



FHIR Webinar

Grahame Grieve 4-Dec 2012

FHIR



Fast Health Interoperability Resources

Pronounced "Fire"

...insert your fire related joke here....



Why FHIR?



- Arose out of Fresh Look Taskforce: "What would interoperability look like if we started afresh"
- Existing standards are not a platform for the future:
 - V2 venerable, but old technology, self limiting
 - V3 thorough and correct, but not practical
 - CDA well established, but also limited in scope and difficult
 - Different approaches not reconciled

Why FHIR?



- Web search for success markers led to RESTful based APIs
 - Exemplar: Highrise (https://github.com/37signals/highrise-api)

Drafted a healthcare Exchange API based on this approach

This has grown into FHIR



Target Markets



- Classic in-institution interoperability
- Back-end e-business systems (financial)
- RHIO
- National EHR systems

- Social Web (Health)
- Mobile Applications





"Resources" are:

- Small logically discrete units of exchange
- Defined behaviour and meaning
- Known identity / location
- Smallest unit of transaction
- Represented in XML or JSON (or others)
- Addressed through HTTP or other methods





- Administrative Concepts
 - Person, Patient, Organization, Device, Facility
 - Coverage, Invoice, etc.
- Clinical Concepts
 - Allergy, Problem, Medication, Family History
 - Care Plan
- Infrastructure Functionality
 - Document, Message, Conformance/Profiling





Resources have 3 parts

- Defined Structured Data
 - ➤ The logical, *common* contents of the resource
 - Mapped to formal definitions/RIM & other formats
- Extensions
 - Local requirements, but everyone can use
 - Published and managed
- Narrative
 - Human readable (fall back)



Person



```
<Person xmlns="http://hl7.org/fhir">
  <name>
    <use>official</use>
    <family>Grieve</family>
    <given>Grahame</given>
    <given>David</given>
  </name>
  <telecom>
    <system>email</system>
    <value>grahame@healthintersections.com.au</value>
    <use>work</use>
  </telecom>
  <gender>
    <system>http://hl7.org/fhir/v2-0001</system>
    <code>M</code>
    <display>Male</display>
  </gender>
  <deceased>false</deceased>
  <extension>
    <url>http://nehta.gov.au/Indigenous-Status</url>
    <valueCode>1</valueCode>
  </extension>
  <text>
    <status>generated</status>
    <div xmlns="http://www.w3.org/1999/xhtml">
     <a href="mailto:grahame@healthintersections.com.au">Grahame Grieve</a>
    </div>
  </text>
</Person>
```





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Using Resources



- Classic HTTP RESTful approach
 - Simple approach led by Facebook, Twitter, etc.
- Atom (RSS feed standard)
 - Use Atom to "bundle" resources
 - Pub/sub framework, Multi-resource Transactions
 - Messages (v2-like), Documents (per CDA)
- Custom Services / SOA
 - Same content
 - Same base rules



The Specification



- Introduction
 - Background, basics, framework
- Implementation
 - > HTTP, conformance, JSON, etc.
- Resource Definitions
 - Actual logical definitions of resources and their behaviour



1.0



Version v0.07 - Under Development

Introduction

Roadmap
Resource Format
Data Types
Using Codes
Extensibility
Resource Profiles

<u>Implementation</u>

REST (HTTP)

Messaging

Documents

Errors & Warnings

hData Integration

Atom Feeds

JSON format

Value Set

Conformance

Security

Resources

Agent Animal Coverage Device Group

Welcome to FHIR



Fast Healthcare Interoperability Resources (FHIR) defines a set of 'resources' to represent health and healthcare administration-related information. These resources express granular clinical and administrative concepts that can be electronically exchanged in order to quickly and effectively solve system interoperability problems in healthcare and related processes. The resources cover the basic elements of healthcare - patients, admissions, diagnostic reports, medications and problem lists - with their typical data elements and also support a range of richer and more complex clinical models. The simple direct definitions of the resources are based on thorough requirements gathering, formal analysis and extensive cross-mapping to other relevant standards.

