



Interchange

News from the Infoway Standards Collaborative and Solution Architecture Group

Collaborative launches services; Infoway hosts conference



Welcome to the Fall 2006 edition of *Interchange*. It's been a busy few months since the last issue but I'm pleased to report the Standards Collaborative is now up and running, providing services to support and sustain health information standards in Canada. Work is well underway to define and transition to the collaborative's new governance structure. In

addition, please note that all web pages, forums, members-only online materials for the standards formerly with the Canadian Institute for Health Information (CIHI)—the Partnership for Health Information, HL7 Canada and Digital Imaging and Communications in Medicine (DICOM)—have migrated to their new home on the *Infoway* website. (See page 9 for the new URLs and don't forget to bookmark them.)

More information about the Standards Collaborative and its services will be shared at the upcoming Partnership/HL7 Conference which *Infoway* is extremely pleased to be hosting. This marks the first time the conference has been hosted solely by *Infoway* since the collaborative was created earlier this year. Partnership is now an integrated event, covering the HL7 Canada meetings, and other national and international content. The event will offer presentations focused on standards development, adoption and implementation success stories and effective vendor engagement strategies. Keynote speakers include Dr. Bill Braithwaite and Dr. Steini Brown. (Please see page 2 for more information.) We hope to see all of you there.

The "In this issue" box above right shows this is a jam-packed edition, evidence the standards agenda and teams did not experience the traditional "summer slowdown." We have an international focus as well with an article about the proposed

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new SNOMED Standards Development Organization and a report from Prof. Andrew Grant on his visit to Russia and their interest in Canada's EHR initiative.

Interchange's contributors are growing and we're pleased more members of the standards community in Canada are participating in this newsletter. When you receive your copy, feel free to pass it along to others you think would enjoy reading it. And if you aren't on our list and want to be, then see our masthead on page 10 for information on getting onto our subscribers' list. You'll also find information there on how to submit articles or appointment notices.

And now – read on.

Dennis Giokas
Chief Technology Officer
Canada Health Infoway

Standards Collaborative now operational

After a busy summer and fall, the Standards Collaborative team has completed the Design and Operationalization Project and services are now being provided to support and sustain health information standards in Canada. Work is also currently underway to support transition to the new governance structure for the Standards Collaborative.

The Standards Collaborative is responsible for the implementation support, education, conformance and maintenance for EHR standards currently being developed by *Infoway* and the national electronic claims messaging standard (NeCST). The Standards Collaborative also encompasses several standards initiatives formerly managed by the Canadian Institute for Health Information (CIHI), including the Partnership for Health Information Standards, HL7 Canada, Canada's participation in Digital Imaging and Communications in Medicine (DICOM) and, in conjunction with the Canadian Standards Association (CSA), the secretariat to the Canadian Advisory Committee to ISO/TC 215.

The Standards Collaborative team would like to acknowledge and thank the members of our External Advisory Group for their invaluable contributions and guidance. This group was established during the summer to provide guidance and input to the Design and Operationalize Standards Collaborative Project.

At the upcoming Partnership/HL7 conference Nov. 19-21 in Toronto, more detailed information will be shared about the services of the Standards Collaborative, how to access services, its membership model, its governance model and the transition plan underway to establish the new governance of the Standards Collaborative. A panel, including members from the External Advisory Group, will be on hand to answer questions and provide further commentary on the governance model and transition plan.

Further information about the Standards Collaborative and its services can also be accessed at:
standards@infoway-inforoute.ca.

— Contributed by Marsha Bryan, Standards Specialist, Infoway Standards Collaborative

Standards Liaison is pleased to announce new sites for their web pages, forums and members-only access to HL7, DICOM and ISO standards formerly located under CIHI's web address.

Please see page 9 for the new links so you can update your files.

Ready, Set, Standards!— Canada's foremost health information standards conference

Join us in Toronto, Ontario, November 19-21, 2006, for the Partnership for Health Information Standards and HL7 Canada semi-annual conference, hosted by *Infoway*.

Ready, Set, Standards! will feature a host of exciting projects and speakers that will launch Canada into a new era of health information standards including the *Infoway* Standards Collaborative and its new governance and service models.

Beyond standards development, *Ready, Set, Standards!* will also examine adoption and implementation success stories while deliberating on effective vendor engagement strategies.

