**HL7 Patient Care Work Group**

**Allergy/Intolerance/Adverse Reaction Topic Sub-Group Meeting Minutes**

**Date: November 20, 2013**

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[www.webex.com](http://www.webex.com) – meeting number 197 520 889

Co-Chairs: Stephen Chu, Elaine Ayres Scribe: Elaine Ayres

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| --- | --- |
| **Name** | **Present on 11/20/13** |
| Elaine Ayres | X |
| Stephen Chu | X |
| Russ Leftwich | X |
| Lorraine Constable | X |
| Jean Duteau | X |
| Lisa Nelson | X |
| Emma Jones | X |
| Catherine Hoang | X |
| Jay Lyle | X |
| Christina Knotts | X |

**Agenda for November 20:**

1. Review Agenda
2. Approve minutes for November 6.
3. Update on OO Preferences Project – Jean/Lorraine
4. Ballot reconciliation – complete Allergy and Intolerance DAM comments from the VA
5. Publication requests – review and approve
6. Terminology issues – discuss
7. Testing resources - discuss
8. Agenda for December 4th

Minutes - November 6 Move: Jean/Stephen Abstain – 0 , Negative –0 , Approve - 7

**Preferences Project - OO**

Jean/Lorraine – modeling drug and food preferences.

Note that the harmonization proposal for preferences was approved.

Mood code possibilities; request, permission or proposal. Current RMIM has “Supply Proposal”. This indicates the act of “asking” but with no authority. A new mood code may be needed pending ballot comments.

The discussion of “no latex” as a variant of material type was discussed. While it was felt that such a statement was best included on the allergy list with a low criticality the group agreed that the nutrition material type should be unrestricted.

The inclusion of other preferences fitting into the model was discussed, for example, advanced directives. It was noted as out of scope for this project, but it is hope that this model can be used for preferences such as preferred treatment modality via the use of a more broad class code for Act.

Jean noted the presence of a text option for preference description if other means of expression are not appropriate. A question came up about how to represent a drug preference based on cost. Jean noted the use of the CMET for administrables. Cost can be noted as a characteristic.

REMINDER to Patient Care WG members to sign up for this ballot by **December 12**. Balloting begins on December 13.

**Project Updates:**

TO DO LIST – Clinical Models Ballot Reconciliation

1. Elaine will fix all of the typos
2. Jean will update all of the modeling comments.

Allergy and Intolerance DAM

Complete ballot reconciliation: Comments from the VA – Catherine Hoang/Jay Lyle addressed. Once to-do list is complete, can move to publication. Ballot reconciliation complete.

TO DO LIST:

1. Stephen will provide a more complete use case for the Glicazide use case.
2. Russ will write an additional use case conveying the concept of criticality when considering the use of a drug on the allergy/intolerance list.
3. Elaine will review all of the use cases to ensure proper usage of allergy, intolerance and allergy/intolerance.
4. Remove ‘Primary Use Case” from models.
5. Add “allergy added in error” to create and maintain allergy list use case. (Elaine)

**Agenda for December 4: 4 PM ET**

1. Review Agenda
2. Approve minutes for November 20.
3. Review of vMR allergy and intolerance models – Claude Nanjo – CDS group
4. Publication requests – review and approve
5. Terminology
6. Testing
7. Agenda for San Antonio
8. Agenda for December 18th