20160726\_NBS\_Notes

Attendees: Susan, Riki, Josh, Careema, Emily, Lura, Willie, Rebecca, Ashleigh, Brendan

1. Riki’s response to questions generated from the last call:
   1. Requiring an ORC segment for every OBR
      1. LRI is currently 1:1 ORC:OBR – identify as possible STU comment to either get a better explanation why, or set up as RE (since the conditionality experiment in ELR didn’t quite work out)
   2. Usage of LRI\_NG and LRI\_GU
      1. LRI\_NG is more flexible, but we could also leave it open for folks for decide = make no statement
   3. Software
      1. Leave optional
   4. LRI support of CLIA#
      1. In NG profile use of CLIA ok
   5. In calls:
      1. including EMR vendors
      2. Including labs currently using LRI

To get feedback from folks for whom some of our decisions may make life harder than needed – Brandan had requested that we get input from implementers

OZ systems works with many EMR vendors and hospitals

For sure ensure that they are aware when the ballot is ongoing and that they can participate in the ballot reconciliation.

1. Drafting the narrative on use cases. Timeline?  (Willie’s resource)
   1. Willie has identified a resource to work on this week (contractor)
2. Continue review of gap analysis spreadsheet (Starting on row 23, MSH tab)

<https://docs.google.com/spreadsheets/d/1ZIhrKrWnVN-0FHKoOLU47YW900qOBlA-hbw4CiXh5gc/edit?usp=sharing>.

* 1. MSH tab:
     1. MSH-7 to seconds ok = follow LRI
     2. MSH-15 – set to R – Code is AL = follow LRI – Consider making a STU comment to make O, or at least allow other vocab like NE in the base and create an ACK profile to cover this requirement
     3. MSH-16 – set to R – code allowed is AL or ER = Follow LRI – Consider making a STU comment to make O, or at least allow other vocab like NE in the base and create an ACK profile to cover this requirement
     4. MSH-21 Riki to request new Profile OID as part of the profile component development
  2. PID tab:
     1. PID-3.1 Identifier – apply to all IDs – where RE in the NBS Spec “Make R”
     2. PID-3.5 – Make R = follow LRI
     3. PID-3.6 – Make O = follow LRI
     4. PID-3.5.1.2 – Make O = follow LRI (apply to all Family Name elements!)
     5. PID-3.5.1.3 – Make O = follow LRI (apply to all Family Name elements!)
     6. PID-6 = Make O = follow LRI
     7. PID-7 – use TS\_5, which requires precision to DD and has HH and MM as RE – this is different from base LRI (TS\_2 Precision to DD, all other O) and LAB\_NB (TS\_3 (Precision to MM) – discussion here around the fact, that we need birth time, but we have separate OBX to send just time and some of the systems capture birth date and birth time in separate elements – ultimately TS\_3 would be the preferred precision
     8. PID-11 – Discussion about baby’s address – is not captured separately from mother’s or guardian’s address, that is also captured in NK1 segment – though some discussion that it might be important to know that baby is with guardian, even though we have a mother’s address – however this is sending back to submitter – they should k now all this information – so Make O = follow LRI
     9. PID-12 – Make X = follow LRI
     10. PID-13 – similar discussion as for address – is a good to know information, but that would be important for the lab on the order – no need to send back to the submitter specifically – Make O = follow LRI
     11. PID-22 – Make O = follow LRI
     12. PID-24 – Keep RE = different from LRI, need for use case
     13. PID-25– Keep RE = different from LRI, need for use case
     14. PID-29 – Make O = follow LRI
     15. PID-30 – Make O = follow LRI
  3. ORC tab:
     1. ORC-2 – Make RE = follow LRI
     2. ORC-2.1 – Make R = follow LRI
     3. ORC-3.1 – Make R = follow LRI
     4. ORC-4 – not sure this is needed for NDBS results – does not really apply (except may be as the serial number of the bloodspot card (but that is also the specimenID) – Make RE = follow LRI – consider a STU comment to make O in base LRI
     5. ORC-12.1.2 and ORC-12.1.3 – applied Family name rule (see PID-5) to Make O
     6. ORC-12-14 – DID NOT DISCUSS, but should this be same as PID-3.7 = assigning facility and Make O?
     7. ORC-21 – Keep R = different from LRI, important for this use case; for some providers this will be the same as ORC-12, since they have their own practice
     8. ORC-22 – Keep R= different from LRI
     9. ORC-22.7 – DID NOT DISCUSS, but should this be same as LRI and use RE (hardcode to ‘B’)
     10. ORC-22.9 – DID NOT DISCUSS, but should this be same as LRI and use RE – consider making LRi STU comment to loosen to O for base?
     11. ORC-23 – MAKE RE – important for this use case = different from LRI
     12. DID NOT DISCUSS: XTN datatype not defined in base LRI – so do we want what is in the current NBS specs or what is in ELR
     13. ORC-29 – Make O = follow LRI
     14. ORC-31 – Make C(R/X) – = follow LRI; – used for reflex testing in RN profiles Reflex testing is currently NOT reported in the same way as other NDBS results here, so does not apply, but may change in the future
  4. OBR tab:
     1. OBR-2 – Make RE = follow LRI
     2. OBR-2.1 – Make R = follow LRI
     3. OBR-3.1 – Make R = follow LRI
     4. OBR-4.1 – Make R = follow LRI
     5. OBR-7 in LRI allows for not knowing the specimen collection time – this is important for NDBS, because unknown collection date/time will result in specimen rejection, so same TS as LRI = TS\_4
     6. OBR-10 – DID NOT DISCUSS: because labeled as O in NBS, but elements are described, which is not done in LRI – follow LRI?
     7. OBR-11 – used to indicate reflex testing – not currently needed in NDBS, but may be in the future – Make RE = follow LRI
     8. OBR-13 – in LRI restricted to fasting status in vocab, this does not apply here, but want to use LRI – Make RE = follow LRI – consider STU comment for base to either make the vocab binding less strict, or consider changing to O
     9. OBR-14 – was using this instead of SPM segment due to backwards compatibility with v2.3.1 message senders – will move to v2.5.1 – Make X = follow LRI
     10. OBR-16.1.2 and OBR-16.1.3 – applied Family name rule (see PID-5) to Make O
     11. OBR-16-14 – DID NOT DISCUSS, but should this be same as PID-3.7 = assigning facility and Make O?
     12. OBR-22 – Precision to SS = TS\_6 = follow LRI
     13. OBR-26 – used for reflex testing – not currently needed in NDBS, but may be in the future – Make C(R/RE) = follow LRI
     14. OBR-28 – not needed in NDBS, but follow LRI – Make RE – consider submitting STU comment to create a copy-to profile component and make O in base LRI
     15. OBR-29 – used for reflex testing – not currently needed in NDBS, but may be in the future – Make C(R/RE) = follow LRI
     16. OBR-29.1.1 Make R = follow LRI
     17. OBR-29.1.2 Make R = follow LRI
     18. OBR-49 – not needed in NDBS, but follow LRI – Make RE – consider submitting STU comment to create a copy-to profile component and make O in base LRI
     19. OBR-50 – used for reflex testing in RN profiles – not currently needed in NDBS, but may be in the future – Make C(R/X) = follow LRI

1. Next Steps:
   1. Withdraw NDBS NIB from September ballot
   2. Update LRI document with decisions from spreadsheet
   3. Reach out to EMR and LIS vendors / Labs to get input on draft document
   4. Compile STU comments on LRI R1D2 and submit
2. Next call 8/9/2016 from 1 – 3 PM EST – Josh to send invite