



# **Building Partnerships for Precision Medicine**

Presented by:

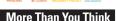
#### Gil Alterovitz, PhD and Charles Jaffe, MD, PhD

<sup>1</sup>Co-Chair, HL7 Clinical Genomics Workgroup and Lead, SMART on FHIR Genomics. Assistant Prof., HMS and CHIP@BCH.

<sup>2</sup>HL7 International Chief Executive Officer









Precision medicine is an emerging approach for disease treatment and prevention that takes into account individual variability in genes, environment, and lifestyle for each person.

#### The Problem



**More Than You Think** 

How do we enable Precision Medicine at point of care?

# Precision Medicine Initiative® Cohort Program RFA

Alterovitz G, et al. J Am Med Inform Assoc 2015;0:1–6. doi:10.1093/jamia/ocu045, Brief Communic

#### SMART on FHIR Genomics: Facilitating Standardized Clinico-Genomic Apps

RECEIVED 20 December 2014 REVISED 10 April 2015 ADCEPTED 18 April 2015

10 Gil Alterovitz<sup>1,2,3,\*\*</sup>, Jeremy Warner<sup>4,5,\*</sup>, Polijin Zhang<sup>6,\*</sup>, Yishen Chen<sup>7</sup>, Mollie Ullman-Cullere<sup>8</sup>, David Kreda<sup>2</sup>, Isaac S. Kohane<sup>1,2,3</sup>
ABSTRACT



Sacignound Supporting chimical decision august for presentation describe will require linking genome and phenome variants to a settient velocities with enteroil RFM, at lease in a value duel. Calcifornie data datastation will be neceded using the mix variet data are accessed from different sequencing systems.
Methods A secretation for the basis of a district-correct principle.

Heathcare interoperability Resources (PRIPP) standard, was developed. An HHRI application protocol interface (PRIP layer was attach to promising sequencing platforms and FRHs in order to expece gene valarist data for presentation to the end-sec. Three representative appa based on the SMARTI platform were built to test end-th-end feasibility, including integration of peromis and clinical data. Results Sourcestal design, deployment, and use of the Area demonstrated and adoptice by IAT Colled Revenices Workgrou Feasibility was shown through development of three apps by various types of users with background levels and locations.

conclusion this prototyping work suggests that an entirely data (and web) stan

Key words: genomics, data sharing, clinicogenomics, data warehouse, i2b2, SMART, FHIR, HL7, standards, EMR, EHR

Describe potential utilization of current and emerging standards to facilitate data exchange and analysis, such as:

- Standards for capture and representation of family health history such as SNOMED CT and Version 3 Implementation Guide: Family History/Pedigree for familial relationships.
- HL7 DIGITizE Actions Collaborative draft LOINC specification for pharmacogenomics.
- HL7 Clinical Genomics WG standards including CDA R2 Clinical Genetics Reporting Clinical Genomics Pedigree Model HL7 Genetic Testing Results Message (V2) and Clinical Sequencing Domain Analysis Model (DAM).
- SMART on FHIR Genomics standards to support development of clinico-genomic apps to communicate clinical genomics data between EHR systems.
- Open ID Connect, OAuth and UMA for individual authorization and authentication
- More complete authorization standards (e.g., IHE XUA, IUA, etc.) to ensure authorization standards are compatible across disparate networks.
- Global Alliance for Genomics and Health (GA4GH) standards to address computable consent for

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15, USA, ga@alum.mit.e

SMART on FHIR Genomics standards to support development of clinico-genomic apps to communicate clinical genomics data between EHR systems.

HET COMMUNICATION

# HL7 Standards: V2, V3, CDA, FHIR



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- V2- lots of implementations
- V3- nice models, few implementations
- CDA- document (V3-based, Reference Information Model)
- FHIR- lots of excitement, emerging standard, standard for trial use.

### **HL7 V2 Example from Institute of Medicine (IOM)**



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- People metabolize drugs at different rates based on genes (e.g. TPMT for Azathioprine, an immunosuppressant given to prevent transplant rejection)
- By determining TPMT activity, amount of drug given for particular patient can be optimized to reduce toxicity
- IOM guide stated how to communicate such results via HL7 v2 Observation (and gave pointers for how to do it in FHIR as well)

# DIGITizE: Displaying and Integrating Genetic Information Through the EHR

Establishing Connectivity and Pharmacogenomic Clinical Decision Support Rules to Protect Patients Carrying HLA-B\*57:01 and TPMT Variants