Useful Links 1.0.1

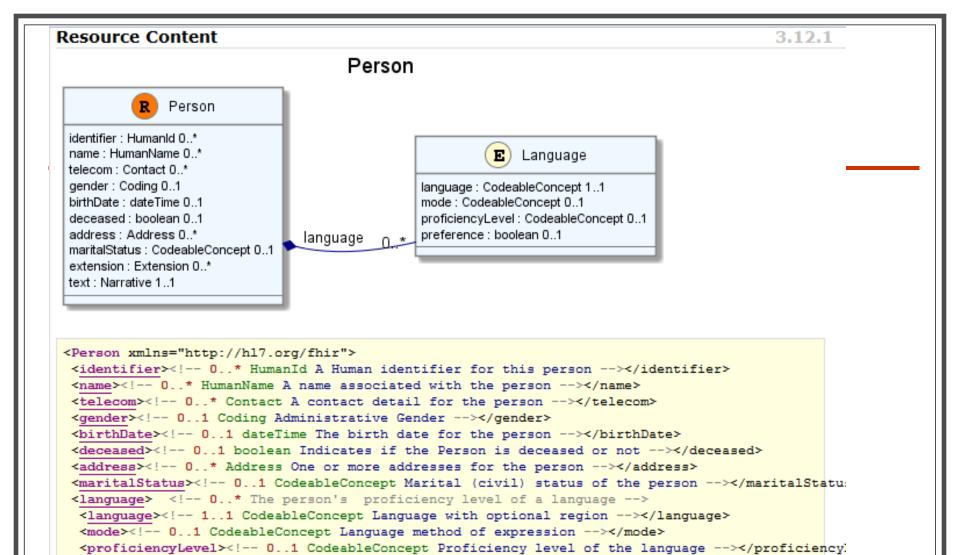
- . If this is your first time here, read the Roadmap / Introduction
- In addition to this web site, you can download <u>a zip of the whole specification</u> for offline use, or access the book form
- Get a list of the <u>resources defined by FHIR</u>, or see the <u>full table of contents</u>
- FHIR Schemas & Schematrons, XML Examples and JSON examples
- Reference Implementations & processable definition formats
- FHIR wiki home for the FHIR development team
- Publicly Available Test Servers

Ballot Notes for FHIR Draft for Comment ballot

1.0.2

At present, the FHIR specification is undergoing HL7 hallot (Draft for comment round 2).





Alternate definitions: Schema/Schematron, RDF (to do), XML, XMI (to do), Resource Profile

<extension><!-- 0..* Extension See Extensions --></extension>

<!-- 0..1 boolean Language preference indicator --></preference>

<text><!-- 1..1 Narrative Text summary of resource (for human interpretation) --></text>

</language>

</Person>



Ethos



- Simplicity / Web alignment
- Implementation focused
 - Reference Implementations published
 - Publically available test servers (now)
 - Connectathon
- Freely available
 - http://hl7.org/fhir
 - Unencumbered free for anyone to use



License



FHIR License 1,0,3

FHIR plain English license:

- FHIR is © HL7. The right to maintain FHIR remains vested in HL7
- You can redistribute FHIR
- You can create derivative specifications or implementation-related products and services
- Derivative Specifications cannot redefine what conformance to FHIR means
- You can't claim that HL7 or any of its members endorses your derived [thing] because it uses content from this specification
- Neither HL7 nor any of the contributors to this specification accept any liability for your use of FHIR



Collaborations



- IHE
 - investigating use of FHIR for MHD (mobile XDS)
- DICOM
 - interested RESTful access to image metadata
- W3C
 - Semantic health group helping us with RDF
- Lots of work to be done



Future Plans



- 2nd Draft for comment open now
 - Infrastructure very solid (implementation focus)
 - Definitions & Mappings need work
 - Resource coverage needs to broaden
- Next ballot cycle DSTU grind starts
 - Publish FHIR as full DSTU
 - Testing, real world implementation experience



Next Steps



- Read the spec: http://hl7.org/fhir
- Follow #FHIR on Twitter
- Shape the specification:
 - Make Ballot comments
 - ➤ Join the FHIR email list

 http://wiki.hl7.org/index.php?title=FHIR email list subscription instructions
 - Try implementing it
 - Come to the Connectathon!
 - Come to the next meeting (Phoenix in January)

Webinar



Questions....

http://hl7.org/fhir