Keynote speakers you won't want to miss include Dr. Bill Braithwaite, senior vice-president and chief medical officer, eHealth Initiative, and Dr. Steini Brown, assistant deputy minister, Health System Strategy Division, Ministry of Health and Long-Term Care, Ontario.

Evan Solomon, CBC television broadcaster, journalist and author, will close the conference with a speech on the importance of change and relationship management as it relates to health information standards success in Canada.

Whether you are a vendor, developer, implementer, decision-maker, healthcare provider or end user of standards, show your support for the advancement of health information standards in Canada by registering today. We hope to see you there.

For more information and to register, please visit
www.infoway-inforoute.ca.

Or contact us at: partnership@infoway-inforoute.ca.

— Contributed by Suly Luu, Standards Analyst, Infoway Standards Collaborative

Seven-nation group to set up SNOMED Standards Development Organization

The College of American Pathologists (CAP) and a group of seven nations (Australia, Canada, Denmark, Lithuania, New Zealand, The United States and the United Kingdom) have agreed on the objective of establishing a standards development organization (SDO) to maintain and promote the Systematized Nomenclature of MEDicine Clinical Terms (SNOMED CT) standard.

At a meeting held in Copenhagen Oct 4-5, 2006, the seven charter member nations and CAP reached agreement in principle to work towards creation of the SNOMED SDO. All necessary details concerning formation are targeted for completion in the near future. The seven countries agreed to establish a not-for-profit corporation, under Danish law, which will be known as The International Health Terminology Standards Development organization (IHTSDO).

Canada, as one of the SDO's Charter Members, has an opportunity to play a key role in the new organization. A representative from Canada will sit on the SDO's governing board. Canada Health Infoway, as part of its standards collaboration and co-ordination mandate, has contributed Canada's share to the acquisition of the seven-country purchase of the SNOMED intellectual property and will assume the cost for the initial annual fees to the IHTSDO.

Canada's involvement in the development and maintenance of the new SNOMED CT SDO is crucial since this standard has been recommended by Canada Health Infoway's Clinical Terminology Integration (CTI) pan-Canadian Standards Group (pCSG) as the best choice of terminology for 24 priority clinical information groupings (or sub-domains) of the core interoperable EHR. Using this common terminology standard will enable electronic healthcare systems to talk to each other using the same language – facilitating interoperability and helping to establish a network of interoperable electronic health record solutions across Canada linking clinics, hospitals pharmacies and other points of care. This will help improve Canadians' access to healthcare services, enhance the quality of care and make the healthcare system more productive.

iEHR Standards Project Update

Infoway's iEHR Standards Project is nearing completion on the terminology and HL7 v3.0 messaging deliverables. The final face-to-face meeting with pan-Canadian Standards Group (pCSG) members was conducted in September. This group of

clinical, jurisdictional, and technology stakeholders has helped *Infoway* understand the requirements for sharing and using relevant EHR information at the point of care.

The collaboration and contributions of the core team and working group members illustrate how the iEHR standards that have been developed are at the cutting edge of healthcare practice. These standards will support many innovative concepts and practices in the years to come, including support for inter-professional communication, for maintaining a current and up-to-date record and for sharing of important documents about care provided, such as discharge summaries, consult notes and other care data. This opens up new opportunities for inter-professional collaboration and continuity of care—a key requirement of primary care reform initiatives across the country.

Through discussion with the pCSG, the project team has come to realize that different stakeholders view the Shared Health Record (SHR) in different ways. Some stakeholders view it as a repository of documents for storage and retrieval—a record of “what has happened” to a patient. Other stakeholders view it as a repository of current and up-to-date information about the patient's health—a record of “what is known” about the patient. These two diverging, yet complementary, views of the SHR had to be reconciled and accommodated in the new design.

The iEHR project team developed several issue papers to resolve some of the key issues presented by the pCSG and other stakeholders. Through teamwork and the support of the pCSG, those papers have provided a thorough exploration of some major innovations in healthcare documentation and have provided guidance on a pathway forward.

The iEHR standards have received good support from the pCSG, with some reservations about how things will move forward. The pCSG expressed its guarded optimism that the iEHR specifications can be implemented as long as some key issues, which go beyond the scope of the project, are resolved. These issues include definition and development of Terminology Services specifications, how EHR identifiers should be issued and managed in the EHR, and a stable specification for the EHR index, a crucial technology for making the interoperable EHR work reliably and efficiently.

