**AP WG CC**

2/12/2014 10AMET

## Attendees

JD Nolen, Cerner, co-Chair, notetaker for meeting

Jeffery Karp, CAP

Gunter Haroske, Krankenhaus Dresden-Friedrichstadt

Andrzej Knafel and Dymtro Rud, Roche

## Planned Agenda

1. Wrap-up from last WGM
2. Structured reporting leveraging HL7 Germany work
   1. Goals
   2. Next steps
3. Next steps on standard workflows
   1. Joint project with IHE and DICOM
   2. Tracking to official project by May WGM
4. Joint work, crosswalks, etc.
   1. CLSI 2D barcodes
   2. O&O specimen model
   3. CG stuff...biomarkers, clinically significant variants
5. Any other business

## Notes

Wrap-up from last WGM

JDLN reviewed the last WGM (minutes already posted). This was a quick review since most people on the call were in attendance (either in person or on the phone). He then gave a quick preview of the schedule for the next WGM in May in Scottsdale. Jeffery Karp asked about the potential for a wireless microphone for future meetings.

Action Items: JDLN will investigate getting a wireless microphone for future meetings.

Joint work/crosswalks, etc.

JDLN covered the following:

1. IHE AP call (2/11/2014)
2. CG-related projects (biomarker, clinically-significant variants)
3. Upcoming DICOM WG26 meeting in San Diego (March)
4. CLSI 2D barcode efforts for AP
   1. Points were raised about being able to extend the 2D concept to more than just AP
   2. Issues/capabilities were discussed about the potential need for multiple 2D barcodes to capture specimen data in one barcode and container/automation information in another (or more)

Action Items:

1. JDLN will keep in concert with IHE AP
2. Either Victor and/or JDLN will be at DICOM WG26.
3. JDLN will raise the need to include things beyond AP and multiple barcodes on the CLSI project

Structured Reporting

Gunter went through the latest from HL7 Germany on their work. Notes from Gunter (emailed to JD) are included below:

*Goal:*

*"Abstract away much of the complexity in the current IHE APSR out of the report and only retain the core required fields for reporting with the rules held within specific schemas".*

*Next steps:*

*"Evolution" of the IHE APSR*

*- retain basic structure*

*- make the nested structure more flat (e.g. referencing instead of nesting)*

*- make the specimen related parts closer to HL7 and/or DICOM, add value sets by pathology-specific items*

*- define "generic problems" and appropriate value sets*

*- develop and introduce generic models for reporting classifications, staging, grading, scores and assessment scales, adapt value sets*

*- develop a style guide for building terms for AP Observations (close to SNOMED CT).*

*It could become important that we all use a common collaborative platform as to keep informed each other and to avoid double activities. Although we have good experiences with a wiki for HL7 Germany, a more sophisticated tool should be preferred. How about ART-DECOR or Hl7gforge?*

The group agreed with the approach and the synergies with IHE.

Action Items:

1. The group to land on the best collaboration space (ART-DÉCOR, gforge, etc.) (decision due next CC)
2. JDLN will keep in sync with the IHE AP group on their efforts around the APSR (next IHE AP meeting in April)

Structured Workflows

Group covered the talk on this at the last WGM. All agreed that more stakeholders need to be engaged for this in the AP device space. This will be presented at the DICOM WG26 meeting in March. Also, the DICOM WG26 powerpoint with some proposed workflows will be posted to the wiki.

Action Items:

1. JDLN will post DICOM powerpoint…done
2. Group will reach out to other potential stakeholders

Wrap-up

Meeting closed and next conference call is planned for 2/26/2014 at 10AM Eastern.