Structured Document WG
Minutes 2015 Oct WGM
(Attendance Sheets are attached at the end)

Monday
Q3 - SDWG minutes

- Agenda Items
  - Update on relevant and penitent project
    - Moved into engagement phase, reaching out to professional org.
    - 2 surveys:
      - Shorter version: for physicians (prof societies to send that) - Bob Dieterle
        - Short survey is done, feedback to be incorporated into survey before it’s sent out.
        - Solicit info for data segmentation.
        - 1 society provided feedback (AAFP-American Academy of Family Practice)
        - ACP not yet back
        - AMIA (currently reviewing)
      - Longer version: for SDOs, HIMSS, implementation groups at AMIA - Keith Boon
        - Survey feedback is done, ready to be distributed
        - Survey closes at end of Nov 2015
        - Need to get results to end of December 2015, and at least 1 month for data analysis.
        - Goal: summarize feedback before May 2016 HL7 ballot cycle.
  - Agenda items review and update (see SDWG Agenda for Atlanta Oct 2015 for details)
    - Admin
      - Relevant and Pertinent
      - upcoming ballots
      - update on current ballot - number of comments and planned ballot reconciliation
      - C-CDA R2.1 Update and IG built on
      - EU-US CDA Project Update
  - Update on INTERPAS PSS
  - Ballot comments (HAI implementation Guide)
    - discussion and resolution of ballot comments on document: CDAR2_IG_HAIRPT_R3_D1_2015SEP_AMALGAMATED.xls
    - Walkthrough Summary Data Section (ARO)(V2)
    - Comments 1-6 voting:
      - Motion: Gay, Second: Sarah
        - For: 16, Against: 0, Abstain: 0

Refactoring the NHSN HAI CDA IG
  - Dan Pollock and Sarah Gaunt gave and overview of HAI and the troubles navigating a guide of this size and complexity.
  - Outlined strategy for having informative appendices as separate subset documents that are use case specific to make it easier for implementers to understand the requirements for a specific use case. Will also make it easier to cite these subsets in federal regulations.
  - Question about whether informative documents are acceptable for citation. Dan P. noted that the federal government allows that. Also noted that the informative docs simply duplicate what is in the normative spec, just present it in a more manageable
way. They are informative because the actual source is in the big normative document, not the informational subset.

- This is considered a short term solution. Long term plan is to move to an online format (HTML) that is similar to how FHIR is published and balloted, though this would likely not happen until the Fall ballot cycle at the earliest.
- Modified the project scope statement to adjust the dates, remove mention of the VAE event time, and note that informational appendices for specific event times may be included. Also changed from DSTU to Normative.
- Discussion about whether the whole IG is up for ballot since it is going normative. Answer is that generally yes, the entire IG will be up for ballot, with the possible exception of templates that have not changed since the last normative ballot.
- Motion to approve changes to scope: Rob Savage, 2nd by Sarah Gaunt. Vote: 0 oppose, 0 abstain, 13 for.
- Discussion about long term plan for online publishing. Agreed to explore the idea. Some concern on the tooling used for that work. In particular the lack of integration between the authoring tools and test tools.

Q4 - SDWG minutes

- Discussion and resolution of ballot comments on document: CDAR2_IG_PHMR_R1_N2_2015SEP.pdf
  - Ballot comment #95: PHM devices are identified using the IEEE system id.
    - Not persuasive: Motion: Brian Reinholdt, Second: Sarah Gaunt, For: 11, Against:0, Abstain:0
  - Ballot comment #43:
    - Draft with mod; the wording of template will remain "draft" until reconciliation is done and template is published. Motion: Brian, Second: Gay, For:11, Against:0, Abstain:0
  - Ballot comment #48:
    - Considered question answered; Motion: Brian, Second: Gay, For:11, Against:0, Abstain:0
  - Ballot comment #3:
    - Both ref ID and code might be used, but code is preferred over refid
      - Persuasive with mod: will revert back to numeric value only in translation/@code and/or code/@code elements. Ref_id may be used in @displayName.
        - Motion: Brian Second: Ben, For:10 Against:0 Abstain:0
  - Lisa N. Discussion on level of details in Human-readable versus Machine-readable parts of CDA.
    - Question: Should HR part always contain at least the level of details that are provided in MR part?
    - When entry relationship is:
      - COMP: HR content may contain all components from MR?
      - DRIV: HR always contains all components from MR
    - HR portion should contain all clinically relevant information from MR entries.
      - It’s also possible to create XSLT to render coded info "as-if narrative" in addition to the "true" narrative
    - We need to publish more guidelines on this topic.
Tuesday