As with all *Infoway* standards projects, the iEHR project has brought new issues to the surface about workflow and potential policy, professional practice and regulatory issues. The iEHR Standards pCSG has significantly progressed project members' understanding of the implications of using an EHR in practice. Resolution of these issues will be necessary in order to see widespread adoption of the standards created in this project, but they represent an opportunity to transform

our healthcare system in ways that can improve patient safety and patient outcomes. The *Infoway* team is taking a proactive stance in bringing these issues to the appropriate projects, stakeholder groups and professional organizations best suited to solve these issues.

There are still several more standards that need to be developed that are, conceptually, in the iEHR space, but were not in the original scope of the project. These include messages that will allow jurisdictions to designate a primary healthcare team for a patient, designate a most responsible provider and support chronic disease management in the community. First, however, more progress must be made in establishing the basic capabilities needed for initial EHRS implementations. This will be the focus as this project continues to work through the Standards Collaboration Process (SCP) to resolve those issues identified by stakeholders and to obtain their confidence that the standards developed in this project are Stable for Use.

For more information, please contact Laith Boussabah at lboussabah@infoway-inforoute.com

— Contributed by Laith Boussabah, Project Manager, Infoway iEHR Clinical Standards Project

Pan-Canadian Laboratory Messaging and Nomenclature Standard (pCLMN) nearing final draft

Infoway's Laboratory Information Systems program is aimed at accelerating the implementation of solutions that allow clinicians to view laboratory results and reports from all hospital, community and public health laboratories.

The results will be linked to patients' Electronic Health Records (EHR), thereby providing additional resources for healthcare practitioners when diagnosing and treating patients. Establishing standards for data management and electronic solutions that can facilitate this information exchange across all of Canada's provinces and territories is of prime importance. The use of compatible standards and communication technologies will ensure secure online viewing of patients' lab test results by authorized healthcare providers regardless of where the test was completed.

The needed specifications are being established by the pan-Canadian Laboratory Messaging and Nomenclature (pCLMN) Standards project. This project was launched to devise HL7 v3 messaging and associated nomenclature deliverables by

leveraging existing specifications from both BC and Ontario as well as major clinical nomenclatures such as Logical Observation Identifiers Names and Codes (LOINC®) and Systemized Nomenclature of Medicine – Clinical Terms (SNOMED CT®). Following on the recent meeting of the Laboratory pan-Canadian Standards Group (Lab-pCSG) in Halifax, the project team is presently updating all materials and targeting a final draft publication date for mid- to late-November – this will coincide with the commencement of a “Stable for Use” review cycle.

Interested stakeholders are encouraged to review the currently published specifications and provide feedback through the Lab forum discussion list at Labs-Discuss@forums.infoway-inforoute.ca or to participate in the upcoming “Stable for Use” review process.

To access the pCLMN materials and engage in online discussions please visit the applicable *Infoway* KnowledgeWay forum at: <http://knowledge.infoway-inforoute.ca> or contact Marc Koehn at mkoehn@infoway-inforoute.ca.

— Contributed by Mark Koehn, Project Manager, Infoway RX Standards Project

IHE Canada—200 reasons to get involved

Two hundred providers, healthcare IT professionals and vendor representatives from across Canada attended the Integrating the Healthcare Enterprise (IHE) Canada Workshop held in September in Toronto, Ontario. Attendees said the workshop provided a solid introduction to the IHE concepts, process, and clinical domains and how IHE is enabling healthcare information sharing within healthcare provider networks. Many said they were interested in future IHE Canada education events that would offer more detailed sessions on the integration profiles and how IHE can be implemented within their own healthcare organizations.

The workshop presentations are available from the IHE Canada website at: <http://www.ihe-canada.com/Events/2006/06Sept18-19Presentations.htm> and <http://www.ihe-canada.com>.

IHE Canada is moving forward with revitalizing its strategy and business objectives. Contact Caren Adno (cadno@itac.ca) if you are interested in participating in IHE Canada or IHE International committees.

— Contributed by Caren Adno, IHE

More, Better, Faster!—CIHI's Information and Technology Services Department

The value of health information is clear: High quality, reliable and timely health information is needed to establish sound health policies, manage the Canadian health system effectively and create public awareness about factors affecting good health. CIHI continues to produce insightful and leading-edge studies to help inform Canadian health policy decision-making.