An Implementation Guide

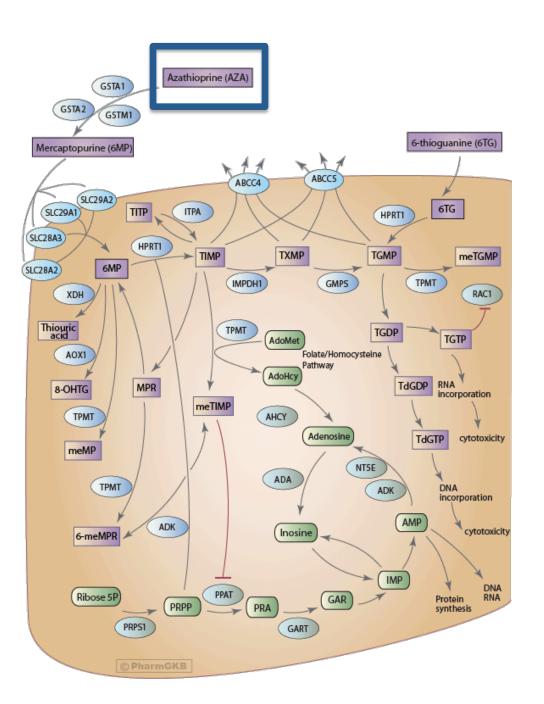
12/1/2015

Displaying and Integrating Genetic Information Through the EHR Action Collaborative (DIGITizE AC)



#### DIGITizE AC Participants

Sandy Aronson, Partners Health Care (co-chair) J.D. Nolen, Cerner (co-chair) Mark Adams, Good Start Genetics Gil Alterovitz, Harvard Medical School Brian Anderson, athenahealth Jane Atkinson, NIDCR Larry Babb, Partners HealthCare Dixie Baker, Martin, Blanck and Associates Gillian Bell, Mission Health Adam Berger, FDA Chris Chute, Johns Hopkins University Chris Coffin, Invitae Mauricio De Castro, U.S. Air Force Carol Edgington, McKesson Laurel Estabrooks, Soft Computer Corporation Robert Freimuth, Mayo Clinic Geoff Ginsburg, Duke University Jennifer Hall, University of Minnesota Stephanie Hallam, Good Start Genetics



#### TPMT Gene Product Metabolic Activity Interpretation

A new LOINC observation code, 79713-4: TPMT gene product metabolic activity interpretation, has been created precisely to support the requirement for the azathioprine use case. The details of the LOINC code follow:

Г	LOINC CD Component		Long Common Name	
	79713-4	TPMT gene product metabolic	TPMT gene product metabolic activity interpretation in	
		activity interpretation	Blood or Tissue Qualitative by CPIC	
L				

#### Part Definition/Description(s)

The TPMT gene product metabolic activity interpretation is determined by the reporting lab and returned with the structured test results. It indicates the lab's interpretation of the phenotype that meets the Clinical Pharmacogenetics Implementation Consortium (CPIC) guidelines for reporting TPMT gene product metabolic activity (phenotype), regardless of whether the lab assay's method was genetic or enzymatic. This specific interpretation would be considered a separate observation made by the lab in addition to the primary reported results (e.g., genotype or measured activity level) and it could be included with other assay-specific observations, which would ideally support the interpretation value. [https://cpicpgx.org/resources.html]

Answer List*						
	Seq #	Answer	AnswerlD			
	1	Ultrarapid metabolizer	LA10315-2			
	2	Rapid metabolizer	LA25390-8			
	3	Normal metabolizer	LA25391-6			
	4	Intermediate metabolizer	LA10317-8			
	5	Poor metapolizer	LA965/-3			

<sup>\*</sup>based on the CPIC Delphi Survey

For an Intermediate metabolizer TPMT gene product metabolic activity interpretation observation...

OBXIIICWE 79713-4^ TPMT gene product metabolic activity interpretation ^LN II LA10317

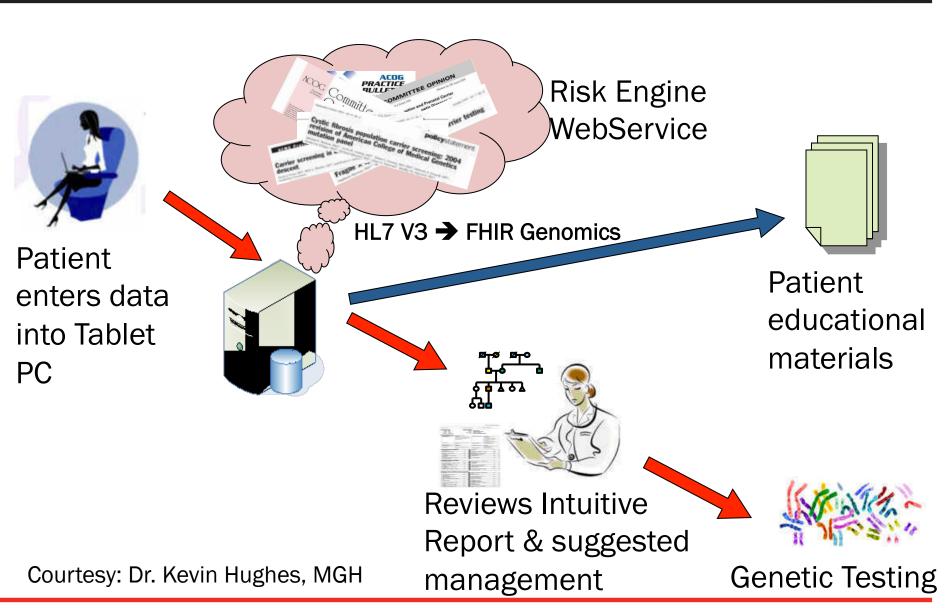


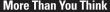
**V3** 

## **Hughes RiskApps:** Less work + CDS=Higher Quality



**More Than You Think** 







# Hughes RiskApps<sup>TM</sup>

#### Patient Lifestyle Question

English French Spanish Portuguese

#### **Cancer Risk Assessment**

hughes riskApps™

How many alcoholic beverages do you consume weekly?

