



Health Level Seven, Inc.

For Immediate Release

Contact: Andrea Ribick
+1 (734) 677-7777
andrea@HL7.org

HL7 Announces Industry's First Electronic Health Record System (EHR-S) Functional Requirements Standard for Child Healthcare

New standard identifies functionality required of EHR systems used to care for children

Ann Arbor, Michigan, U.S.A.—January 8, 2009—Health Level Seven (HL7), a preeminent healthcare IT standards development organization with broad international representation, today announced it has passed the healthcare industry's first ANSI-approved standard that specifies the basic functional requirements for child healthcare in an electronic health record system (EHR-S). The HL7 Child Health Functional Profile for EHR systems is based upon the HL7 EHR System Functional Model, which is also an ANSI-approved American National Standard.

The purpose of the Child Health Functional Profile is to define the general pediatric functions critical for electronic health record systems that are used to care for children in the United States. Five major functional topics are addressed that are essential for an EHR system used to care for children including immunization management, growth tracking, medication dosing, data norms and privacy.

The HL7 Child Health Work Group (Child Health WG) developed the Child Health Functional Profile, and over the course of four years, worked to identify and refine a broad list of functions required of EHR systems for the care of children. Because one-third of the U.S. population are children, and more than half of those children visit clinicians in settings other than pediatric offices, the Child Health WG believes it is important to ensure the HL7 EHR System Functional Model include functionality critical for child healthcare. Although many of the functions identified by the Child Health WG are included in the EHR System Functional Model standard, the creation of the Child Health Functional Profile was necessary to further define and provide the essential pediatric functions critical for EHR systems that are used to care for children in the United States.

"The intent of the Child Health Functional Profile is to assist all child medical providers and associated IT vendors in helping to ensure safe, effective and reliable care of children through the safe and effective use of information technology," said Andrew Spooner, MD, FAAP, chief medical information officer at Cincinnati Children's Medical Center and co-chair of the HL7 Child Health WG.

“As vendors develop EHR systems for the care of children they will want to conform to the Child Health Functional Profile, in order to better equip clinicians in any setting to care for children.”

The Child Health Functional Profile is already valued and being used in the healthcare industry. The Alliance for Pediatric Quality, which includes the American Academy of Pediatrics, The American Board of Pediatrics, Child Health Corporation of America and National Association of Children’s Hospitals and Related Institutions, strongly supports the work of the HL7 Child Health WG and the Child Health Functional Profile and views the profile as critical in advancing pediatric applications of technology.

It is also a key resource for the Child Health Work Group within the Certification Commission for Healthcare Information Technology (CCHIT) as the group works to define new child health certification criteria for EHR systems. “CCHIT congratulates HL7 in achieving formal approval of its Child Health standards,” said Mark Leavitt, MD, PhD, chair of CCHIT. “The HL7 standard for EHR systems has been extremely valuable to us, providing the starting framework for CCHIT’s development of certification criteria. CCHIT and HL7 provide a good example of effective collaboration between different organizations, as we all work toward the goal of accelerating the adoption of robust, interoperable health IT.”

An HL7 Child Health Functional Profile work group convened in March 2007, and currently includes twenty-eight physicians, nurses, pharmacists, medical informatics experts, and representatives from the vendor community. This work group has identified the additional EHR system functionality necessary to care for a child age 0-18 who receives routine wellness and preventative, acute illness, or acute trauma care that takes place in the following areas: the newborn nursery, the primary care provider’s office, the emergency room or urgent care clinic, and the inpatient hospital setting. In addition, the profile also supports ambulatory and inpatient hospital care for common chronic pediatric diseases such as asthma, sickle cell disease and diabetes, as well as those with unusual social situations such as foster care, divided homes and state custody.

About HL7

Founded in 1987, Health Level Seven, Inc. (www.HL7.org) is a not-for-profit, ANSI-accredited standards development organization dedicated to providing a comprehensive framework and related standards for the exchange, integration, sharing, and retrieval of electronic health information that supports clinical practice and the management, delivery and evaluation of health services. HL7’s more than 2,300 members represent approximately 500 corporate members, which include more than 90 percent of the information systems vendors serving healthcare.

HL7’s endeavors are sponsored, in part, by the support of its benefactors: Accenture; Booz Allen Hamilton; Centers for Disease Control and Prevention; Duke Translational Medicine Institute (DTMI); Eclipsys Corporation; Eli Lilly & Company; Epic Systems Corporation; the Food and Drug Administration; GE Healthcare Information Technologies; GlaxoSmithKline; IBM; Intel Corporation; InterSystems Corporation; Kaiser Permanente; Lockheed Martin; McKesson Provider Technologies; Microsoft Corporation; NHS Connecting for Health; NICTIZ National Healthcare; Novartis; Oracle

Corporation; Partners HealthCare System, Inc.; Pfizer, Inc.; Philips Healthcare; QuadraMed Corporation; Quest Diagnostics Inc.; Sanofi-aventis R&D; Siemens Healthcare; St. Jude Medical; Sunquest Information Systems; Thomson Reuters; the U.S. Department of Defense, Military Health System; and the U.S. Department of Veterans Affairs.

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For more information on the Alliance for Pediatric Quality, visit www.kidsquality.org

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