The demand and expectations for information continues to rise: In 2005, CIHI released over 30 reports and the demand for information continues to rise. This is driven by a number of demands, including:

- **Thirst for information and evidence:** Whether it is healthcare providers, the public, media, policy-makers or government, stakeholders are looking for information to help them manage their contribution to the health of Canadians and the healthcare system.
- **The healthcare landscape has changed:** Whether it's the impact of a two-tiered system or the establishment of the pan-Canadian EHR, CIHI is faced with many questions regarding future data collection and reporting of health information.
- **Increased demand for elaborate research:** CIHI stakeholders are demanding more elaborate research spanning the entire continuum of care, analysis spanning multiple years and the ability to do analysis themselves.
- **Overall, users are requesting many things:** more analysis, better access to information and reports, faster turnaround of services, more tools, and a better data infrastructure.

The ITS vision: CIHI has had tremendous and growing success over the past 10 years. However, there is added pressure to meet and deliver on current and future expectations. To accomplish this, CIHI's Information Technology and Services (IT&S) department developed strategic directions and an action plan labeled "More, Better, Faster." This "road map" provides a clear vision statement, three mandates, nine strategic directions and over 37 initiatives for fiscal years 2005/06 to 2007/08.

Standards-based approach: CIHI is committed to a standards-based approach. CIHI's Data Dictionary and Corporate Reference Data Model projects are two examples of IT&S initiatives that are leveraging from, and aligning with, international and pan-Canadian EHR standards. Ultimately, these efforts will position CIHI to excel in its role as Canada's premier source of health information.

— Contributed by Gavin Tong, CIHI

Even Moscow likes our Blueprint

Andrew Grant, MD, PhD., Professor, Université de Sherbrooke, and a Member of Infoway's SSC committee, recently visited Russia and has submitted the following report to Interchange.

During September, as part of starting an on-going program of scientific exchange, I spent four weeks at the Medical Centre for Information and Analysis (MCIA <http://www.mcramn.ru/indexe.htm>) which is part of the Russian Academy of Medical Sciences (RAMS).

This centre, with more than 400 staff, is primarily concerned with different approaches of using health services data to continually improve the health system of the Russian Federation as well as to influence planning. I also had the opportunity to visit the information systems in three federal clinical centres, including a centre for telemedicine. Moscow's Research Centre for Obstetrics, Gynaecology and Perinatology (<http://ncagip.ru/eng>) has been one of the main testing grounds for EHR system implementation, with its established and continuously evolving automated system for patient management and personalized service registration. The system in the Institute of Neurosurgery (<http://www.nsi.ru>) was particularly impressive as not only could it capture clinical notes, it also showed considerable innovation in enabling different views of the data according to context and user need.

The MCIA has taken on a major role in developing methods to assess different local and regional requirements to help planning distribution of resources including expertise and high-cost technologies. I was able to attend a press conference at the ITAR-TASS building concerning a project by the MCIA with the World Bank looking at healthcare services from a primary care perspective.

The MCIA now has a central interest in developing an integral strategy for the electronic health record. I was asked to present an overview of the Canadian experience to date to the Russian Academy of Medical Sciences. There was a lot of interest in the *Infoway* program and Blueprint and I anticipate ongoing collaborative exchange. I certainly appreciated this experience and the imagination and energy that I found at the centre as well as being able to observe innovations and investment in healthcare informatics in Russia.

ISO Technical Committee for Health Informatics meets in Geneva

The working groups of the ISO Technical Committee for Health Informatics (ISO/TC 215), including the *Infoway*-supported WG 1 Data Structure, met in Geneva October 9-11 for three days of intensive and productive meetings. The Canadian contingent advanced several standards projects of particular importance to Canada, including architecture, terminologies, security, pseudonymization and health information services architecture, among others. Of note, work on the Canadian-led clinical data warehouse technical report was completed, with publication by ISO expected in late October. Again under the leadership of Dr. Andrew Grant of the Université de Sherbrooke and Mark Fuller of the Canadian Centre for Health Information (CIHI), work will soon begin on the preparation of detailed normative specifications for clinical data warehouses.