5 - 9 drinks per week

None 5 - 9 drinks per week

Less than 1 drink a week 10 - 19 drinks per week

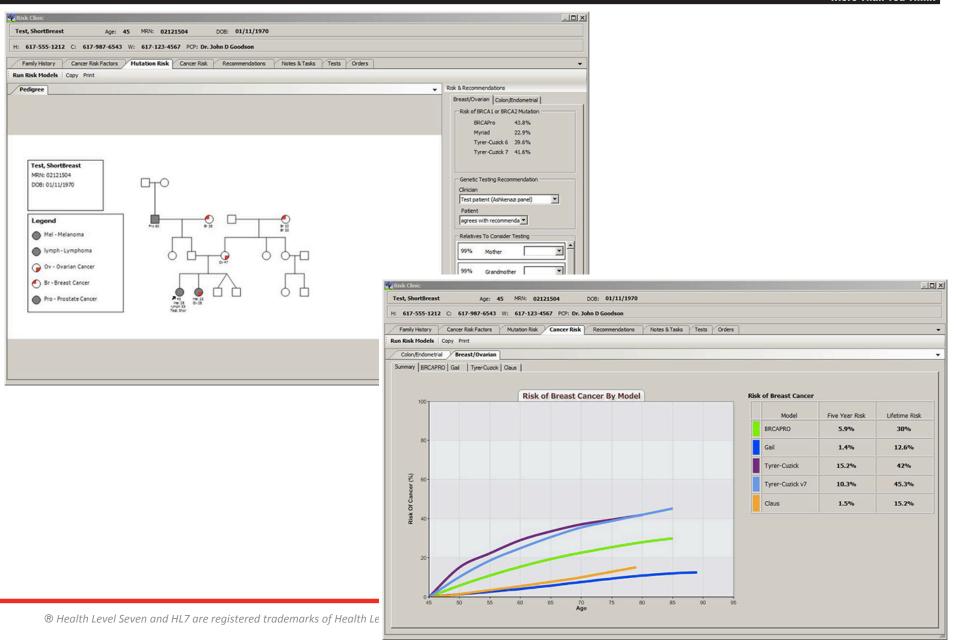
1 - 4 drinks per week More than 19 drinks per week

Clear

# Pedigree/Breast Cancer Risk



More Than You Think





# Clinical Document Architecture (CDA)

# **Genetic Test Report**



**More Than You Think** 

# Implementation Guide for CDA Release 2 Genetic Testing Report (GTR) (Universal Realm)



Draft Standard For Trial Use September 2012 CDAR2\_IG\_GENTESTRPT\_R1 (Developer Documentation)

# **GTR - Design Principles**



More Than You Thinl

- Follow existing report formats commonly used in healthcare & research
- Emphasize interpretations & recommendations
- Provide general background information on tests performed
- Reference HL7 Clinical Genomics instances (e.g., v3 or v2 GeneticVariation and Pedigree) as the place holders of full-blown raw genomic data and fullystructured family history data
- Utilize patterns of 'genotype-phenotype' associations in the HL7 v3 Clinical Genomics Domain
  - Implement them as 'clinical genomic statement' entry-level templates (see next slide), enabling meaningful use of the data

Courtesy: Amnon Shabo

#### **Genetic Testing Report**

```
[ClinicalDocument: templateId 2.16.840.1.113883.10.20.20]
```

The Genetic TestingReport is a document template and thus serves as the root template for the GTR Implementation Guide. Its organization is described in the Approach section of this document. The sub-sections residing here constitute the backbone of the GTR. Most of them share a common structure represented by the Test Details Section which serves as a blueprint for most of the test-oriented sections like genetic variation or gene expression sections.

- 1. SHALL contain exactly one [1..1] code/@code="51969-4" Genetic analysis summary report (CodeSystem: 2.16.840.1.113883.6.1 LOINC) (CONF-GTR-1)
- 2. SHALL contain exactly one [1..1] title (CONF-GTR-7)
  - Default title is "Genetic Testing Report".
- 3. SHALL contain exactly one [1..1] component, such that
  - a. Contains exactly one [1..1] Summary Section (templateId: 2.16.840.1.113883.10.20.20.1.1)
- 4. MAY contain zero or one [0..1] component, such that
  - a. Contains exactly one [1..1] Genetic Variations Section (templateId:

```
2.16.840.1.113883.10.20.20.1.2)
```