Q1   JOINT with CQI (CQI Hosting)
As CQI is hosting, they have the official minutes from the meeting.
Interest about the DSTU life cycle

Other topics

Value set stewardship

QDM – Diagnosis and Encounter Diagnosis
Principle / Primary / Encounter / Billing

C-CDA

Category 3 – Brett

Discharge Disposition Code

Where is it officially documented – Is this the only mechanism – 696 comment

CQI – work group

QRA – created for end use, sending a filtered version of the document.
Don't send meaningless information for quality

Filter – IDP – source of QRDA 1 document – the patient did not meet the requirements

Pre-exclusion

Value set Stewardships

NLM – VSAC collaboration

Q2   Technical   JOINT with Vocab (Vocab HOSTING)
15 minute issue

Lisa – update about a project in structured documents / vocabulary
Personal Advance Care Plan Document
Update – request PPT from Lisa

Digitally share a patient sourced document, their care plan document
It is liked advanced directives, but more focused on the patient’s instructions about their goals.

The project has a short time line, they are working on the use cases, they will create a CDA IG, Vol1 , Vol2 – Dec ballot hoping to be published in May.

They need to complete this soon. Backward compatible, with C-CDA R2.1
Advance Directives / Care Plan authored by the patient
Leveraging prior C-CDA work, needing to take into account versioning issues.
Using existing best practices from the paper world. Lisa mentioned that they performed an analysis of existing paper documents in this area. This is a US Realm project.

Did you consider the patient summary document might have been a good source for your project?
Living will / Advance Directives - sort of content

Minutes above form SDWG
CDA R2.1 Vocabulary approach (including Vocabulary syntax)

ISO country codes 2 vs 3 character codes

Q3 Technical HOST ITS/MnM/Publishing/Tooling Minutes

CDA R2.1
  • CDA R2.1 Project Overview (See slides)
  • Use of Pre tag (See slides)
    Discussion: Australia used a style code for this instead for CDA R2.
    If everyone agreed to a style code, it could work. If we go down the path of using a style code,
    then we probably need to tighten up the guidance on use of certain style codes. Using style
code does allow the same solution to apply to both CDA R2.0 as well as CDA R2.1.
    Style code approach may lose white space if using XML processors (which strip whitespace).
    If style code approach is used, then white space needs to be preserved via non-breaking
    spaces, etc.
    May need to do a an assessment of the two approaches. Both look like there is a strategy for
    handling appropriately. We would like to get recommendations from implementers
    Action Item: Calvin to do an assessment of the two approaches (pre tag vs. style code).

CDA R2.1 Extensions:
Motion: Include previously identified sdtc namespace extensions in the CDA R2.1 schema. Flag
those extensions that have replacements as deprecated.
Moved: RGeimer/RDaniels
Vote: unanimous (31).

Web based publishing
[LNelson, SGaunt]
Shara

A quick overview for the web IG
Take a snap shot of the implementation guide and send it to others

Editor / Analyst
Discussion about notes not showing up identified as a bug.
Feedback

What was the final release of the RIM which was bound to data types 1.0 was 2.36 release.

Q4 Technical HOST FHIR
CDA/C-CDA Project updates and planning
Graham – waiting for him
  • Freezing – may need changes for how C-CDA on FHIR works
  • There might be some items that need to be added.

CDA on FHIR – update
The initial mapping work has been completed for Header
Those changes were factors into Core FHIR
Create a CDA Profile on top of FHIR
- FHIR Management Group
- Rick will follow-up with them on that.

