



HL7 RCRIM WG

FHIR AdverseEvent Resource

CALL MINUTES: Friday, July 1, 2016

Meet online at www.webex.com, meeting number: 622 569 796, password: Meeting
Phone +1 770-657-9270, passcode 7485962

Attendees: 5

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Project Wiki

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

References

- 1) Search the FDA Acronyms & Abbreviations Database:
<http://www.fda.gov/AboutFDA/FDAAcronymsAbbreviations/default.htm>
- 2) FHIR Conformance Rules: <http://hl7.org/fhir/conformance-rules.html>
 - a) See 1.12.2 Cardinality

Agenda

- 1) Approve Minutes for 6/24/2016
- 2) Review of analysis, HL7 FHIR W5 Report
- 3) Discuss other resources necessary
 - a) PCOR?
 - b) Quality reporting
 - c) Clinical decision support
- 4) Begin writing resource text in the format used for other FHIR Resources. Example:
<http://hl7.org/fhir/allergyintolerance.html>

Minutes

- 1) Approve minutes:
 - a) 6/24/2016 Deferred due to lack of quorum
- 2) Review of various data sources
 - a) 3500 – voluntary submission
 - i) Follow-ups
 - b) 3500A – mandatory submission
 - i) Follow-ups depends on substance
 - c) Look at global issues
- 3) Review of available data sources during the call:
 - a) HL7 FHIR W5 Report: <http://hl7-fhir.github.io/w5.html>
 - b) PSO Privacy Protection Center, AHRQ Common Formats, Technical Specifications - Common Formats - Hospital Version 1.2: https://www.psoppc.org/psoppc_web/publicpages/cfV1.2technicalspecifications
 - i) USHIK (United States Health Information Knowledgebase) Common Format Forms: <https://ushik.ahrq.gov/mdr/portals/ps?system=ps&enableAsynchronousLoading=true>
 - c) NCI caDSR Contexts. CDE (Common Data Elements) Browser for ONC/SDC efforts: <https://cdebrowser.nci.nih.gov/CDEBrowser/>. This includes common data elements for MedWatch forms and for AHRQ.
 - i) CDE Browser Basics: <https://wiki.nci.nih.gov/display/caDSR/1+-+CDE+Browser+Basics>
 - d) **We did not discuss but need to look at:**
 - i) The IHI Global Trigger Tool for Measuring Adverse Events: <http://www.ihl.org/resources/pages/tools/ihiglobaltriggertoolformeasuringaes.aspx>
 - ii) E2B(R3) Individual Case Safety Report (ICSR) Specification and Related Files: <http://estri.ich.org/e2br3/index.htm>
 - iii) CIOMS (WHO/UNESCO), Reporting Adverse Drug Reactions, Definitions of Terms and Criteria for their Use: http://www.cioms.ch/publications/reporting_adverse_drug.pdf
 - (1) Suspect Adverse Reaction Report Form (CIOMS Form I): <http://www.cioms.ch/index.php/cioms-form-i>
 - iv) MedEffect Canada, Adverse Reaction and Medical Device Problem Reporting. *Canadian standards for mandatory and voluntary reporting of adverse events (Canada calls these adverse reactions):*
 - (1) Reporting Adverse Reactions: <http://www.hc-sc.gc.ca/dhp-mps/medeff/report-declaration/index-eng.php>
 - (2) MedEffect Canada Home page: www.healthcanada.gc.ca/medeffect
 - (3) Canada Vigilance Program: <http://www.hc-sc.gc.ca/dhp-mps/medeff/vigilance-eng.php>

- 4) Action items
 - a) A proposed approach of looking across all common data elements was started.
 - i) This process will define data elements used across both mandatory and voluntary reporting for both adverse events and patient safety events.
 - ii) Additional data elements within the various reference standards will be collected to define the use of other FHIR resources (e.g. medication, observation, etc.) as the resource is developed.
 - b) The group needs to **begin drafting the prose** that will accompany the FHIR resource data elements. These statements are to help implementers understand the resource.
 - i) Match the format used for other FHIR Resources. Example: <http://hl7.org/fhir/allergyintolerance.html>
 - c) Meetings for July 8 and July 15 were cancelled.
- 5) Next meeting will be on Friday, July 22 at 10 AM.

Outstanding Questions

Questions and comments from the FHIR Management Group (FMG) related to FHIR AdverseEvent Resource:

- 1) The scope should include events that happen to individual other than patients.
 - a) Specifically, Practitioners and RelatedPersons
 - b) Possibly also Devices (e.g. equipment damage)
- 2) Timeline should be updated to inclusion in DSTU 3 rather than 2.1.
 - a) 2.1 would have been tight anyhow. Deadline is early July 2016 to have your resource at DSTU-level quality
- 3) For each of the "related resources", can you define what the nature of the relationship is?
 - a) Reference by name – links
 - b) Patient resource
 - c) Observation resource
 - d) Medication resources
 - e) Immunizations
 - f) Devices
- 4) **Need to correct and update resource proposal and let Lloyd know.**
 - a) http://wiki.hl7.org/index.php?title=AdverseEvent_FHIR_Resource_Proposal

Other Questions

- 1) none

Action Items

- 1) Any line items that include explicit actions are **highlighted in yellow** above.

Next Call

Friday, July 22, 2016, 10 AM ET

Agenda for Next Call

- 1) Approve minutes from June 24 and July 1 meetings
- 2) Review spreadsheet of data elements from various sources
- 3) Continue to discuss scope of project