Preceding the working group meetings, held October 8th, ISO/TC 215 and the Healthcare Information Management Systems Society (HIMSS) also played host to the second Global Summit on Health Information Technology. A follow-on to the inaugural summit held in Hamamatsu, Japan, in 2005, the Geneva event focused on enhancing Standards Development Organization (SDO) engagement with the vendor community. Senior health IT leaders from Microsoft, IBM, Siemens, GE, Philips and others presented to more than 100 attendees. Real-world examples of standards adoption and implementation were showcased, vendor experience with standards was examined, and opportunities for improved standards-based approaches were developed. For more information on this event, including the presentations, visit the HIMSS website at www.himss.org.

Finally, of particular note, the ISO meeting also welcomed the leadership of Health Level 7 (HL7), as well as the European health informatics standards committee (CEN/TC 251). While their respective standards experts collaborated with those of ISO/TC 215 on several standards projects during the three-day meeting, the chairs of all three organizations further advanced important plans to coordinate the overall development and completion of international standards that will enable interoperable standards in the health informatics domain.

Don Newsham, CEO of COACH, Canada's Health Informations Association, who along with Grant Gillis, *Infoway's* director of standards liaison, and David Rowlands, chair of the Australian Standards Committee on Health Informatics, has been working to put these plans in place between the three organizations, remarked upon the

importance of orchestrating the efforts of ISO, HL7 and CEN. "With the global summit as a vehicle for multilateral stakeholder engagement and consensus building," Newsham said. "Canada, Australia and, indeed, the world are progressively creating and sustaining a comprehensive global approach to health information standards. These plans will enhance the contributions of these and other SDOs, strengthening the global availability of standards-based health information solutions, and supporting the shared goal of safe, accessible and effective healthcare for all."

For more information on the Geneva proceedings, or on ISO/TC 215 in general, please contact Andrea Ciemny, Standards Analyst, ISO (aciemny@infoway-inforoute.ca) or Grant Gillis, Director of Standards Liaison (ggillis@infoway-inforoute.ca).

— Contributed by Grant Gillis, Director, Standards Liaison, Infoway Standards Collaborative



Richard Alvarez, Infoway's CEO, speaks to ISO delegates at the recent global forum on health information technology

Infoway CEO addresses ISO global forum session

Richard Alvarez, President and CEO of Canada Health Infoway Inc., provided a keynote presentation at the recent global forum on health information technology, convened during the 29th General Assembly of ISO (International Organization for Standardization) in Ottawa this past September.

Attended by over 400 delegates from 123 countries, Alvarez's address profiled *Infoway's* extensive standards-based efforts to integrate information technology into Canada's healthcare system through the creation of the electronic health record (EHR). Highlighting the large commitment to ISO and other standards development organizations by a host of countries, Alvarez noted the common challenges and opportunities

facing these countries as they each work to put in place interoperable information systems that serve urban, rural and remote communities.

Sharing the promise of improved healthcare access, productivity, safety and quality through interoperable EHRs, Alvarez identified the remarkable potential for international standards to play a significant role not only in engineering the technical aspects of health information systems, but also in supporting the management of the consequent social, professional and financial changes as well. His call for improved, more integrated standards development, featuring even greater international participation and accelerated by enhanced vendor commitment, resonated with the audience.

— *Contributed by Grant Gillis, Director, Standards Liaison, Infoway Standards Collaborative*

OHISC Update

The Ontario Health Informatics Standards Council (OHISC) continues to consult with healthcare information technology stakeholders to identify business needs requiring standards. These business needs will be reviewed in the next quarter:

- Nursing Outcomes Classification System and Instrument (HOBIC)
- Primary Care Classification System for Problems, Complaints, and Diagnoses
- Data Set and Technical Specification to Support Business Continuity and Data Portability of Clinical Management Systems
- Wireless Technology
- Deploying Object Identifiers (OIDs) in Ontario

OHISC has been actively promoting the value of e-health standards by having a booth at the Ontario Hospital Association's HealthAchieve in Toronto from November 6-7.

— *Contributed by Yaron Derman, OHISC*

CHIMA—busy with pan-Canadian standards work

The Canadian Health Information Management Association (CHIMA) has been working with health information management (HIM) professionals across the country to provide review and feedback on the work of the interoperable ehr (iEHR) pan-Canadian Standards Working Group.

