# CeRx 4.4.2

# CeRx 4.4.2 Release Notes - Mar. 11, 2016

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This delta release provides updated information based on implementation requests. Details can be found in the Release Notes.

#### **Standards**



Please Note: This is a delta release only containing artifacts that were changed as part of the scope of CeRx 4.4.2. For all other artifacts, please refer to the CeRx 4.4.1 and CeRx 4.4 releases under Previous Releases. For details on the scope of the CeRx 4.4.2 delta release, please refer to the Release Notes.

## **HL7 Explorer: Browse Pan-Canadian Standards Online**

The HL7 Explorer view provides an easy to navigate web based rendering of the pan-Canadian standards.

### Purpose of the Release notes

The release notes provide a high level summary of the changes made to the Terminology artifacts in support of the MR02.06 release of the pan-Canadian standards. A detailed description of all of the changes can be found in the corresponding Terminology Change File (SC-3004-EN - Terminology Change File - CeRx 4.4.2 - 20160311).

The Release Notes are intended to be used in conjunctions with the other business (e.g. HL7 Explorer) and technical artifacts (e.g. Vocabulary MIFs) published as part of this release.

Stakeholders are strongly encouraged to review the Release Notes prior to exploring the rest of the published artifacts.

## Synopsis of the Release Changes

To support existing and new implementations, there were a considerable number of changes applied to MR 02.06, which include:

- Updates to value set content reflecting implementation status (new content to support implementation requirements)
- Updates to value set content based on implementation requests in the following domains:
  - o Drug domain
  - Infrastructure domain
- Value sets were updated to the:
  - o January 2015 release of SNOMED CT International and May 2015 release of SNOMED CT Canadian Extension
- Deprecation of Non-human subset as a result of SNOMED CT version update

Details of all of these changes can be found in the Terminology Change File (SC-3004-EN - Terminology Change File - CeRx 4.4.2 - 20160311) which is an Excel file that allows implementers to filter by any of the column headings on the respective tabs of the Excel file to identify relevant changes. The Change File contains a "How to Read" tab to assist implementers with determining the changes that may impact them.

#### List of Known Issues

The following are general known issues that will be addressed and reflected in a subsequent release (full or delta):

- Value Sets with noted Value Set Comments (e.g. AcknowledgementDetailCode, ActDetectedIssueCode, ActMedicationDocumentCode)
- Binding strength (CNE or CWE) discrepancy between models and terminology documentations.
  - The source of truth of each concept domain's binding strength resides in the Terminology Worksheet.
  - Where the model reference a value set, the source of truth of the binding strength resides in the specific model attribute.
- Risk of Changes indicated in CeRx Terminology Worksheet, Vocabulary Summary tab, column E (Risk of Change)
  - For example SeverityObservation concept domain name will be renamed as SeverityObservationValue.

For guidance on how to implement and use the Terminology Worksheet, please refer to the SC-CA-0006-EN - Implementation Guide Volume 0 - Overview - CeRx4.4 – 20131212.

#### Concept Domains known issues

- Misalignments between HL7 terminology in the pan-Canadian Terminology specification and the HL7 International terminology (e.g. ActNonConditionIndicationCode referenced in the Worksheet but does not exist in HL7 International terminology)
- Misalignments between CeRx Terminology Worksheet and CeRx message models (e.g. HealthcareProviderRoleType is referenced in the models but not in the Terminology Worksheet)

- Outdated concept domain definitions (e.g. ObservationIntoleranceType)
- Refer to Vocabulary Summary tab Risk of Change column for content gaps or differences compared with the MR2009 Delta Release 3 (R02. 04.03) Terminology of the same terminology content
- Discrepant definitions of the same concept domain used in CeRx and another panCanadian messaging standard (e.g. MR02.06) will be dealt with outside the scope of this project.

