

#### Inside IHE: Pathology and Laboratory Medicine Webinar Series 2018

Presented by

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- Intro to IHE Pathology and Laboratory Medicine (PaLM) / Mission and Scope
- Summary of all Integration profiles
- Highlighting of New Trial Implementation profiles
  - Anatomic Pathology Structured Report (APSR) 2.0
  - Laboratory Clinical Communications (LCC)
  - Transfusion Medicine Administration (TMA)
- Current Projects
  - Specimen Event Tracking (SET)
  - Digital Pathology (collaboration with DICOM WG 26 to update Anatomic Pathology Workflow (APW)

# Why IHE?

International standards represent usually the state-of-the-art and the best-of-bread blocks to build safe, interoperable, reproducible solutions of healthcare data exchange.

IHE helps put those together for specific use cases (profiles)

For a good introduction to IHE see this video: <u>https://youtu.be/Cz5B5KOoDuw</u>





eHealth Projects IHE International joins healthcare professionals and IT vendors to build robust and relevant interoperability specifications.

IHE is organized per domains.

The integration profiles of a domain are assembled into the <u>domain</u> <u>Technical</u> <u>Framework</u>.

Each domain has a planning committee and a technical committee, or a single committee combining the two roles.





### Connectathons



Next Dates: Japan: Oct 15-19, 2018 US: Jan 21-25, 2019 Europe: Apr 8-12, 2019

- Week-long testing sessions organized annually per continent (Japan, North-America, Europe ...).
- Enable IT vendors to test the interoperability of their solutions with their peers.
- Accelerate the refinement of the specifications (integration profiles).
- Once finalized, the status of an Integration Profile changes from "Trial Implementation" to "Final Text", and the specification is then integrated into the domain Technical Framework.





#### PaLM scope covers:

- representation and exchange of digital documents, structured data, and images associated with services performed by clinical laboratories<sup>(1)</sup> and pathology laboratories<sup>(1)</sup> on in-vitro specimens collected from a patient or a non-living material;
- □ steering of analytical and peri-analytical automated devices;
- representation and exchange of structured data related to specimen management, long term storage (for instance in biobanks) and reuse;
- secondary use of in-vitro diagnostic observations and related clinical observations;
- representation and exchange of structured data related to the workflows of transfusion medicine around blood product receivers.

(1): Laboratory specialties in scope: clinical chemistry, hematology, coagulation, blood gas, microbiology, immunology, transfusion medicine, HLA, fertility, AMP, cytogenetic, drug monitoring, toxicology, surgical pathology, autopsy, cytopathology, image cytometry, immunohistochemistry, clinical genomics



# **IT Systems in scope**

- Electronic Healthcare Record Systems (EHR-S) in hospital and ambulatory care settings
- Clinical and/or anatomic pathology lab information systems (LIS)
- Public Health lab information management systems (LIMS)
- □ Electronic healthcare record shared infrastructures (PHR, HIE ...)
- Robotic specimen container distributers
- barcode labelers
- Robotic devices peri-analytical devices in the laboratory work area
- □ IVD analyzers in laboratory or on the point of care
- Middleware systems handling a set of analyzers and/or of peri-analytical devices, in laboratory or on the point of care
- Imaging modalities
- PACS and digital archive systems
- Biobank management systems
- Adverse Event tracking systems (if different from EHR-S)

#### **PaLM Domain Integration Profiles**

#### Final Text

(implementer view)

----- (user view)

#### □ IHE PaLM Technical Framework (IHE LAB TF)

- Volume 1: Profiles & Use Cases
  - Laboratory Testing Workflow (LTW)
  - Laboratory Device Automation (LDA)
  - Laboratory Analytical Workflow (LAW) Profile
  - Laboratory Point of Care Testing (LPOCT)
  - Laboratory Code Set Distribution (LCSD)
  - Sharing Laboratory Reports (XD-Lab)
- Volumes 2a, 2b, 2c: Transactions
- Volume 2x: Appendices common material for Transactions