C-CDA on FHIR
There are other co-sponsors involved. The initial phase was to do a mapping effort. It was done via the Argonaut Project. The required elements were mapped, there were some mays that need to be managed.

Review of the mapping work – google docs

SDWG – Wiki page – C-CDA on FHIR 1.1
- Full CDA Header mapping was skipped over.

The original scope of C-CDA on FHIR envisioned

FHIR 2.1

How are wrappers – they were placed in LISTS

Mappings from FHIR pre 2.0 and mappings

Need to build profiles for the C-CDA on FHIR.

Look at the update the project scope statement to map to C-CDA R2.1

Need to add a number of narrative sections
18 sections of 80+ sections were mapped

The quality on FHIR – need to consider their mappings

**Motion to update the dates on the PSS, to reference C-CDA 2.1**
**Rick, second Pete**
**Opposed – 0 abstains 0 For: 29 Motion passes**
Austin will amend the project scope statements

We will restarting the conference calls, a doodle poll will be sent out for a new time

HSI visitors second half on possible joint projects

One of the projects –

IHE Mobile Health Access profiles - 6 months
  - Document Reference and Document Manifest
  - Verify the minutes / and request clarifications
  - Austin / Calvin with TSC
  - PSS and working with the appropriate committees

CVS – guideline appropriate ordering profile

**FREEZING of RESOURCES**

FHIR DSTU 2.1
Structure Definition – SDWG has some concerns about complexity about slicing
Rick – discussion about profiling – reusable compositions
The discussion was on what to do, if an issues was identified and it was a show stopper in the modeling.
Composition – needs to be added to support stability.
Keith said he will be willing to wait a couple of months if there are any changes to the

Motion to freeze the Composition
Rick made, Keith second
Abstains: 2  Opposed 0  For 26 motion passes

Document Reference should remain frozen and Document Manifest should be made frozen.
Made by Keith, Second Rick
Opposed – 0 Abstain: 0 For: 27 motion passes

Q5    Technical    CDA R2.1 Wiki Editing Session (45 minutes)
Presentation / Demo / QA session on using WIKI to edit CDA R2.1
Presentation 30 minutes
Demo using WIKI for CDA R2.1 editing 15 minutes
Open Q&A
CDA R2.1 Team

Wednesday
Q1    Technical
JOINT with CQI (CQI Hosting) / split JOINT with PHER (PHER Hosting)

Q2    Technical
UDI Discussion
C-CDA Product planning and release management strategy
UDI
Terri Reed – Senior Advisor for Electronic Health Information
OO Update
2 reasons – UID implementation workgroup – Partric & Hans
Need co-sponsors – call from OO for partition
UID regulation
Device ID
Production Identifier
To adequately identify a device from acquitions to use
IMDRF – Final Document Dec 2013   - a set of attributes in the global identification database
There is other essential data
There are three different accredited issuing agencies – Scan and auto populate the files in applications
Transmit the UID and the relevant data in human readable format.

There is a date format - will HL7 harmonization the original date format

GUDID

Class 3 and Life sustaining devices will be in the database and APIs will be provided.

They are in the MU 3 – requirements

PPS – Conceptual Level – requirements
Number of projects –
CDA / templates C-CDA – need requirements level

Look at using the C-CDA Companion Guide as a way to provide guidance

**CDA Product Family planning (AKreisler)**

DSTU Management
Consolidated CDA

- DSTU Comments Page Vs Gforge Tracker
  Bug reports, feature requests

Patient Care – Simply enter them in all of 2.1

Substances and Products

Common Product Model – Austin

Create a project proposal – to manage the DSTU comments and changes to DSTU

**C-CDA R2.1 Update and IG’s built on C-CDA**

Discussion about Implementation Guides

Faced with trying to catch up.
CQI – ASCO – CDA R2.1
The C-CDA implementation guides are Ok
But implementations referencing templates –
Move the constraints - The schematron is wrong
The take away – to ensure

Shara will submit a DSTU comment – to the C-CDA R2.1 about the requirements to include two
templates IDs in the Header to indicate that the IG is seeking dual conformance to the C-CDA R1.1

We may need to include others from other project in the work team that will look at the issue.