### Code Systems known issues

- Incorrect Code Systems OIDs. The OIDs specified in the specification are not correct compared to the HL7 OID Registry. However they cannot be
  corrected in this release as they are deemed out of release scope as per implementers' request:
  - HL7 materialForm
  - HL7 StandardVersionCode
  - o ISO639-2 (captured in SCWG 4 TL F-ID #1053)
  - Unified Codes for Units of Measure (UCUM)
- MaterialForm code system is referenced by the specification however this does not display under the Code System index page. This is due to the
  codes from the value sets (OrderableDrugForm and AdministrableDrugForm) that reference this code system do not actually exist in the code
  system. As a result, code system OID is the only code system metadatum available, and is displayed with the applicable value sets.
- BodySite code system is referenced by the specification however there is no content under the Code System page of BodySite. This is due to the
  fact that BodySite is a HL7 version 2 code table, and is not in HL7 Version 3 Terminology Model. As a result, it cannot be represented in the HL7
  Version 3 Terminology Model and be published on the Code System page. Also the code system OID is the only code system metadatum
  available, and is displayed with the applicable value set (HumanSubstanceAdministrationSite).
- Deprecated code systems are referenced in the specification. This means it is not possible to add new concepts under those code system and the request will be considered for the current code system that contain those concepts.
  - · TelecommunicationAddressUse this was deprecated in 2008 November Harmonization, and is replaced by AddressUse code system.
  - o materialFrom this was deprecated in 2012 March Harmonization, and is replaced by orderableDrugForm.
- Outdated concept names and/or descriptions (e.g. 'professional judgement' in ActReason code system), and the misalignment is further represented in the Value Set view of the concepts.
- Inaccurate data type reference to concept representation. Data type "CD" (Concept Descriptor) is used in the example data type representation.
  However, CD is not supported by the CeRx Data Type specification. Accurate data type reference to concept representation will be considered for future enhancements.

#### Value Sets known issues

- Some value sets have codes that purport to be drawn from a code system where the codes do not actually exist in the specified code system. (e. g. code "ALGINT" referenced in PharmacySupplyEventAbortReason value set doesn't actually exist in ActReason as specified).
  - O These codes are noted in the Value Set Comment field in the Value Set tab.
- Wrong codes (e.g. code "EMERG' in ActConsentInformationAccessOverrideReason value set and code 'l' in IssueFilterCode value set)

Inaccurate data type reference to concept representation. Data type "CD" (Concept Descriptor) is used in the example data type representation. However, CD is not supported by the CeRx Data Type specification. Accurate data type reference to concept representation will be considered for future enhancements.

#### Guidance for Existing and New Implementers

New Implementers: This is an older version of the "MR" Pharmacy, Share Health Record, and Immunization domains message and terminology artifacts. A new implementer is one that has not implemented any of the pan-Canadian HL7 messaging standards into their environment. If you are looking to implement messaging and terminology artifacts in one or more of the above domains, you are strongly encouraged to begin with the latest release of the Terminology Worksheet from the "MR" series, associated HL7 messaging standards and supporting documents.

Existing Implementers: Existing implementers are those that have implemented one or more of the pan-Canadian HL7 messaging standards into their environment. Careful consideration of the impact of the changes associated with this release must be reviewed when planning to upgrade from a previous release. All changes associated with the artifacts in use must be reviewed and considered.

Implementations that have implemented a single HL7 domain specific messaging standard and are now adding new domains will want to consider ensuring that the content for both domains is compatible (e.g. upgrade the existing domain to the latest version, implement a compatible previous version or ensure the most recent version is compatible with the existing domain version).

#### Summary of HL7 Terminology and SC Code System related changes

- Adding IntoleranceValue concept domain for message information model reference
- PharmacySupplyRequestRenewalRefusalReasonCode updated concept details to reflect proper concept usage
- MedicationOrderAbortReasonCode updated concept details to reflect proper concept usage
- VaccineType value set OID correction
- ActDetectedIssueCode addition of new concepts to support implementation requirements

## Summary of SNOMED CT related changes

The changes made to SNOMED CT Value Sets were to the January 2015 release of SNOMED CT International and May 2015 release of SNOMED CT Canadian Extension.

- Inactive content replaced with active content
   Updated concept details e.g. concept name in value set filters (e.g. SubjectReaction)
   Removal of Non-human subset in value set filters (e.g. ActProfessionalServiceCode)

# **Downloadable Artifacts**

Filename	Description
SC-3004-EN - Release Notes and Terminology Change File - CeRx 4.4.2 - 20160311.zip	CeRx 4.4.2 Release Notes and Change File
SC-3004-EN - CeRx Terminology Worksheet - CeRx4.4.2-20160311.xls	Terminology Worksheet is an artifact that specifies the pan-Canadian terminologies developed to support the electronic communication in pan-Canadian standards.
DEF=XX=VO=CeRx4.4.2 - 20160311.zip	Vocabulary MIFs represent the MTW in a computable format which allows computer systems to consume the content.