IHTSDO Implementation Showcase 13-14 October 2011

Abstracts for Presentations and Workshops

Presenter	Organisation	Topic	Detail	Timing
Orsolya Bali	B2i Healthcare Software Vendor, Hungary	Supporting SNOMED CT in Snow Owl	This talk discusses our implementation experience adding SNOMED CT support into Snow Owl, a terminology authoring platform. Aspects of the platform will be demonstrated that addressed challenges such as: implementing the HL7 TermInfo standard to support semantic search of SNOMED CT concepts; implementation of SNOMED CT RF2 query-based (intensional) reference sets; benefits of using off-the-shelf description logic classifiers (including ELK and FaCT++) to identify logical errors in SNOMED CT concept definitions; support for collaborative authoring via task management; and multi-user distributed authoring.	45 min
Dr Nick Booth, A/Prof Graeme Miller, Ms Julie O'Halloran, Dr John Bennett	IHTSDO International Family/General Practice Special Interest Group	An international approach to the implementation of SNOMED CT in Family/General Practice	This presentation will provide an update on progress with the joint IHTSDO and WONCA (World Organization of Family Doctors) to develop a SNOMED CT FP/GP refset and mappings to ICPC2. Also included will be details of the plans beyond development to testing, maintenance and implementation.	90 min
Beverly Knight	Canada Health Infoway	The Canadian approach to the development of Primary Care RF2 Reference Sets	The workshop will provide a description of Canada's approach to the development and implementation of a set of pan-Canadian Primary Care RF2 Reference Sets that will be used for EMR primary and secondary use. The workshop will include an overview of: • the purpose, scope and overall approach for the project • the process to develop, review/validate and publish the Reference Sets • the tools to develop the Reference Sets including the specific use of the IHTSDO Workbench • examples of the Reference Sets • lessons learned the stakeholder engagement approach	45 min
Rita H Barsoum, Alan Abilla, Bouchta	Kaiser Permanante,	Using IHTSDO Workbench as Enterprise	We'd like to showcase how Kaiser Permanente have implemented the IHTSDO Workbench to meet the terminology model and operational needs of Kaiser Permanente converging interface terminology	90 min

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Irbouh, Connie Morgan	USA	Terminology Tool	attributes as logical extensions of SNOMED CT. We'd also like to showcase the UI interface, distributed workflow, bulk import capabilities, extract, and reporting capabilities.	
Olivier Bodenreider, Jim Case, Kin Wah Fung, Jan Willis	National Llibrary of Medicine (NLM), USA	Using SNOMED CT with the UMLS	SNOMED CT is one of the terminologies used in the clinical domain and is often used in conjunction with other specialized terminologies (e.g., drug terminologies) and reference classifications (e.g., the International Classification of Diseases).	3 hours

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The Unified Medical Language System (UMLS) is a terminology integration system developed at the US National Library of Medicine (NLM), in which all major clinical terminologies are integrated. In addition to terminology integration, the UMLS provides tooling for accessing these terminologies. Users of SNOMED CT can take advantage of the UMLS in many ways (e.g., using synonyms from other terminologies to search SNOMED CT, finding correspondences between SNOMED CT concepts and other terminologies).

This tutorial demonstrates how UMLS feature can benefit SNOMED CT users.

The first half of the tutorial introduces the UMLS, terminology integration and the representation of SNOMED CT in the UMLS. The second half is a hand-on session devoted to exploring the UMLS and SNOMED CT through browsers from the UMLS Terminology Services. NLM experts will discuss practical use cases at the end of the session.

Topics covered:

- Overview of the UMLS

- SNOMED CT integration in UMLS (principles and editorial choices)

- Representing SNOMED CT in the UMLS domain model

- Applying UMLS lexical tools to SNOMED CT descriptions

- Applying UMLS quality assurance processes to SNOMED CT content

- Browsing SNOMED CT with UTS browser

- Accessing SNOMED CT content with the UTS API

- Finding correspondences to other terminologies through UMLS

- Finding terms in other languages through UMLS

- Use case: The role of UMLS in the SNOMED CT Content Request System (U.S. extension)

Level of workshop: Beginner / Intermediate / Advance

- Beginner: 60%

- Intermediate: 40%

Intended audience:

- SNOMED CT users interested in other clinical terminologies

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			- Vendors implementing SNOMED CT in EHR systems	
			- Developers of software integrating SNOMED CT	
			- SNOMED CT editors	
			- Clinical knowledge management specialists	
			<u>Necessary pre-requisites:</u>	
			- Familiarity with SNOMED CT (basic)	
			<u>Special set up/requirements for workshop:</u>	
			- Wireless access	
			- Participants should bring their own laptops	
Linda Bird, Colleen Brooks and Eileen Lim	MOH Holdings, Singapore	Singapore Drug Dictionary and Dose Forms	The Singapore Drug Dictionary (SDD) aims to improve patient care and safety by establishing a consistent drug ontology and drug data standards to be used across the entire healthcare sector and medicines supply chain including prescribing, dispensing, administration, inventory control, supply chain and drug regulation. The SDD aims to facilitate: • Semantic and functional interoperability between the existing Electronic Medical Records (EMR) from all healthcare settings and the National Electronic Health Records (NEHR), taking into consideration the specific needs in each Healthcare setting, • Effective use of clinical decision support, • Medication safety initiatives such as medication management and adverse drug event surveillance, and • Data mining, analysis and research. The development of the SDD used the following principles: • The SDD and the SDD model is developed with a flexibility to allow extensibility over time and cater for innovations in pharmaceutical and device technologies, many of which are unknown at this time, • The model is developed based on pure ontological principles to support Singapore's growing needs for biomedical research, • The clinician and EMR vendor interfaces are simplified according to their requirements, with the complexity of the above two objectives hidden in the backbone of the SDD and not visible to these users, and • Patient safety, semantic interoperability and decision support facilitation are supported by the SDD and are the focuses of clinician review and initial EMR vendor uptake. This presentation will: • Describe the SDD data model, and how it plans to link with the proposed international IHTSDO Pharmacy model; • Describe how the SDD hierarchies support multiple care settings and medication use cases, • Present the fully defined Dose Form data model being used; • Demonstrate the interim tooling being used to release SDD extension concepts; Discuss future plans, including full tooling support and medication safety management.	45 min

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Ronald Cornet, Jay Kola	IHTSDO Implementation SIG	Considerations for implementation of RF2	This workshop will be an interactive session aimed at providing answers to pressing questions pertaining to RF2. Participants will work in small groups to address a number of topics/questions. The end result of the workshop will be a set of documents/slide decks/demonstrators/ reference implementations and/or relational models, which provide practical guidance on implementation of RF2. Topics covered: • Migration of content from RF1 to RF2; • Designing RefSets based on RF2 specification • Maintenance of Content using the RF2's features (delta, effectiveTime, etc); • Integrating content based on RF2 data structures - RefSets (including usage of namespaces, moduleId, etc) Level of workshop: Intermediate / Advance Intended audience: People considering migrating existing RF1 content to RF2 People considering adoption of RF2 People involved in implementing RF2, People interested in expanding their knowledge of RF2 Necessary pre-requisites: Basic knowledge of RF1 structure – for participants interested in migration from RF1 to RF2 Understanding the basics of RF2 data structures and related features Recommended Knowledge: Understanding of relational databases (relational models) Basic Knowledge of SNOMED CT hierarchies and content organization Special set up/requirements for workshop: Send a declaration of interest expressing current knowledge and topic/question that the participant would like to be addressed.	1 day
Christopher Reed and Heather Grain	Health eWords Pty. Ltd Software Vendor, Australia	Solution to SNOMED CT Implementation in Clinical Systems	This presentation describes the requirement to collect SNOMED CT for clinical use and ICD for administrative reporting purposes in emergency department and demonstrates a trial of a software based solution to deliver both code system concepts directly from clinical input without change to the clinical workflow. Specifically the presentation includes: • Identification of potential fields of text which would provide data needed for SNOMED CT representation and for ICD coding to meet reporting requirements. • Evaluation of the documentation available in existing electronic health record systems • Outline of the software developed to analyse text and produce SNOMED CT and ICD including the use of context. This approach does not map from SNOMED CT to ICD, rather it uses natural language processing to directly produce each required concept/s and to deliver concepts to appropriate fields in the local system. For example: Test analysis showed that clinicians often include both diagnostic and event information in their descriptive text. The	45 min

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			system is designed to return disorders/clinical findings to the diagnosis field and event information to the cause of injury field from a single data entry point. • Evaluation of the ability to produce accurate SNOMED CT and ICD results from the free text information. This trial addressed issues of direct data capture of SNOMED CT and ICD as well as a different approach to the requirement for mapping from SNOMED CT to ICD. The study included 1 full month of all cases attending a large regional hospital emergency department. Initial results are indicating useful findings regarding documentation in EHRs, and significant success in both the non-invasive clinical implementation of SNOMED CT and support of ICD coding in non-inpatient environments. The results of the trial, along with expected and incidental benefits, will be presented.	

