“I am only one, but I am one. I cannot do everything, but I can do something. And I will not let what I cannot do interfere with what I can do.”

— Edward Everett Hale

Technical Steering Committee
Ken McCaslin, FHL7
HL7 TSC Chair

Presented by
John Quinn
HL7 CTO

“Man never made any material more resilient as the human spirit.”

— Bernard Williams
Topics

- Advancing ideas in undiscovered areas
- Improving on our ballot process
  - Piloting new reconciliation process
  - Piloting new name conventions for ballots
- Developing better relationships across SDOs
Advancing Ideas

- Project Scope Statement Lite
  - Lower bar for approval by the Work Group, Steering Division and TSC
  - Few requirements than a fully developed PSS
  - Limited life – two trimesters before expiring
  - Intended to provide a vehicle for project discovery to determine requirements, potential duration needed to complete, who might need to participate, and who might be co-sponsoring work groups
  - PSS would need to be updated and approved by WG, SD and TSC
  - Intended for the exploration of work items before the concept is fully defined
Improving the Ballot Process

- Review of existing ballot function to determine how to improve the process
  - Completed peer review of process to be used by FHIR during the May 2015 ballot
  - Intend to have a more seamless ballot process across multiple Work Groups
  - 6-8 month pilot with FHIR as the lead reviewer

- Expanded ballot naming convention to facilitate better names relative to product Family/Line
SDO Relations Work Group

- Under Technical and Support Services Steering Division (T3SD) formed Health Standards Integration Work Group (HSI)
  - Mission: provides a point-of-focus within HL7 for coordination, facilitation and standardization activities that include integration with non-HL7 groups and standards components.
  - Reason for this group: Areas of collaboration may not be recognized and tracked.
  - Intent: Provide the ability to help SDOs with the HL7 processes.
“The best and most beautiful things in the world cannot be seen or even touched – they must be felt with the heart.”

— Helen Keller

Questions?
HL7 and Lab Meaningful Use

Interconnect between
Laboratory Orders Interface Implementation Guide (LOI IG)
Electronic Directory of Service IG (eDOS IG)
Laboratory Results Interface IG (LRI IG)
Directory of Service

- Drives the order for lab services by providing critical information about the lab tests
  - Full upload of all services provided by the lab
  - Incremental updates post full upload to reduce the updates needed
- Provides the clinician diagnostic information about the outcome of the test
  - Usefulness against proposed diagnosis code
  - Lists components of the test and conditions for collecting specimen
  - Defines critical data that must be collected to support the requirements of testing
  - Patient requirements prior to specimen collection
- Provides the phlebotomist specimen requirements and specimen transport information
- Automation will help clinician to upload updates from the lab
Laboratory Orders (LOI IG)

- Using eDOS IG to drive consistent and reliable data gathering of critical patient data to support timely reporting of lab results
- Establishes critical link between the lab order and the lab results electronically
- Improved cross industry work flow with all labs and EHR using the same implementation guides
- Certification by NIST enforce behaviors between the lab and EHRs
Laboratory Results (LRI IG)

- With LOI IG, improved interoperability helping bridge the gap of concise patient identification using electronic capture between disparate systems
- Consistency between LOI, LRI and eDOS IG create reliable interoperability guidance across all IGs
- Consistent conformance parameters provide implementers with reliable outcomes across all IGs

The only thing worth measuring: RESULTS.
“The best and most beautiful things in the world cannot be seen or even touched – they must be felt with the heart.”

— Helen Keller

Questions?