**Q3 Technical**
Send Representatives Pharmacy
**Q4 Technical**
Send representatives to Patient Care

**Thursday Meeting Minutes**

**Q1 Technical Host Imaging**

- Harry: DICOM completed CDA IG for imaging reports, next gen DIR report (more advanced than what is in C-CDA). Wants to know the plan for C-CDA, how do we update DIR in C-CDA. Will HL7 endorse the DICOM created IG? Does SDWG have interest in this?
- Austin: Need to engage HQ for endorsement. SDWG has not identified a timeline for updating C-CDA yet. Patient Care has approached SDWG with other potential changes, now II, so at some point there will be pressure to do a major update.
- Harry: would like to know if SDWG would be interested in co-sponsoring a PSS for an updated Universal Realm DIR that would potentially have joint copyright with HL7 and DICOM.
- CDA and C-CDA on FHIR updates
  - Rick gave updates on C-CDA on FHIR, same content as Tuesday’s Q3 minutes.
  - Rick will email the co-chair list with doodle poll for call times.
- HAI ballot rec.
  - Ballot rec spreadsheet contains dispositions, so see that for results of discussion.
  - Comments for block vote: 7, 8, 9, 10, 11, 12
    - Sarah G. moved to vote. Rob H. second.
    - 0 opposed, 4 abstain, 10 for.
    - Reconciliation is done. Sarah will send ballot rec spreadsheet to the listserv for review, then schedule a vote on next Thursday’s call.
- PHMR ballot rec.
  - Ballot rec spreadsheet contains dispositions, so see that for results of discussion.
  - Comments 19, 20
    - Motion to vote by Benjamin F, 2nd by Gaye,
    - 0 opposed, 0 abstain, 9 for

**Q2 Technical**
**JOINT w/PC, Templates (PC Hosting)**

**Q3 Technical HOST FHIR**
Request from Clinical Statement for Joint session
Graham Grieve provided an overview of Profiling with FHIR for the Structured Documents WG

Discussion on FHIR Profiling for different document types (CBebe)
Existing CDA and constraining a FHIR document
More coordination with other committees
Use cases that overlap into other committees, more collaborative with other workgroups

FHIR for profiles or FHIR for specifiers.

Structure Definition
Conformance – server claims
Operation Definition / Search Parameters

Implementation Guide ← Value Sets + Structure Definition
Test Scripts – specifying tests

Structure Definition
Describe the underlying models
And for constraints

URL - the master reference

Mapping – 25 different specs

Differential
The differences between the constrained model
These lists are flat using a “.” Notation

Snapshot
A view of all the elements in use in the model
Element Definition

Rules about an element – every element has a specification

The element definition –
List of observations
Unroll the clones
Slices – different rules for each slice
Match to the constraints that match by the discriminator

**Q4 Technical Meeting Minutes**

Managing DSTU Comments for IG’s
- project proposal required
Consider using G-Forge Trackers
Tooling coordination – can anyone place a tracker item?
Or do they need to work with someone?

How to handle DSTU comments

That teams IG

Should we produce an errata release on what time basis?
Short term – errata release –

**Motion: Propose to Publish 1.1 / 2.0 – errata sheet, with changes identified and included in C-CDA 2.1. – Made by Brett, Second Ben**
Opposed: 0 Abstain: 0 For: 15 motion passes

It will be a second sheet – of the errata

Mid term
How do we manage the errata releases

Produce an errata release every Sept.
**Motion: Make an errata release every Sept, given there are errata**
Made Brett  Second Shara
Opposed: 0 Abstain: 0 For: 15 Motion Passes
Plan on Q4 ON Thursday to review the Errata and comments

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DAF Project – Constraint on FHIR for a series of resources that are high priority for MU. The project ended for DAF for 2.1. Opening up the time frame to make changes to DAF.