Zac Whitewood-Moores;
 	
Ken Lunn
	NHS Connecting for Health, UK	Care planning content using SNOMED CT
		
		AND
		
		Moving into international Collaboration
			The implementation of SNOMED CT in care planning content is explored using a supplier neutral approach to publication of content at a national level. To date content development has focussed on the development of a model for association of content, guidance for implementers. Content is currently available to meet generic needs together with content focussed on the needs of early adopter organisations / suppliers. The release of content is currently in "technical preview" and progression to "draft for trial use" is planned in April 2012 following an early adopter pilot.
			
			The presentation explores the challenges experienced by the developers:
			
			• An approach which can be adopted by multiple suppliers
			
			• Wider issues with the development/implementation of Electronic Patient Records in acute settings
			
			• Pre-coordination roadmap
			
			• Sufficient post-coordination not supported by applications
			
			• Tension between terminology and descriptions familiar to users (nurses and patients)
			
			• Content for "needs"
			    o "Regime/therapy" and "care management" content
			    o Care planning with different granularities, "activities" as "needs"
			
			• Concept model for "goals"
			    o Restricted to findings
			    o Increasing amounts of content being identified as "situations"
			    o Specific issues with negation
			    o Context values for goals (achievement statuses)
			
			• Concept model for "activities"
			    o Care planning with different granularities, "needs" as "activities"
			    o A condensed set of context values for actions
				90 min

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			• Professional credibility for content • Diversity of health organisation approaches even with a "National Health Service" The second part of this session will focus on discussions and proposals on how this approach can be moved forward into an international collaboration.	

Gwen Smith , Ian Green	IHTSDO	Using the Arena to Edit SNOMED CT	This course will be delivered by a combination of the following methods:
			• Presentation and instruction
			• Hands on experience of the tool utilising Tutor led examples
			• Tutor supported hands on use of the tool following set examples
			
			Course Objectives: The course is intended as an Introduction to the use of the IHTSDO Workbench Arena function and will briefly cover its functions and enable attendees to obtain 'hands on' experience via tutor led examples followed by tutor supported hands on experience. It is not intended to provide detailed knowledge of the SNOMED CT concept model or any editing principles and constraints which should / may be applied.
			Upon completion of the course you will be familiar with how to use the Arena to complete the following SNOMED CT editing tasks:
			• Configuring panels in the Arena and understand the relationship to the detailed tab views.
			• Editing SNOMED CT concepts using the; retire, move, Clone and new concept functions.
			• Editing Descriptions using the 'drag n drop' function to retire, clone, clone & retire descriptions within a concept or between concepts.
			• Editing Relationships and relationship groups by using the 'drag n drop' function to retire, clone, clone & retire relationships within a single concept or between concepts.
			You will also have an understanding of:
			• The editing template function.
			• The bulk editing function
			
			Who should attend? The course is aimed at anyone who is familiar with SNOMED CT and who may be considering using the IHTSDO Workbench to author SNOMED CT content either within the International release or a National or local extension
			
			Pre requisites: An understanding of SNOMED CT and its structures. No instruction on SNOMED CT structures will be provided as part of this training.
			
			Course Content: The course content is structured broadly around the objectives and will be split into the following sections:
			1. Tutor presentation (20 minutes) including instruction on:
			  a. How to navigate to and configure the panels in the 'Arena' and their relationship to the detailed tab views
			  b. Editing SNOMED CT concepts with particular emphasis on using the retire, move, Clone a concept and new concept functions
			  c. Editing Descriptions using the 'drag n drop' function to retire, clone, clone & retire descriptions within a concept or between concepts.
			  d. Editing Relationships and relationship groups by using the 'drag n drop' function to
				90 min x 3 slots over 1 day