- 5. MAY contain zero or one [0..1] component, such that
  - a. Contains exactly one [1..1] Cytogenetics Section (templateId: 2.16.840.1.113883.10.20.20.1.4)
- 6. MAY contain zero or one [0..1] component, such that
  - a. Contains exactly one [1..1] Gene Expression Section (templateId:

```
2.16.840.1.113883.10.20.20.1.3)
```

- 7. MAY contain zero or one [0..1] component, such that
  - a. Contains exactly one [1..1] Other Testing Section (templateId: 2.16.840.1.113883.10.20.20.1.6)
- 8. MAY contain zero or one [0..1] component, such that
  - a. Contains exactly one [1..1] *Test Information Section* (templateId: 2.16.840.1.113883.10.20.20.1.9)
- 9. Sections and subsections SHALL have a title and the title SHALL NOT be empty.
- 10. All sections MAY occur in any order except for the SummarySection which SHALL appear first and TestInformationSection which SHOULD appear last. Note that a TestInformationSection can appear in each of the specific test sections.

# **SMART/FHIR Genomics**



**More Than You Think** 

### **SMART** on FHIR Genomics



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### **General Features:**

- FHIR clinical profiles aligned to MU2
- Patient record scope/authorization
- Authentication/Single-Sign on
- UI integration layer to launch within EMR

### SMART on **FHIR Genomics**

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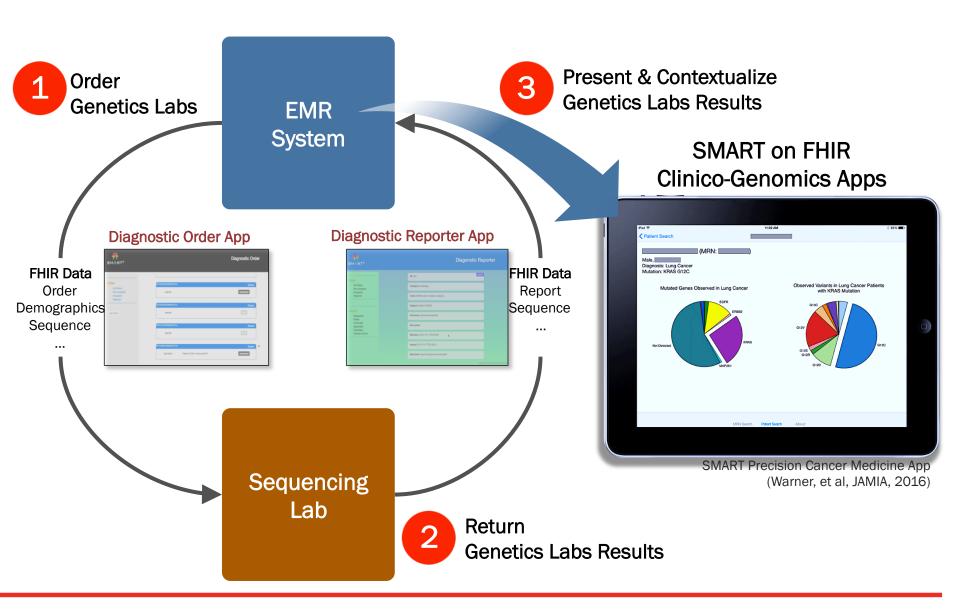
## **Genomic-Specific Features:**

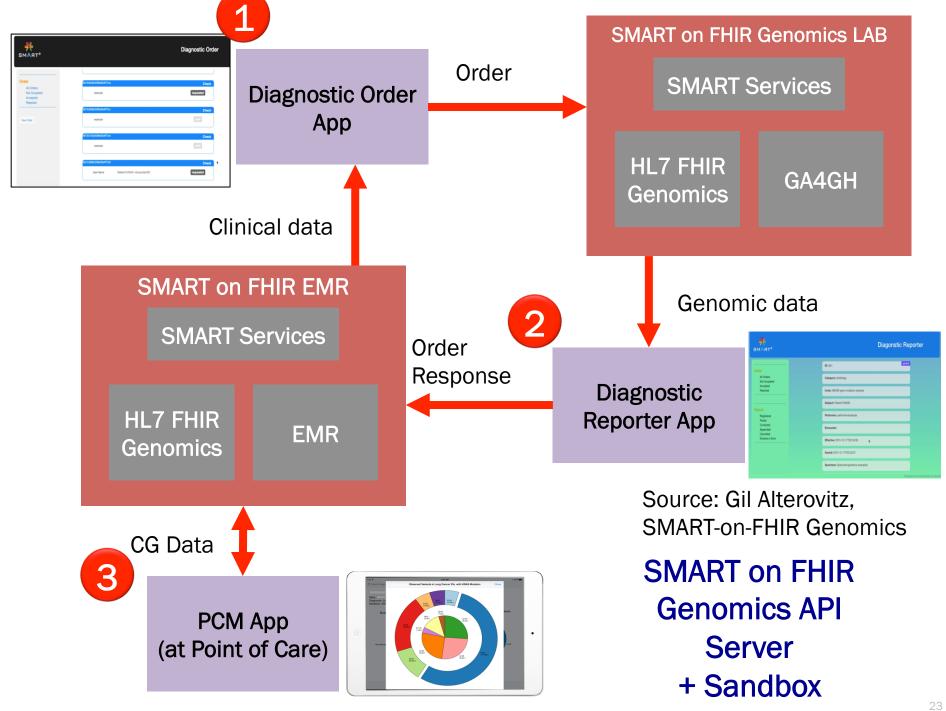
- Genomics integrated directly into clinical model
- First in FHIR DSTU 2.0, latest is tested FHIR Connectation 11 Build
- Profiles on standard FHIR resources plus new resource (Sequence)
- Enables EMR to obtain genetic results: both nonsequence and sequence-based.
- Search-optimized GA4GH/raw sequence data
- Genomic data shadowing/constraints/mappings

