

HL7 Clinical Genomics Weekly Call - May 30, 2017 11:00 AM (US Eastern Time)

Agenda

[Weekly call minutes approval - May 5, 2017](#)

[Topics to discuss if needed](#)

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Attendees

1. JD Nolen - Cerner - jondavid.nolen@cerner.com
2. Joseph Kane - Epic - jkane@epic.com
3. Andrew Brown - NMDP - abrown3@nmdp.org
4. Bob Milius - NMDP - bmilius@nmdp.org
5. Bob Dolin - bdolin@psmiconsulting.com
6. Joe Quinn - Optum - joseph.quinn@optum.com
7. Xin Liu - BCH - xinliu215@gmail.com
8. Bob Freimuth - Mayo Clinic
9. Joel Schneider - NMDP - jschneid@nmdp.org
10. Gil Alterovitz - BCH/HMS - gil.alterovitz@gmail.com
11. Ling teng -BCH - -tenglingling@gmail.com
12. David Kreda HMS - david.kreda@gmail.com
- 13.

Topics to discuss if needed

Upcoming agendas until San Diego

- May 30 WGM recap, SWOT
- Jun 6 - Pedigree Ballot - any comments?
- Jun 13 - Status of LRI Ballot
- Jun 20
- Jun 27
- Jul 4 - US Holiday
- Jul 11
- Jul 18
- Jul 25
- Aug 1
- Aug 8
- Aug 15
- Aug 22
- Aug 29
- Sep 5
- Sep 9-17 - WGM San Diego

Brief reports from external efforts

- GA4GH
 - Gil - last week meeting for strategic planning; organizational changes for future endeavors
 - Grant - working groups had opportunities to talk about their vision for future, but not so much except for ehealth task team - consent management system for family health history; focused on governance; meeting seemed to very research focused, clinical not so much; they recognize HL7 and don't want to duplicate efforts; discussion about

'standards'; GA4GH focussed on API's, HL7 up to now hasn't been focussed API's but instead the transport structure

- Clem - from FHIR side HL7 does API
- Gil - GA4GH has been focused on very large datasets, millions of subjects, API's have different purposes
- DAK Comment 1/Opinion: I don't think GA4GH can help but being research oriented. Our goals in coordinating with them is to be sure the clinical focus we (HL7 CG) have can connect to their models when whatever the clinical need is needs to reach down into more extensive data. Gil's proposal that FHIR profiles for genomics data have ways to (URL) link to a different set of research models remains a concrete and constructive way to conduct this. Our strategy should be to articulate this and find the zone where the two efforts can collaborate technically. The one thing that may matter most is that we have in common how variants are represented semantically so that there is no mismatch at this level.
- DAK Comment 2/Opinion: The effort to achieve a common variant approach is the goal of the Variant Modeling Collaboration (VMC). We shall see ...
- RF: We should also keep in mind the general directionality of information transfer, which tends to go from basic research to translational studies to clinical. It makes sense for HL7 (clinical) standards to point back to data and studies that occurred earlier in the spectrum, whereas it would be difficult for a basic science application to point "forward" into the clinical realm
- National Academies
 - Further discussion around next home for DIGITiZe...Grant may have more
- Clingen/Clinvar
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- Variant Modeling Collaborative (VMC)
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Subgroup reports

- IM
 - https://docs.google.com/document/d/18sVxZdAeA98ok5hdGwmmVxVinTq_vAT9B-Z8GI_AyRiM/edit
 -
- FHIR
 - https://docs.google.com/document/d/1FGCQRtxJKyHhnc1uB_t4sJZ9yXbLMGOqPXHP_r5tSLLQ/edit#heading=h.nts1cfujf9t5
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- V2
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Topic 1: WGM Agenda - Recap

- https://docs.google.com/document/d/10hL5DAIn1OdER9t1rnLIZde9_3d361eRXv9zLciwB6Y
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Topic 2: CG Documents to review

- SWOT
 - https://docs.google.com/document/d/1zFUzRYLfCmmThBU8xXVS_JiScDACBi13tzFJep751k/edit
 - short url = <http://bit.ly/2ikUw0>
- DMP - Bob F
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Past Agendas

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Clinical Genomics Docs

- Decision Making Process
 - <https://docs.google.com/document/d/18ZxNAjMukUKXxbNPRtRdjytMCvnRns4srlDe0EBs0FI/edit>
 - short url = <http://bit.ly/2ikjXIV>
- SWOT
 - https://docs.google.com/document/d/1zFUzRYLfCmrnThBU8xXVS_JiScDACBi13tzFJep751k/edit
 - short url = <http://bit.ly/2iklUw0>

Chat