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			retire, clone, clone & retire relationships within a single concept or between concepts. e. Brief overview of the bulk editing function 2. Tutor led examples (20 minutes); the tutor will lead the trainees through a number of examples from a supplied work sheet which demonstrates the use of the Arena functions covered. 3. Tutor supported examples (20 minutes); the trainees will be given time to work through some examples from a supplied work sheet. Each trainee will be supported by the Tutors as they require.	
Australian Clinical Terminologies User Group	Australian Clinical Terminologies User Group	Australian Clinical Terminologies User Group – Overview	The Australian Clinical Terminologies User Group (AuCTUG) has been established to support the further development, implementation and realisation of benefits from SNOMED CT and other clinical terminologies, by providing a community of interest via which a wide range of stakeholders can be kept informed about and contribute to relevant issues. It is an open community, supported by the National eHealth Transition Authority (NEHTA) with interests reflecting those of the Standing Committees of IHTSDO. This presentation and discussion forum will explain the roles, purposes and activities of the AuCTUG; seek input about comparable approaches in other countries; and promote the User Group and its activities.	45 min
Graham Pegler	New South Wales Health, Australia	Implementing SNOMED CT to capture diagnosis in Emergency Departments	An outline of the drivers for adoption of SNOMED CT for the capture of diagnoses in Emergency Departments in New South Wales Public Hospitals is followed by a discussion of the issues and approaches. For Commercial-Off-The-Shelf (COTS) software there are constraints and functionality that are inherent in the package purchased, and features of the user interface that significantly influence the manner in which SNOMED CT can be adopted. In addition, the utility of the data is discussed, not just within the context of the Emergency Department but for downstream consumers of that data – both clinical and analytical, and the issues that arise as change occurs. Current steps and future plans for change to improve capture of diagnosis in Emergency Departments are also discussed.	45 min
Anthea Ward	Austin Health, Australia	Piecing together the puzzle – an implementation experience	Austin Health, a 3 campus, 700+ bed tertiary facility in Melbourne went live with a new clinical system in June 2011 as part of the state HealthSMART program. This included SNOMED CT. It is too early to assess the benefits, but it is important to articulate the challenges and ensure that relevant information, skills and resources are available for future SNOMED CT implementations. There are a host of implementation decisions to be taken, all with longer term implications. This presentation will highlight areas in which we have fared well, and others where we have struggled. The aim is to highlight areas in which additional implementation guidance is required from IHTSDO, national eHealth programs etc.	45 min
Denham Pole	Sri Lanka	SNOMED CT Implementation Experience in Sri Lanka	We have about 4 years of SNOMED experience in rural hospitals in a developing country and currently have over 30 hospitals running our software. The use of SNOMED-CT to look up the diagnoses, symptoms and procedures has made it possible for the data entry to be done by doctors and nurses - unlike systems using ICD-10. Some of our hospitals now run the out-patients departments paperless, thanks to the ease of using SNOMED. As well as describing our experiences I could give a quick demonstration of the system. The new version is open source and will be released soon (although the use of SNOMED will depend on each country's licensing details).	45 min
Vicky Fung	Hong Kong	Implementation	The Hong Kong Hospital Authority (HA) is now acting as a technical agent to assist the HKSAR	45 min

