Sessions**

- [ ] Track 2 – Version 3 and CDA: CDA Consolidation (TH21) $110
- [ ] Track 3 – Special Topics: Personal Health Record (TH22) $110
- [ ] Track 3 – Special Topics: Publishing / Modeling Tools (TH23) $110

**Evening Sessions**

- [ ] Track 1 – Version 2.x: HL7 Version 2.6 Control Specialist Certification Test (TH24) $145
- [ ] Track 2 – Version 3 and CDA: HL7 CDA Specialist Certification Test (TH25) $145
- [ ] Track 2 – Version 3 and CDA: HL7 Version 3 RIM Certification Test (TH26) $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:**

**Name on Card:**

**Signature:**

January Working Group Meeting
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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<tr>
<td>Attachments</td>
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<td>Child Health</td>
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<td>Clinical Decision Support</td>
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<td>Clinical Genomics</td>
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<td>Clinical Interoperability Council</td>
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<td>Clinical Statement</td>
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<td>Community Based Collaborative Care</td>
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<td>Electronic Health Records</td>
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<td>Emergency Care</td>
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<td>Generation of Anesthesia Standards</td>
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<td>Government Projects</td>
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<td>Health Care Devices</td>
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<td>Imaging Integration</td>
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<td>Infrastructure &amp; Messaging</td>
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<td>Patient Administration</td>
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<td>Patient Safety</td>
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<td>Public Health &amp; Emergency Response</td>
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<td>Vocabulary</td>
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GS1 Education Session

**GS1 Education Session**  
**Wednesday, January 18, 2012 • 7:00 – 7:45 am**

Use of GS1 identification keys in healthcare processes such as documenting EHR or prosthesis registers.

Presenter: Christian Hay (GS1 Global Office)
San Antonio captures the spirit of Texas. Now the eighth largest city in the United States, the city has retained its sense of history and tradition, while carefully blending in cosmopolitan progress. The city has always been a crossroads and a meeting place. Sounds and flavors of Native Americans, Old Mexico, Germans, the Wild West, African-Americans and the Deep South mingle and merge. Close to twenty million visitors a year delight in the discovery of San Antonio’s charms.

For history buffs, San Antonio is a mecca. Native Americans first lived along the San Antonio River, calling the area “Yanaguana,” which means “refreshing waters,” or “clear waters.” A band of Spanish explorers and missionaries came upon the river in 1691, and because it was the feast day of St. Anthony, they named the river “San Antonio.”

The actual founding of the city came in 1718 by Father Antonio Olivares, when he established Mission San Antonio de Valero, which became permanently etched in the annals of history in 1836 as where 189 defenders held the old mission against some 4,000 Mexican troops for 13 days. The cry “Remember the Alamo” became the rallying point of the Texan revolution against Mexico. Located in the heart of downtown, today the Alamo is a shrine and museum.

Amidst the daily hubbub of the busy metropolitan downtown, sequestered 20 feet below street level, lies one of San Antonio’s jewels—the River Walk. These cobblestone and flagstone paths border both sides of the San Antonio River as it winds its way through the middle of the business district. The River Walk has multiple personalities—quiet and park-like in some stretches, while other areas are full of activity with European-style sidewalk cafes, specialty boutiques, nightclubs and gleaming high-rise hotels. The River Walk stretches for approximately two-and-a-half miles from the Municipal Auditorium and Conference Center on the north end to the King William Historic District on the south. Rio San Antonio Cruises, the river’s floating transportation system, provides a novel method of sightseeing and people-watching in downtown San Antonio.

Frank Tolbert, a noted Texas historian and journalist, once said, “Every Texan has two homes—his own and San Antonio.” After your visit to San Antonio, we hope that you will consider San Antonio your second home and return again and again to experience all the city has to offer.

Copy and photos courtesy of the San Antonio Convention & Visitors Bureau.