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Volume 3: Content Modules

http://www.ihe.net/Technical\_Frameworks/#PaLM

IHE PaLM v9.0 was sent to publishing 6/21/2018 8

#### **PaLM Domain Integration Profiles**

#### Supplements for Trial Implementation

Trial Implementation

- in LAB domain:
  - Inter-Laboratory Workflow (ILW) Profile
  - "Graphics and simple Images in Results (GIR)" option on LTW Profile
- In Anatomic Pathology Domain:
  - Anatomic Pathology Workflow (APW) in hospitals
  - Anatomic Pathology Structured Report (APSR)
  - Anatomic Pathology Report to Public Health (ARPH)

Brief Description of Profiles developed by the PaLM Domain <u>http://wiki.ihe.net/index.php/Profiles#IHE\_Pathology\_and\_La</u> <u>boratory\_Medicine\_.28PaLM.29\_Profiles</u> Development





# 2018 cycle publication schedule for PaLM

![](_page_10_Figure_1.jpeg)

Supplements :

LCC

CPs: 256 - 261

APSR 2 🕕

P

2 supplements for Trial Implementation: LCC, TMA

#### **Newly Published Supplements**

#### Laboratory Clinical Communication LCC

![](_page_13_Picture_0.jpeg)

# Enhance Communications for Orders

 Works together with existing profiles:

- Laboratory Testing Workflow (LTW)
- Inter-Laboratory workflow (ILW)
- LAB-6:

Filler can recommend to replace or supplement orders, placer can accept or reject recommendations

• LAB-7

Placer can request specific results to be re-examined

![](_page_13_Figure_9.jpeg)

**Trial Implementation** 

Standards: HL7 v2.5.1 and HL7v2.9

![](_page_14_Figure_0.jpeg)

![](_page_15_Picture_0.jpeg)

![](_page_15_Picture_1.jpeg)

![](_page_15_Figure_2.jpeg)

#### Anatomic Pathology Structured Report APSR 2.0

### Generalize Anatomic Pathology Structured Report

Trial Implementation

- Create generic templates
- Enhance specimen collection section
- Created in Art-Décor tooling for better
   implementation
   experience (have conformance rule
   files (XML) as well
   as text)

Standards: HL7 v3 CDA R2, LOINC, DICOM SNOMED CT

![](_page_17_Figure_6.jpeg)