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	Hospital Authority	Experience at Hong Kong Hospital Authority	government to develop the electronic health record (eHR). One of the major tasks is to develop various standards to facilitate building an interoperable eHR. The HA plan to use SNOMED CT as a 'backbone' for HK Terminology Table. The HA has a HA Clinical Vocabulary Table (HACVT) which includes diagnosis and procedure terms which are originally from ICD 9CM. The table has been directly used by clinicians when they enter diagnosis and procedure terms into the CMS since 1995. We have extended the HACVT upon our clinicians' request on monthly basis. Currently we have added around 8000 diagnosis and 3000 procedure terms into the table (despite we are still using a very very old ICD 9 CM version). All terms in the HACVT is being mapped to various international classification systems, e.g. ICD 9 CM, ICD 10 codes as appropriate. We are currently preparing something on ICPC as well (but this won't be the whole table). HA is only using the SNOMED III data (also a local extended version) for the histopathology data at its 11 laboratories. Support to the eHR development The government planned to develop a territory based eHR and invited HA to assist in standards development, obviously that includes terminology. In relation to this, HA is planning to migrate the HACVT to the HK Clinical Terminology Table to support the eHR development by : 1. expanding the scope to include other essential domain areas, e.g.organism, histology, drug.... 2. mapping the current HACVT terms to SNOMED CT 3. adding the SNOMED CT concepts which are not mapped to the HACVT to the table (in future)	
QA Committee	IHTSDO Quality Assurance Committee	IHTSDO Approach to Quality Assurance	This session will outline the development and implementation of the IHTSDO Quality Assurance Framework, and supporting toolkit. It will also cover various examples of application, other quality initiatives and plans for the future.	90 min
Jane Millar, Kent Spackman and Ian Green	IHTSDO	IHTSDO updated approach to content development	This session will outline the work being undertaken by the IHTSDO in updating, documenting and implementing its SNOMED CT content development process based on experience to date and other exemplars in industry.	90 min
Penni Hernandez	IHTSDO	Introduction to SNOMED CT	This introductory course is for anyone interested in acquiring a broad understanding of SNOMED CT®. This course covers all basic components of SNOMED CT® hierarchies, concepts, descriptions, and defining relationships with frequent examples to facilitate understanding. It is appropriate for healthcare managers, clinical staff, and system developers who are interested in an overview of the value of SNOMED CT®. No previous knowledge of SNOMED CT® is required, some healthcare background is helpful but not essential. Participants will be able to: • Describe the essential components of SNOMED CT® and how it is organized • Understand how SNOMED CT® fits with an Electronic Health Record • Recognize the benefits of using interoperability standards. • Identify uses of SNOMED CT® for the representation and retrieval of health information. • Understand the avenues for interacting with IHTSDO and how to make suggested changes or improvements.	90 min x 2 slots

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Palle Gerry Petersen	IHTSDO Member countries	How to manage the translation of a terminology	The presentation will cover experience from translating the large clinical terminology SNOMED CT. We would like to share our experiences from our translation projects with others who are about to enter into similar translation tasks. The background is that Denmark, Sweden and Canada have translated SNOMED CT as part of the national eHealth strategies in the countries. Interdisciplinary collaboration and vigilance regarding form as well as clinical relevance are extremely important in order to ensure the usability of the terminology in connection with implementation in health IT systems: the linguistic as well as the semantic quality must be assured. The main topic for this presentation is to show and discuss how to manage the translation of a terminology. We will address topics such as: ·How to organise a large (or minor) translation project · Examples of tools needed for this kind of project. · Examples of how experiences from translation management be reused. · Illustration of how knowledge can be shared and reused between countries and different languages. · How to use network in order to share experiences and continue quality assurance. The presentation will show and discuss: · Concept contra term translation · Translation process control · Training of translation team members · Linguistic guidelines, editorial support, linguistic consistency · Management of terminology for translation e.g. subset selection · Translation IT-support · Management of process, product quality and cost control l·Handling of errors and inconsistencies in the original terminology.	45 min
David Markwell		SNOMED CT Implementation - A Route Planner	This session is aimed at anyone developing, procuring or deploying SNOMED CT enabled applications. The starting point is a typical requirement for capturing and selectively retrieving clinical information. The intended end point is an implementation that applies the features of SNOMED CT to meet the requirement and deliver practical benefits. To reach that destination, decisions need to be made about how software should interact with the components of SNOMED CT at each stage in the information life cycle. The key issues discussed are effective support for SNOMED CT-enabled services - including data entry, storage, communication and selective retrieval. Rather than attempting to provide detailed and definitive directions, the presentation focuses on providing an understanding of the implementation landscape. This is supplemented by signposts to specific parts of publicly accessible SNOMED CT documentation which provide more detailed information.	90 min
Dr James R Campbell MD, Hazel Brear, Dr Kin Wah Fung MD,	IHTSDO Mapping SIG	SNOMED CT to ICD-10 Mapping Tool – Feature Highlights, Demonstration and	The Mapping Special Interest Group of the IHTSDO initiated a project in 2008 to develop a validated, standard reference Map for use by any national release centers who have a requirement to develop a cross-map from the Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT) to the World Health Organizations (WHO) International Statistical Classification of Diseases and Related Health	3 hours