### **SMART on FHIR Genomics: Clinico-Genomic Apps**

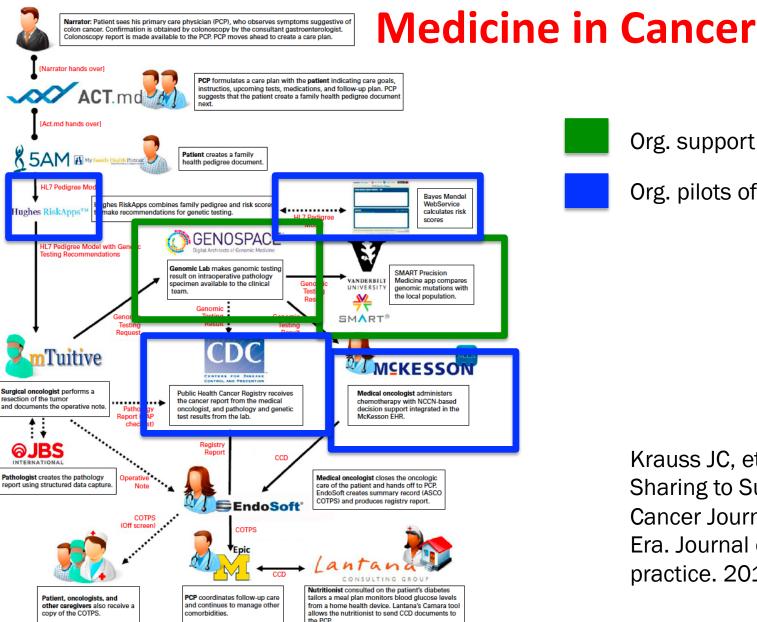


More Than You Think





# **SMART on FHIR Pilots for Precision**





Org. support SMART/FHIR



Org. pilots of SMART/FHIR

Krauss JC, et al. Data Sharing to Support the Cancer Journey in the Digital Era. Journal of oncology practice. 2016.