The work has initiated thought on the use of SNOMED CT in HL7 messages needed for the Shared Health Record (SHR), the need for mapping of concepts between Systemized Nomenclature of Medicine – Clinical Terms (SNOMED CT)

Coming to Canada: ISO/TC 215 2007 Annual Plenary Meeting

The Canadian Standards Association (CSA) is proud to host the ISO/TC 215 2007 Annual Plenary Meeting in Montreal, Canada, March 25-29, 2007.

CSA is a leader in standards development and solution enablement for Canadian health care, community safety and well-being and publishes health informatics standards available on CSA's online store at <http://www.csa-intl.org/onlinestore/GetCatalogDrillDown.asp>.

Each year, ISO/TC215 holds a four-day strategic, planning and tactical standards development meeting. This Technical Committee plays a key role in the standardization of all aspects of health informatics including: data structure, data interchange, semantic content, security, health cards, pharmacy and medicines business, devices and business requirements for Electronic Health Records.

Canada Health Infoway and CSA partner to manage the Canadian Advisory Committee to ISO/TC215, whose members contribute Canadian content to the ISO/TC215 standards portfolio.

Over 125 of the top health informatics experts from around the world are expected to attend the ISO/TC215 2007 annual plenary. As this is the first opportunity for Canada to host this event since 1999, financial sponsors are being sought to ensure the ongoing success of the Health Informatics Technical Committee and the associated Canadian contribution.

Canada Health Infoway, Sierra Systems and the Quebec Ministry of Health have already agreed to sponsor the plenary, however, there are still several exciting sponsorship opportunities available. As an added incentive, all sponsors will have the option to participate as an observer during the week of meetings.

For more information, please contact Cathryn Cortisoz at cathryn.cortisoz@csa.ca or 416-747-2594.

— *Contributed by Cathryn Cortisoz, CSA*

and the International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Canada and the Canadian Classification of Health Interventions (ICD-10CA/CCI), and a variety of implementation issues related to electronic health information management (e-HIM™) in the electronic health record environment.

The development, implementation and rollout of the Professional Practice e-Learning and Assessment Tool (PPeAT), designed for improved coding quality and consistency, ended October 31st, 2006. This important data quality initiative, undertaken by the Ontario Ministry of Health, has provided all hospital coders who contribute to the Canadian Institute for Health Information (CIHI) Discharge Abstract Database (DAD) an opportunity to work through 9 online learning modules and related assessment exercises over a three-month timeframe. The high-level results of this effort by coders will be provided to the Ministry, Local Health Integration Network (LHIN) CEOs and Directors of Health Information Management across the province of Ontario.

For more information contact Karanne Lambton at karanne.lambton@echima.ca or visit the website at www.echima.ca

— Contributed by Karanne Lambton, CHIMA

DICOM Update

The DICOM Standards Committee exists to create and maintain international standards for communication of biomedical diagnostic and therapeutic information in disciplines that use digital images and associated data. The goals of DICOM are to achieve compatibility and to improve workflow efficiency between imaging systems and other information systems in healthcare environments worldwide. Those interested in imaging (DICOM) standards and who wish to participate in the work of DICOM, including ballots of the standard, are urged to contact Grant Gillis at Canada Health Infoway (ggillis@infoway-inforoute.ca).

DICOM Standards Committee meets in Spain

The DICOM Standards Committee met recently in Barcelona, Spain, on September 7, 2006. The complete minutes, Working Group reports and other submitted reports (including liaison updates from HL7, ISO, IHE, and International Telecommunication Union [ITU]) of this meeting will soon be available on the NEMA-hosted DICOM page (<http://medical.nema.org/>).

DICOM Presentation at RSNA Conference

At the Radiological Society of North America's upcoming conference, DICOM's Working Group 11 will hold an open

Appointments

The following appointment notices have been received. If you have an appointment you would like us to carry in this column, please send it to The Editor, *Interchange*, at standards@infoway-inforoute.ca

COACH, Canada's Health Informatics Association

Don Newsham, CEO, COACH
Renee Levine, Executive Director, COACH

Canada Health Infoway Inc.

Standards Collaborative:

Shari Dworkin, Director, Standards,
Helen Stevens Love, Director, Standards
Bhavana Patel, Manager of Standards.
Andrea Ciemy, Standards Analyst, ISO
Wendy Huang, Standards Analyst, HL7
Beverly Sutton, Program Coordinator.