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Ginette Therriault		Adaptation for Other Mapping Work	Problems, Tenth Revision (ICD-10). The project has since become a collaborative project between the two International Standards Organizations; IHTSDO and WHO. Due to the magnitude of the project, it has been planned in phases. Phase one, which covers 9,800 frequently used SNOMED CT concepts found in clinical data repositories in Member countries, will deliver immediate value to users of the Map. New mapping tools, methodology and processes are developed, tested and deployed. The lessons learned and work throughput statistics gathered in this phase will inform future mapping work. For example, in the U.S., the ongoing mapping work from SNOMED CT to ICD-10-CM is based heavily on the methods and tools developed in this project.	
Dr James R Campbell MD, Hazel Brear, Dr Kin Wah Fung MD, Ginette Therriault	IHTSDO Mapping SIG	SNOMED CT to ICD-10 Mapping Project – Report on Phase One: Results, Lessons Learned and Future Work	The Mapping Special Interest Group of the IHTSDO initiated a project in 2008 to develop a validated, standard reference Map for use by any national release centers who have a requirement to develop a cross-map from the Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT) to the World Health Organizations (WHO) International Statistical Classification of Diseases and Related Health Problems, Tenth Revision (ICD-10). The project has since become a collaborative project between the two International Standards Organizations; IHTSDO and WHO. Due to the magnitude of the project, it has been planned in phases. Phase one, which covers 9,800 frequently used SNOMED CT concepts found in clinical data repositories in Member countries, will deliver immediate value to users of the Map. New mapping tools, methodology and processes are developed, tested and deployed. The lessons learned and work throughput statistics gathered in this phase will inform future mapping work. Phase one uses SNOMED CT (July 2010) as the source and ICD-10 Second Edition (2008) as the target. The Map created will support the epidemiological, statistical and administrative reporting needs of the IHTSDO Member countries and the WHO Collaborating Centres	90 min
Dr Chris Tackaberry	Clinithink Ltd	Narrative vs Structure: why do we have to choose?	CEO of Clinithink Ltd, Dr Chris Tackaberry, discusses opportunities for EMR /EHRsystem vendors to transform clinician user experience and improve healthcare efficiency through the use of Snomed-enabling technologies. Dr Tackaberry will also explore the benefits to healthcare organisations and regulators that come from leveraging new technologies and methodologies to unlock the value of aggregate un-structured narrative content.	45 min
David Liebovitz, MD Carl Christensen	Northwestern Medical Faculty Foundation Northwestern University, Feinberg School of Medicine	Strategies to Improve Problem List Management within Clinical EHR Workflow	Existing publications and clinical experience suggest problem lists are not routinely updated within medical records. Several explanations for this deficit exist, and, in particular, when electronic records are used. These include a lack of effective problem list integration into clinical workflow and difficulty identifying the appropriate term to add to the problem list. This workshop and discussion will seek to elicit and categorize strategies for improving problem list management within clinical workflow. To begin the discussion presenters will describe approaches considered and deployed within a multi-specialty academic practice using electronic records feeding an enterprise data warehouse at Northwestern University. These strategies include implementation of a terminology mapped to SNOMED CT from Intelligent Medical Objects in order to enhance specificity and include commonly used synonyms, deployment of a validated algorithm shown to reveal missing problem list items, and automated retrieval of past diagnoses that are not represented within the problem list. Learning	45 min

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			objectives for the session will include attendees being able to describe several techniques likely to improve management of problem lists within electronic medical records.	
Australian Clinical Terminologies User Group	Australian Clinical Terminologies User Group	Implementers Workshop	This workshop will provide information and guidance to those who are involved with or considering implementations of SNOMED CT. It will provide practical tips and learnings from Australian case studies. It will include small group opportunities to ask questions of experts, share and discuss issues and experiences. The target audience is people who have been asked to implement SNOMED CT; asked how to implement SNOMED CT; or are endeavouring to understand how SNOMED CT could work in your organisation.	3 hours
Jane Howarth	IHTSDO Translation SIG	The IHTSDO Guidance for help with Translation	This session will outline IHTSDO guidance on translation and managing the translation process as has been developed by the IHTSDO Translation Special Interest Group. Additionally there will be an introduction to the quality assurance mechanisms for translations which are proposed and currently being taken forward to be approved IHTSDO Guidelines. This quality work has been undertaken by the IHTSDO Translation Quality Assessment Project Group.	45 min

Vendors exhibiting

Australian e-Health Research Centre   Health Language, Inc   B2 International Ltd   Orion

Clinithink Ltd   IMO Intelligent Medical Objects ink   Porterclan