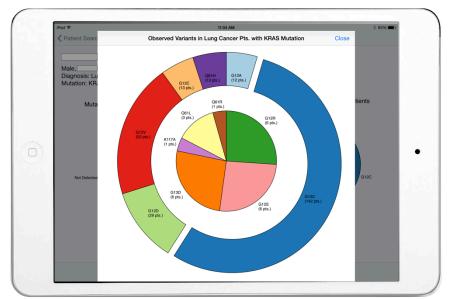
#### **DB** (Diabetes Bear) EMR App

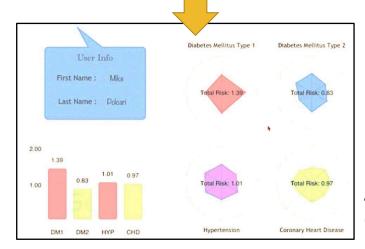
Alterovitz & Yang



#### **Precision Cancer Medicine (PCM) App**

Warner & Alterovitz



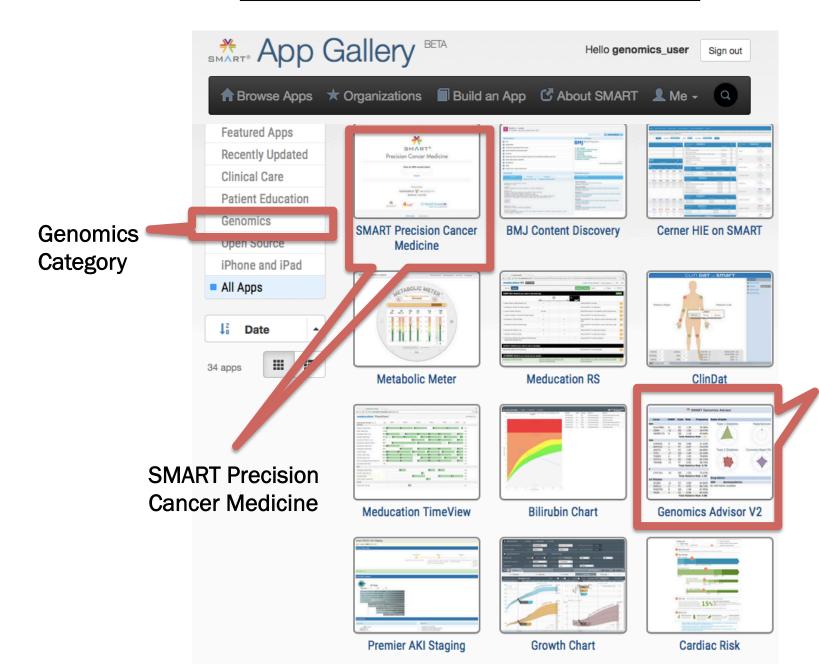


#### **Genomics Advisor App**

Alterovitz & Zhang



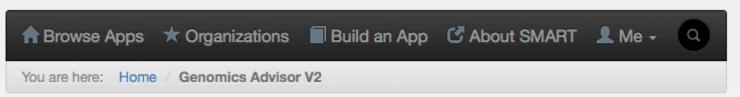
### https://gallery.smarthealthit.org



Genomics Advisor V2

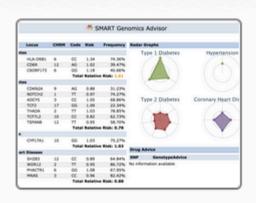


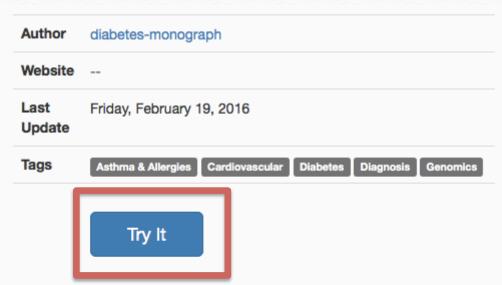




#### Genomics Advisor V2

#### https://gallery.smarthealthit.org





#### **App Description**

Diabetes and related diseases risk analysis.

#### **Related Apps**

Other apps by diabetesmonograph





#### HL7 Domain Analysis Model: Clinical Genomics

#### **HL7** Ballot

Sponsored by:

Clinical Genomics Work Group

CGWG co-chairs:

Gil Alterovitz, Siew Lam, Bob Milius, Amnon Shabo (Shao), Mollie Ullman-Cullere

Questions or comments regarding this document should be directed to Gil Alterovitz at ga@alum.mit.edu
or Mollie Ullman-Cullere at mollie.ullmancullere@gmail.com

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# Domain Analysis Model (DAM) for Clinical Genomics, Use Cases:

- 1. Specimen Identification
- 2. Clinical Sequencing (Germline)
- 3. Cancer Profiling (Somatic)
- 4. CDS (Family History and Drug Dosage Calculator)
- 5. Public Health Reporting
- 6. Clinical and Research Data Warehouses

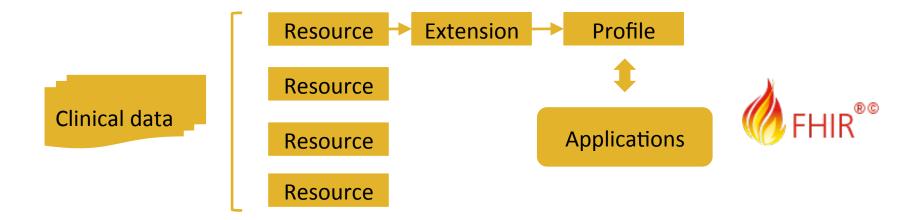
• • •

Alterovitz, et al., Domain Analysis Model: Clinical Genomics, 2016.

#### Fast Healthcare Interoperability Resources



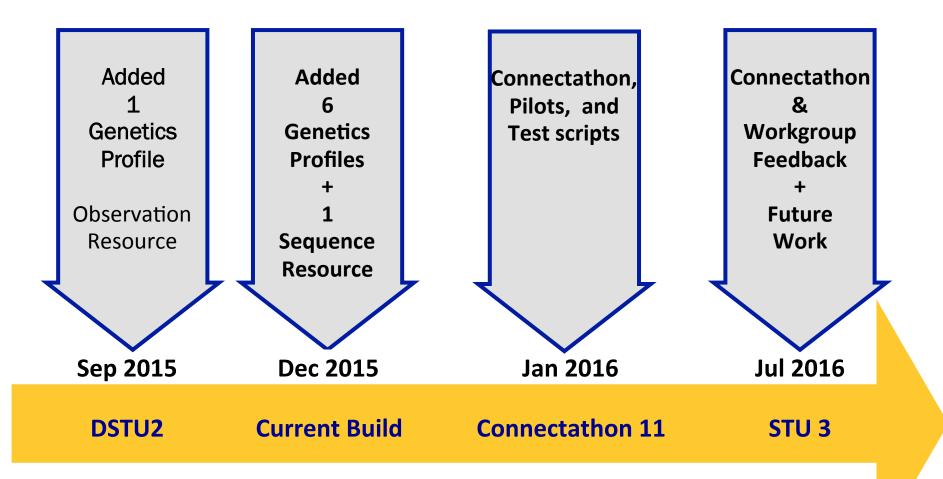
More Than You Think



Concise, easily understood specifications
Well-defined data model and API
Easy to implement
Modern (RESTFul API, JSON, Oauth)
Extensibile