#### APSR 2.0: Layout of sections and entries

#### APSR 2 (continued)

#### <u>Art Décor view</u>

#### Template Anatomic Pathology Structured Report Content Module 2014-05-13 11:57:57

d	1.3.6.1.4.1.19376.1.8.1.1.1					Effective Date	valid from 2014-05-13 11:57:57		
tatus	😑 Draft					Version Label	2.0		
lame	AnatomicPathologyStructuredReportContentModule					Display Name	Anatomic Pathology Structured Re	port Content Module	
Description									
ontext	Pathname /								
abel	PaLM Suppl. APSR 2.0-3: 6.3.1.1 APSR clinical document content mod	lule							
lassification	CDA Document Level Template								
pen/Closed	Open (other than defined elements are allowed)								
ssociated with	Associated with 14 concepts								
lsed by / Uses	Used by 1 transaction and 0 templates, Uses 19 templates								
elationship	Specialization: template 2.16.840.1.113883.10.12.1 (2005-09-07)								
xample	example for use case #1								
Expand All   Collapse All  Sear	ch by name								
item		DT	Card	Con	onf Desc	cription			Label
▼ hl7:ClinicalDocument			1 1	М					PaLM S 6.3.1.1 docume
@classCode		cs	01	F	DOC	CCLIN			
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		0	Associat	ed wit	with conce	epts:			
			psr-dat	taelem	ement-58	Anatomic Pat	hology Structured Report	APSR	
▼ hl7:templateId		Ш	11	М	This follo	element is identifying the set of constraints applied ows to indicate compliance with the APSR 2.0 conter	to the CDA R2 standard by this IHE specific It module specification.	cation of a AP report. The following templateId SHALL be present and value	d as PaLM S 6,3,1,1 docume
@root		uid	1 1	F	1.3.6	6.1.4.1.19376.1.8.1.1.1			
hl7:realmCode		CS CWE	1 1	М	This conti	element SHALL be present and is valued from the text of this profile used as it is without any further e	RealmOfUse [2.16.840.1.113883.1.11.11050 extension, the realm code SHALL be <realm used the realm code SHALL identify this of</realm 	<ol> <li>subset, within the VocabularyDomainQualifier value set. In the internation Code code="UV"/&gt; (universal).</li> </ol>	al PaLM S 6.3.1.1 docume
♥ hl7:typeId		11	11	М	This Clini Clini	element is a technology-neutral explicit reference to isoBocument/typeId@root = "2.16.840.1.113883.1. isoBocument.typeId@extension = "POCD_HD00004	o the standard CDA R2. It SHALL be presen 3" (which is the OID for HL7 Registered mo 0" (which is the unique identifier for the CD.	t and valued as follows: dels): A, Release Two Hierarchical Description).	PaLM S 6.3.1.1 docume
@root		uid	11	F	2.16	5.840.1.113883.1.3			
@extension		st	1 1	F	POC	D_HD000040			
▼ hl7:id		11	1 1	М	Clini globi	icalDocument/Id SHALL be present. It represents th ally unique identifier, in accordance with CDA R2, w	e unique instance identifier of the clinical do ithout further constraints.	ocument. The combination of the root and extension attributes SHALL provid	e a PaLM S 6.3.1.1 docume
@root		uid	1 1	R	Here	e the OID for PAT exemplary instances, in practice t	he OID of the LIS		
@extension		st	11	R	Here	e a hypothetical document ID, most often derived fr	om the accession number		
		Constraint	A report The unic ic	may que id d@root nd opt	y have se d of the ot, which ptionally	everal successive revisions over time, in case correc current revision of the report is carried by the id ele h SHALL be an OID, id@extension, which can be any string so that the	tions or complements are provided by the comment, and is composed of concatenation of the two attributes root and	ustodian after the initial release of the report. extension provide a globally unique id, which identifies this release of the m	eport.
		020							

#### APSR 2 (continued)

#### Mediawiki view: http://wiki.hl7.de/index.php?title=IG:Pathologiebefund

APSR-11 - Derivative specimens: Specimens derived from primary specimens for ancillary studies, which may be sent to a reference lab or done in another part of the same institution, are included in the scope of this profile. The results produced on a derived s

#### **VOLUME 1 - PROFILES**

#### 10 Anatomic Pathology Structured Report (APSR) Profile

This content profile describes an anatomic pathology structured report (APSR) as a digital document to be shared or exchanged between pathology laboratories and other care providers and institutions

Anatomic pathology structured reports document the findings on specimens removed from patients for diagnostic or therapeutic reasons. This information can be used for patient care, clinical research and epidemiology. Standardizing and computerizing anatomi the exchange and reuse of the content of these reports.

This content profile describes a digital anatomic pathology report shared in a human-readable format, which may include images, and which also contains findings and observations in a machine-readable format, to facilitate the integration of these into the databas this content.

The scope of this IHE content profile covers all fields of anatomic pathology (cancers, benign neoplasms as well as non-neoplastic conditions) as well as cytopathology

Goldsmith, J.D., et al., "Reporting guidelines for clinical laboratory reports in surgical pathology" Arch Pathol Lab Med, 2008. 132(10): p. 1608-16, is the first source of specification for this content profile. This article delineates the required, preferred, and optional

This source is complemented by the "cancer checklists" produced by the College of American Pathologists, and by the "comptes rendus d'anatomopathologie : données minimales à renseigner pour une tumeur primitive" produced by the French society of pathol German "Guideline Pathology / Neuropathology" (formerly TM-30) of the Sector Committee Pathology for the implementation of DIN EN ISO/EC 17020.

This profile has also benefited from the guidance on cancer AP reports provided by the North-American Association of Central Cancer Registries; some of the example snippets captured in the profile leverage the NAACCR Standards for Cancer Registries, Volur

#### 10.1 APSR Actors/Transactions

This section defines the actors, transactions, and/or content modules in this profile. General definitions of actors are given in the Technical Frameworks General Introduction Appendix A published here.