Standards Liaison

Chun-Hao Lin, co-op student, Partnership for Health Information
Eric Tang, co-op student, HL7 Canada Secretariat

discussion on the multi-dimensional presentation state in DICOM, 9 a.m. - noon, Tuesday, November 28, 2006, entitled "Multi-Dimensional Presentation—What Should It Do?" The discussion will focus on how DICOM should address the Presentation State (PS) of 3D images, fused images, images based on the upcoming Supplement 63 for multi-dimensional Interchange Object or the previous Supplement 73 on Spatial Registration that became part of the standard in 2004. This discussion will be part of WG-11's two-day meeting at RSNA. All are welcome to attend.

DICOM WG-11 and WG-17 have held preliminary discussions on this subject. General use cases that will be touched on include:

- PS complement of 3D data (volumes) created by acquisition modalities and post-processing systems to describe default or user-specified presentation; and
 - PS to specify tailored viewing protocols—i.e., not just standard fixed 2D image layout but 3D renderings (surface, volume, cine, fly-through and interactive).
- The goals of this open discussion are to identify:
- Functional needs and, if possible, prioritization of the needs;
 - Use Cases to clarify where PS originates (modalities, CAD

devices, interpretation sessions), where PS is used, for what purposes, and with what capabilities;

- The immediate scope of application and functional needs;
- Possible models for incorporating multi-dimensional PS into DICOM, and how to best accomplish this; and
- A team of individuals who can work on developing a new supplement to address these needs.

We encourage you to participate in this open discussion if you have an interest in the topic. If you have materials to contribute or wish to help in the planning, please contact Howard Clark (see e-mail address below).

Documents related to the discussion should be posted to and may be retrieved from the following publicly available FTP site: ftp://medical.nema.org/medical/dicom/WGs_public/WG-11/ND_PresentationState/

If you are unable to attend, but know of functional needs and use cases or are willing to participate on a joint venture to address these needs, please contact WG-11 Secretary Howard Clark (How_Clark@nema.org).

DICOM Correction Package 39

DICOM, which addresses image communication for a number of modalities and image management functions, was first published in 1993. Since then, many additional medical imaging specialties have contributed to the extension of the DICOM Maintenance Process. This process was established by the DICOM Standards Committee's Working Group Six to address errors in and clarifications to the Standard. WG-06 reviews questions and comments on the Standard and determines whether a correction is required. Questions and comments may be submitted in numerous ways—*i.e.*, a letter to WG-06, issues raised by Working Group members, etc. After WG-06 approves the proposed corrections, a ballot is sent to the DICOM Standards Committee members. If approved, the corrections are incorporated into the DICOM Standard.

Ballot of DICOM Supplement 116 "3D X-Ray Storage SOP Class"

Supplement 116 defines a baseline for a family of dedicated X-Ray multi-dimensional storage SOP Classes that would define the 3D volume or volumes created from X-Ray cone beam projection. The slices of the volumes are in the Cartesian format, *i.e.*, non-curved slices defined by position and orientation properties. The 3D X-Ray Angiographic Image SOP Class allows storage of the results of a 3D reconstruction from either the current XA SOP Class images or the new Enhanced XA SOP Class. The 3D X-Ray Angiographic Image SOP Class definition will include the relationship to the isocenter reference system and the relevant acquisition attributes from 2D projection images. The 3D X-Ray Craniofacial Image SOP Class allows storage of the results of a

Transition Complete: Visit and bookmark our new web pages

Infoway's Partnership for Health Information Standards, HL7 Canada and ISO TC 215 Secretariats are pleased to introduce new sites for their web pages, forums and members-only access to standards — formerly located under CIHI's web address. Please visit them and change your bookmarks.

HL7 Canada forums

<http://forums.infoway-inforoute.ca/HL7/>

HL7 Canada website

http://sl.infoway-inforoute.ca/content/dispPage.asp?cw_page=infostand_hl7can_e

Partnership website

http://sl.infoway-inforoute.ca/content/dispPage.asp?cw_page=partner_e

ISO TC 215 WG1

http://sl.infoway-inforoute.ca/content/dispPage.asp?cw_page=infostand_ihisd_isowg1_e

You can also visit us at www.infoway-inforoute.ca under "What We Do."

Sincere thanks go to all staff, both at *Infoway* and CIHI, for their dedication in ensuring a smooth transition.