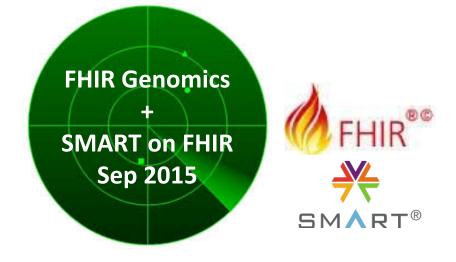
#### **FHIR Genomics Time Line**

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DSTU = Draft Standard for Trial Use STU = Standard for Trial Use





Recommendation	Actions to Advance
FHIR could be included as an emerging standard, especially for transport of data. Argonaut may provide opportunities to advance. Sample uses of FHIR: authorization; genetics, family health history, build on current work on SMART on FHIR Genomics <sup>1</sup>	Apply accelerators (e.g., S&I Initiative, pilot project, policy guidance) to existing standards by ONC

Recommendation	Actions to Advance
2016 PMI S&I: Additional ONC investment in pilots of FHIR for PMI research/individual data donation use case	Apply accelerators (e.g., S&I Initiative, pilot project, policy guidance) to existing standards by ONC

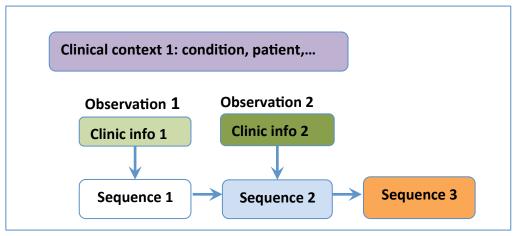
<sup>&</sup>lt;sup>1</sup> Alterovitz G, et al. SMART on FHIR Genomics: facilitating standardized clinico-genomic apps. JAMIA. 2015;22(6):1173-8.

# Integrated into Clinical Data Model and Workflow



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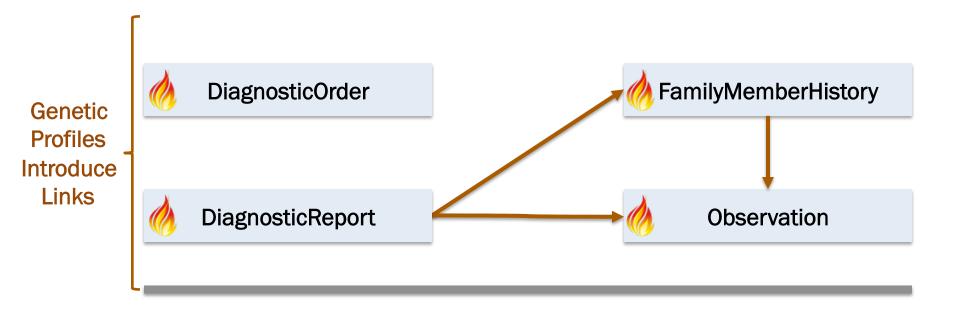
#### DiagnosticReport 1



### Genetics Test: Lab (Code) Only



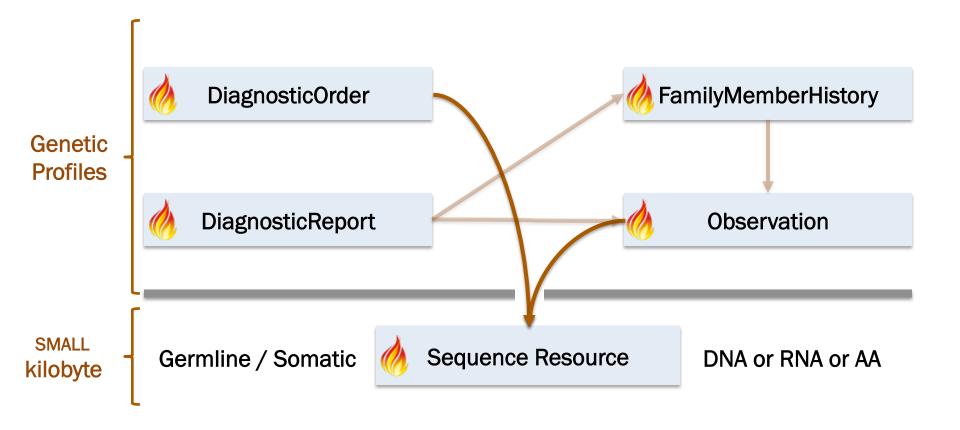
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### Genetics Test: Lab (Code) + Sequence Data