Figure 10.1-1 shows the actors directly involved in the APSR Profile and the direction that the content is exchanged.

A product implementation using this profile must group actors from this profile with actors from a workflow or transport profile to be functional. The grouping of the content module described in this profile to specific actors is described in more detail in the "Require

![](_page_19_Figure_16.jpeg)

Figure 10.1-1 APSR Actor Diagram

Table 10.1-1 lists the content module(s) defined in the APSR profile. To claim support with this profile, an actor shall support all required content modules (labeled "R") and may support optional content modules (labeled "O").

#### Table 10.1-1: < Profile Acronym>Profile - Actors and Content Modules

Actors	Content Modules	Optionality	Reference
Content Creator	Anatomic Pathology Structured Report 1.3.6.1.4.1.19376.1.8.1.1.1	R	PaLM TF-3: 6.3.1.2
Content Consumer	Anatomic Pathology Structured Report 1.3.6.1.4.1.19376.1.8.1.1.1	R	PaLM TF-3: 6.3.1.2

#### Transfusion Medicine – Administration (TMA)

### Tracking Adverse Events During Transfusion Administration

Trial Implementation

- First in family
- Event tracking during Administration (optional patient matching verification step) = green

 Future expansion: Assigning units to collecting units = orange

Standards: HL7 v2.x, LOINC, SNOMED CT

![](_page_21_Figure_6.jpeg)

![](_page_22_Picture_0.jpeg)

### WE NEED YOUR HELP

• For more detail and to access the TMA as published for comment:

http://ihe.net/uploadedFiles/Documents/PaLM/IHE\_PaL M\_Suppl\_TMA\_Rev2.0\_PC\_2018-04-27.pdf

- We are looking for stakeholders interested in testing this in connectathons (applies to ALL PaLM profiles)
- We are planning more elements of the Transfusion Medicine life cycle and would like input from stakeholders

![](_page_23_Picture_0.jpeg)

#### Specimen Event Tracking (SET)

### **Manage Specimen Transport Tracking**

- Provide common framework for IVD vendors to manage specimen passing in the laboratory in different settings (intra- and inter-organizations and facilities)
- Use cases:
  - #1 Specimen Collection Tracking
  - #2 Specimen Intra and Inter organization transfer
    - No/re-identification, reject by receiver
  - #3 Intra Laboratory IVD Specimen Tracking
  - #4 Biobank Specimen Tracking
    - Collection
    - Retrieve from biobank for testing (immediate or not)
  - #5 Specimen Derivation Tracking
- Reduce design burden for Laboratory Automation Systems (LAS) and Specimen Processing Devices (SPD)

![](_page_25_Figure_12.jpeg)

Standards: HL7 v2.5.1 (and pre-adopt v2.9) Others TBD

![](_page_26_Picture_0.jpeg)

### WE NEED YOUR HELP

- For more detail and to access current work on SET <u>http://wiki.ihe.net/index.php/Specimen\_Event\_Tracking</u>
- Working on data element matrix (defining all the elements for each of the different tracking steps
- Working on defining message structure(s) for tracking steps with the same data requirements
- Verifying all tracking steps covered

![](_page_27_Picture_0.jpeg)

#### Evolve Anatomic Pathology Workflow to Accommodate Digital Pathology

- DICOM WG26 and IHE PALM collaboration
- Anatomic pathology workflow reimagined with incorporation of image digitization
- Use cases established with initial effort focused on profile to support image acquisition
  - Primary diagnosis and secondary consultation use cases will take priority
- First white paper to be released Fall 2018 and first profile to be published December 2018

![](_page_28_Picture_0.jpeg)

# Example: actors, workflow, transactions in Digital Pathology

- 1. EHR sends case order with one or more specimens
- 2. LIS sends case results (diagnosis)
- 3. LIS requests stored image(s) for specimen
- 4. Archive returns image(s)
- 5. EHR requests all images for case (not likely?)
- 6. Archive returns image(s)
- Creator sends images for storage
- 8. Archive acknowledges image(s) stored
- LIS receives events as creator acquires, completes, modifies digital asset
- 10.LIS acknowledges / approves creator transaction

![](_page_28_Picture_12.jpeg)

![](_page_29_Picture_0.jpeg)

### WE NEED YOUR HELP

 For more detail and to access current work on Digital Pathology

https://wiki.ihe.net/index.php/APW-EDM\_White\_Paper

- Review use cases
- Review draft white paper, comment on focus of initial effort, and associated actors and transactions
- Identify how you would recommend prioritization of future efforts as part of a long term road map
- Identify which vendor partners in your organization would benefit from being involved and help us reach out to them!