**Motion:** SDWG will co-sponsor the Data Access Framework DAF FHIR Profile.
Brett made, Rick second – Opposed 0 Abstain: 0 for: 15  Motion passes

Propose that we create clear statement for a go forward with David Tao, Brett, Austin, Gay

C-CDA Product planning and release management strategy
- Needs further work

**Friday**

**Q1 Technical**
Joint w/ Templates, EST, PC (Templates hosting)

(These are notes from Friday Q1 and not minutes)

Update of the Templates DSTU
During the summer, there were effective discussions about changes to the DSTU. The state machine was the topic of discussion. The outcome of the discussion will be in a release of the DSTU coming out later in the year.

Draft / Deprecated / Retired / other needs for state

DSTU – extending the timeframe for DSTU – US Realm Taskforce  → TSC discussion and possibly take to the SGB

A section contains an entry in CDA

Inclusion / tranclusion needs

Estimated delivery date – label conformance statements
Conformance statements
Connectalize the design

Should the item be 1..* for the display name of conformance statements

Update of the Art Décor – supports templating in various environments
R1.6 – released a few days ago. The underlying platform, major updates and applied to the tooling. XML database xForms environment.

Interesting questions – xpath expressions – 100 times improvement

Feature requests from the test base, most of them are related to the IHE Europe for their tooling and validation engine. Release 2.0 around next year.

Support of governance group, support of alerts, main editor will have all planned features. Support data sets, value set editor. There will be a press release.

They are investigating FHIR.
The state of Trifolia –
Lantana – template repository – (with out version controls)
Its focus is for implementation guide. It is not as robust as a business process registry.

It can support conformance on existing IGs, it has support for value sets.
Making progress 2.4.0 - they have done an implementation guide using HTML for the IG publication process.

As a forward looking capability – FHIR / CDA – the work bench will likely be moved forward to support FHIR and CDA implementation.
Shawn McAventa – is working on the tool.

There is a need to ensure that the tooling move forward together.
Public Health Case Report may be the first IG published in the US Realm.

Updates from the meeting and next meeting
The European templates are conformant to a standard view.

There are about 400 guides generated across Europe.

What happened this week -
Implementation Guide

Q2 Technical Atlanta 4 MEETING

CDA R2.1
Review of the CDA R2.0 in Europe based on 2010 – vs 2005 nillable in the consumable

RIM 2.35 Data Types R1

Language codes on CS not possible on RIM
0..1
Confidentially kind – value sets

Review in CDA R2.1 the changes needed in the RMIM and VISO files
Performed an XML diff on the CDA based on 2.35

A nice presentation on the changes that are needed to support the modeling of CDA R2.1 in RIM 2.35

Include the minutes

Next WGM – communication with domain committees
Can we leverage the meeting patterns that FHIR is using to work with the Domain Committees?

Discussion focused on the challenges in getting C-CDA 2.1 + in the future conformant with the domain committees, to deal with the changes that need to be brought into the C-CDA specification stack.

Proposal to define principles on how to accomplish this based on a set principles.
And define the scoping agenda
Structured Documents

Q3- Monday

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### Wednesday Attendance Sheet

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### Thursday Attendance Sheet

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**Structured Document Work Group**

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<tr>
<td>1</td>
<td>Erika Bode</td>
<td>Mayo Clinic</td>
<td><a href="mailto:erika.bode@mayo.edu">erika.bode@mayo.edu</a></td>
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<td>2</td>
<td>Peter Gibson</td>
<td>Midtown Medical Center</td>
<td><a href="mailto:peter.gibson@midtownmed.org">peter.gibson@midtownmed.org</a></td>
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<td>Lisa Nelson</td>
<td>Local, LLC</td>
<td><a href="mailto:lisa.nelson@localllc.com">lisa.nelson@localllc.com</a></td>
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<td>4</td>
<td>Brian Reinholt</td>
<td>LNT/PCHA</td>
<td><a href="mailto:brian.reinholt@lnt-pcha.com">brian.reinholt@lnt-pcha.com</a></td>
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<td>R. A. Hems</td>
<td>NCTIZ</td>
<td><a href="mailto:rahems@nctiz.com">rahems@nctiz.com</a></td>
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<td>6</td>
<td>Brett Meisner</td>
<td>River RK</td>
<td><a href="mailto:brett.meisner@riverrk.com">brett.meisner@riverrk.com</a></td>
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