Term Info

May 27, 2015

Rob Hausam, Carmela Couderc, Heather Patrick, Jos Baptist, Yongsheng Gao

1. Review and approve 20-May-2015 minutes:
   1. Minutes approved: Jos Baptist moved; Yongsheng Gao seconded. Against: 0, abstain: 1, in favor: 3
2. Action item review:
   1. Linda Bird invited to join a call to discuss IHTSDO Terminology Binding and Expression Constraints. 2100 UTC (5 pm EDT, 3 pm mountain, 11 pm Europe). When this call is scheduled IT WILL REPLACE the regular Term Info call. Wednesday July 1 has been proposed.
   2. Some movement with negation – related to Patient Care and FHIR allergy & intolerance domain. No solution yet on how to record ‘Patient is not allergic to X’ -
      1. Joe Kunisch not yet contacted regarding negation
   3. Term Info Wiki and Project Site information – Jos has been working on this and has learned that Term Info cannot be found on the HL7 site when searching for committees. You have to know that Term Info is in the Project section rather than in the Active Work Groups section. If you click on Term Info in the project section, the resulting URL looks like Term Info is a regular workgroup. If you search for terminfo you get lots of things that are not very useful. ACTION ITEM: Jos to ask HL7 to make TermInfo easier and more logical to find – after this we can dive into the content. We need to decide what we need to see – Jos constructing an inventory of what is available, and will propose changes. On the WIKI main page, there isn’t any listing for Term Info. So you have to use the search function – the search results are very confusing and disjoint. If you select ‘containing terminfo’ for the search result, you get results of 21 pages that have TermInfo in the title – lots of spaghetti like links that could benefit from some clean up. Lots of options. Mid-June target.
   4. Assertion Pattern: not active, although CDA frequently raising issues
   5. Executive summary/marketing document: planned for post DSTU
   6. 1-2 page summary for using SCT in CDA R2: planned for post DSTU; prioritized ahead of executive summary
   7. DSTU updates: not yet complete
3. Agenda items:
   1. How to represent examples:
      1. standalone examples:
         1. They are in pretty good shape – however the examples do not consistently use white space (for example before and after an equal sign ‘=’).
      2. in-line examples:
         1. The brackets might be confusing and mis-interpreted. At Jos’ suggestion, Rob researched the v2 standards for ‘formal’ references – v2 uses the blue color.
      3. DECISION : (note this might not be the blue that ends up in the document, but it will be a shade of blue). ACTION ITEM: Add to documentation conventions section and make changes
         1. STANDALONE: **Blue, Bold, with Courier New font WITHOUT WHITESPACE.**
         2. IN-LINE**: Blue, Bold with Cambria font WITH WHITESPACE.**
   2. How to represent hyperlink (internal and external): ACTION ITEM: Add to documentation conventions section and make changes
      1. Standard word default, underline (aligns with V2 standards)
   3. How to represent XML snippets?
      1. Leave as is
   4. IHTSDO Collaboration with FHIR/TermInfo document (sent upon request to Rob)
      1. Questioning scope of IHTSDO/HL7 FHIR Terminology Binding Collaboration document
      2. Issue with Appendix C – FHIR SNOMED Value Sets
         1. URLs are in the table, but they don’t work. They were built on a development branch of the FHIR standard, and once FHIR reached DSTU, the URLs changed. www.Hl7.org/fhir is the main page – but then you have to get to the right version
         2. ACTION ITEM: find out from FHIR Management Board - what to recommend to IHTSDO to use for a value set URL document reference. This issue applies to more than references in a specific IHTSDO document.
         3. Discussion: readers expected that this document describes how to approach SNOMED use in FHIR, but the links in the document (if correct) would resolve to value sets in FHIR that are *not* specified; in some cases there is a list of codes, in other cases a note that the code list is too long.
            1. Example: FHIR value set Administration-method-codes

This is a very long list of specific SNOMED codes without a value set definition – just a suggestion of where codes might come from. Questionable usefulness.

* + - * 1. Example: Approach site codes:

This value set is not expanded because there are more than 10,000 codes. No value set definition, just a suggestion of where codes might come from.

* + - * 1. General comment: Document does not address the topic of proper use of terminology in FHIR with regards to SNOMED CT.

2 groups need to address this issue:

HTA: for the procedural/political aspects (document not yet presented to HTA – hopefully on June 11 but unfortunately Jos will not be on that call)

TermInfo and Vocabulary. Jos belongs to both groups. The best way to use SNOMED in FHIR needs to be articulated/developed – keeping in mind that FHIR strives to define simple ways to implement. We need to provide advice for implementers on how to use the right value sets! The current draft document has some significant gaps. ACTION ITEM: Rob to put this topic on the next Vocab working group agenda.

Vocab Agenda item suggestion: IHTSDO/HL7 FHIR Terminology Binding Collaboration document: Issues and concerns.

Process issues: e.g. HTA not involved, is Russ H. involved (as Vocab IHTSDO liason),

Content issues: Vocabulary’s plan to address issues with vocabulary and FHIR, specifically with SNOMED CT

* 1. Goal:
     1. Rob would like to have a final version of the TermInfo document for qa review by next week.

1. Meeting adjourned at 10:40 EDT.