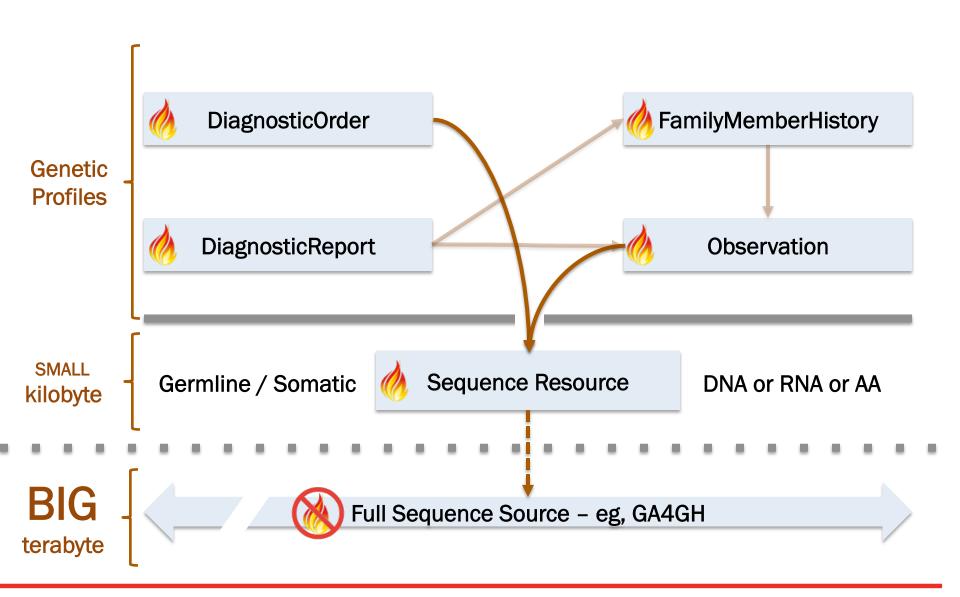
More Than You Think



#### Genetics Test: Lab (Code) + Sequence Data + External



More Than You Thin





# **Actively working on pilots**



#### **National and International:**

- MGH/Hughes RiskApps
- Cerner
- Intermountain
- GRIN (BCH/HMS, CHOP, Univ. of Cincinnati)
- Vanderbilt University
- National Marrow Donor Program / BeTheMatch
- Precision Link
- Genospace
- Allscripts/Nant Health
- Partners/GeneInsight/Medseq
- Hefei Institute of Technology in China
- Google (BCH/HMS)
- DNA Nexus/PrecisionFDA
- TBResist

### Global Alliance federated queries SMART on FHIR Genomics server:

- Stratified Medicine Scotland Innovation Centre
- UCSC
- Royal Melbourne Hospital & Biogrid Australia
- Beijing Institute of Genetics, Chinese Academy of Science
- EMC R&D
- Wellcome Trust Centre for Human Genetics
- Harvard/MIT
- Aridhia Informatics
- Australia- Health Intersections

### **Building Partnerships for Precision Medicine:**



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#### **FHIR Genomics Pilots**

#### 1. Pharmacogenomic clinic: Precision Link

 Precision Link is the first the exclusively Pharmacogenomic clinic in the world. It already has around 40 providers actively using it.

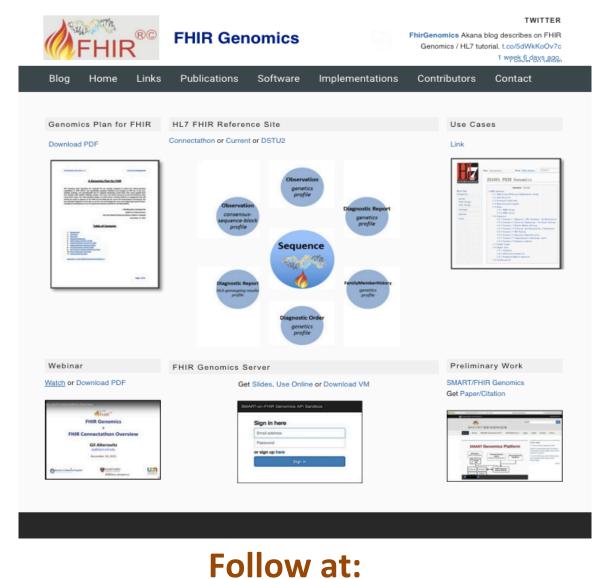
#### 2. Precision Medicine for global health: TBResist

 This effort combines clinico-genomic data from over 20 countries for diagnostics and therapeutics for drug resistant tuberculosis- to enable targeted patient approaches.
 Consortium also was founded by Dale Nordenberg (former CIO of CDC).

#### 3. Precision Medicine Cloud Computing: DNA Nexus/PrecisionFDA

DNA Nexus set up the precisionFDA portal (for testing genetic tests submitted to FDA)
and working on setting up FHIR Genomics server/apps on their platform.

### Fhirgenomics.org







@Fhirgenomics



#### Gil Alterovitz

## ga@alum.mit.edu

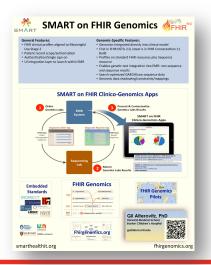
Follow at: @fhirgenomics



LinkedIn Contact:



#### Handout:



### Acknowledgments



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HL7 IOM eMERGE GA4GH IGNITE IEEE

#### **SMART on FHIR**

Ken Mandl, Isaac Kohane, David Kreda, Rachel Ramoni, Josh Mandel...

#### **SMART on FHIR Genomics**

Yao Hemming, Tom Chen, Peijin Zhang...