![](_page_30_Picture_0.jpeg)

# If you want to contribute

- Apply for IHE International Organizational Membership Visit: <u>www.ihe.net/apply</u> (note IP Policy)
   Approved monthly by IHE International Board
   Review IHE's 200+ Organizational Members
   <u>http://www.ihe.net/governance/member\_organizations.cfm</u>
- Join IHE Laboratory Planning & Technical Committees Mailing list: <u>https://groups.google.com/a/ihe.net/forum/#!forum/palm</u>
- Non-members have limited participation: Review & comment during Supplement Public Comment period Implement IHE Profiles and test them at connectathons

![](_page_31_Picture_0.jpeg)

# Thank you

- IHE International <u>www.ihe.net</u>
- IHE Europe <u>www.ihe-europe.net</u>
- IHE North America/USA <u>http://www.iheusa.org/</u>
- The complete program of educational webinars
   <u>http://www.iheusa.org/resources-education-webinars.aspx#webseries</u>
- Overview of over 100 existing IHE integration profiles <u>http://wiki.ihe.net/index.php?title=Profiles</u>

#### **Alphabet Soup**

Acronym	Description
ANAPATH	Anatomic Pathology domain
ASIP Sante	Agence des Systemes d'Information Partages de Sante
ATNA	Audit Trail and Node Authentication
AWOS	Analytical Work Order Step
САР	College of American Pathologist
CDA R2	<b>Clinical Document Architecture Revision 2</b>
CEN	European Committee for Standardization
CIS	Clinical Information System
CLSI	Clinical and Laboratory Standards Institute
СТ	Consistent Time
DICOM	Digital Imaging and COMmunications in Medicine
eDOS	Electronic Directory of Services
EHR	Electronic Health Record
EMR	Electronic Medical Record
ETSI	European Telecommunication Standards Institute
HIE	Health Information Exchange
HIS	Health Information System
HL7	Health Level Seven
EEE	Institute of Electrical and Electronics Engineers
ETF	Internet Engineering Taskforce
ICC	In-Vitro Diagnostics Industry Connectivity Consortium
SO	International Organization for Standardization
т	Information Technology
TU	International Telecommunication Union
VD	In-Vitro Diagnostic
IAHIS	Japanese Association of Healthcare Information Systems Industry
LAS	Lab Automation System
LCC	Laboratory Clinical Communication

Acronym	Description
LCSD	Laboratory Code Set Distribution
LDA	Laboratory Device Automation
LIS	Laboratory Information System
LOI	Lab Orders Interface
LOINC	Logical Observation Identifiers Names and Codes
LPOCT	Laboratory Point Of Care Testing
LRI	Lab Results Interface
LTW	Laboratory Testing Workflow
OASIS	Organization for the Advancement of Structured Information Standards
PAM	Patient Administration Management
PCD	Patient Care Device domain
PDQ	Patient Demographics Query
PHR	Personal Health Record
POCDM	Point Of Care Demographics Manager
POCRG	Point Of Care Result Generator
QA	Quality Analysis
S&I	Standards and Interoperability
SNOMED CT	Systematized Nomenclature of MEDicine Clinical Terms
ТМА	Transfusion Medicine - Administration
UCUM	Unified Codes for Units of Measure
US	United States
W3C	World Wide Web Consortium
XD-Lab	Sharing Laboratory Reports
XDM	Cross-Enterprise Document Media Exchange
XDR	Cross-Enterprise Document Reliable Exchange
XDS	Cross-Enterprise Document Sharing 33