



Essential Information for Children with Special Healthcare Needs

HL7 Patient Care Work Group
Update

Tuesday - 9/12/2017

Aim & Scope

- Design a clinical reference for children that require complex medical care (entering new environments)*
 - reuse existing elements (e.g., section templates)
 - medications
 - immunizations
 - allergies
 - problems
 - plan of care**
 - provide detailed contact information for primary and subspecialty health care providers
 - develop a model for contingency-based plan of care (personalized to an individuals need)
 - medical devices (e.g. tracheostomy, g-tube, etc...)

a.k.a.

- Personal Health Record...
- Portable Health Record....
- Emergency Information Form....
- ...for Children with Special Healthcare Needs

Example references:

- Emergency Information Form for Children with Special Needs (AAP/ACEP)
- Portable Health Record for Children, Youth or Adults with Genetic Conditions (Hawaii)
- CMS Form 485 Home Health Certification Plan of Care

Emergency Information Form for Children With Special Needs

American College of Emergency Physicians* American Academy of Pediatrics



Date form 1/1/97 completed. ByWhom J. Heavt, MD Revised 5/15/98 Initials JH Revised

Initials

Name: Blue, Little B.	Birth date: 7/4/96 Nickname: LB
Home Address: 1313 Mockingbird Lane, Anytown, USA, [[[]]]	Home/Work Phone: 900-555-1212 (home) 777-8899 (work)
Parent/Guardian: Sandra Blue, mother	Emergency Contact Names & Relationship: Beatvice Blue,
Signature/Consent*: Santre Blue	grandwother
Primary Language: English	Phone Number(s): 900-444-5566
Physicians:	
Primary care physician: Marchs Welby, MD	Emergency Phone: 1-800-kIDS-RVS
	Fax: 000-000-0000
Current Specialty physician: P. Card. Jime Heart, MD Specialty:	Emergency Phone: 000-000-0000
	Fax: 000-000-0000
Current Specialty physician: P. Neuvo, Joe Neuvo, MD Specialty:	Emergency Phone: 000-000-0000
	Fax: 000-000-0000
Anticipated Primary ED: Smallville Hospital	Pharmacy:
Anticipated Tertiary Care Center: Childrens All Star Regional Med Center	

Diagnoses/Past Procedures/Physical Exam:

1. tetralogy of Fallot with pulmonary atresia; RV to PA

Baseline physical findings: go til havsh murmur, few crackles.

conduit 2/97 VSD left, ductus and collaterals ligated

at base of left lung, liver down 5 cm.

Features to include...

- Devices
 - > Tubes, drains
 - (see Pressure Ulcer domain analysis model)
- Contingency plan
 - e.g., if _____ then consider ____
- Directives and preferences
 - Communication preferences
 - Vascular access

Storyboards

 Currently mapping use cases to evaluate mapping to c-CDA and FHIR

Capturing additional content on wiki:

http://wiki.hl7.org/index.php?title=Essential_Information_for_Children_with_Special_Healthcare_Needs

- Additional input welcomed.
- Contact: Michael Padula <u>padula@email.chop.edu</u>