Contact Information

Infoway Standards Collaborative

For any information or questions about the collaborative, including HL7 Canada, Partnership and ISO, please use the following phone numbers:

Toll-free calls: 1-877-595-3417

Local calls in Toronto: 416-595-3417

Or send an e-mail to any of the following addresses:

standards@infoway-inforoute.ca

HL7Canada@infoway-inforoute.ca

Partnership@infoway-inforoute.ca

ISO@infoway-inforoute.ca

3D reconstruction from the current SOP Class images used in dentistry. The 3D X-Ray Craniofacial Image SOP Class definition will include the relationship to the isocenter reference system and the relevant acquisition attributes from 2D projection images.

Ballot for DICOM Supplement 114—DICOM Encapsulation of CDA Documents

HL7 has developed the Clinical Data Architecture (CDA) as a document markup standard that specifies the structure and semantics of “clinical documents” for the purpose of exchange. Clinical evidence, measurements and reports may be generated in a CDA format. The normative encoding of CDA documents uses markup based on the HL7 v3 XML Implementation Technology Specification. However, the CDA standard does not specify the messaging or storage mechanisms for the management of such documents. In order to exchange and/or handle these documents in an efficient manner in an imaging environment, especially as input to an imaging procedure or for imaging reports, it is useful to be able to “wrap” these types of documents in a DICOM container. They can thus be exchanged as DICOM objects using the DICOM Storage Service, and accordingly archived and retrieved. Therefore, supplement 114 defines the SOP Classes for CDA documents encapsulated into Composite DICOM SOP

Instances, so that they can be exchanged using the appropriate Service Classes and stored and retrieved accordingly. The CDA format specification is available from HL7. See: <http://www.hl7.org>.

— Contributed by Grant Gillis, Director, Standards Liaison, Infoway Standards Collaborative

HL7 Canada Update

The Director-at-Large election closed on November 1, 2006, and the results have been tabulated. On behalf of HL7 Canada’s Board, we are pleased to announce the successful candidate is the incumbent Garry Cruickshank. Mr. Cruickshank is a practising pharmacist from London, Ontario, and a member of *Infoway’s* Clinician Advisory Team.

On behalf of the Board, we would also like to extend thanks to Andrew Cripps for running for election to this position.


HL7 V3—A Technological Challenge for Healthcare

At the joint invitation of the Centre de recherche informatique de Montréal (CRIM) and the Association de l’industrie technologique de la santé (AITS), Grant Gillis, chair of HL7 Canada, and director, Standards Liaison, Canada Health Infoway, had the opportunity to present to audiences in Quebec City and Montreal. The development history of HL7 v3 was reviewed, as well as its designation by *Infoway* as the messaging standard of choice to achieve interoperable EHRs. In response to recent comments from the vendor community, he explored the myths, facts and realities of HL7 v3 within the Canadian context. The presentation is available on the HL7 Canada page in the *Infoway* Standards Collaborative section of *Infoway’s* website (www-infoway-inforoute.ca) under “What’s New.”

HL7 Canada Autumn Meetings

Final preparations are in hand for HL7 Canada’s autumn meetings, which will take place as part of the “Ready, Set, Standards!” joint conference with the Partnership for Health Information Standards. In addition to meetings for the Realm Localization, Communications and Financial Management Domain Committees, the joint conference program also provides for a number of domestic HL7 project updates as well as the state of the affiliate report. For more information on the program, including registration details, please visit the HL7 Canada page at: http://sl.infoway-inforoute.ca/content/dispPage.asp?cw_page=event_partner_nov_06_e.

— Contributed by Grant Gillis, Director, Standards Liaison, and Wendy Huang, Standards Analyst, Infoway Standards Collaborative



The header graphic for the Interchange newsletter features a green curved banner at the top. On the left, it contains the logos for Canada Health Infoway and Inforoute Santé du Canada. On the right, there is a stylized logo with a blue and yellow flower-like shape. Below the banner, the word "Interchange" is written in a large, bold, green font.

Interchange

Interchange is an e-publication of the *Infoway* Standards Collaborative and Solution Architecture Group. In addition to news about *Infoway*-developed standards, this newsletter also includes updates on HL7, Partnership for Health Information Standards and Digital Imaging and Communications in Medicine (DICOM) which are part of the *Infoway* Standards Collaborative. We welcome submissions on standards and architecture-related topics of general interest to the health informatics standards community.

To comment, submit or suggest a news item or appointment, please email Dennis Giokas at archinfo@infoway-inforoute.ca

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