Appendix C: Principles for Accepting Content in the International Release

The statement of scope for the International Release is that it includes content necessary for international conformance and interoperability. Content that is within the scope of the International Release is restricted to the International Release and may not be modified or replaced by an extension, unless explicitly permitted by SNOMED International. Affirmative answers to the following questions are criteria for inclusion in the International Release:

- Is it useful in more than one national healthcare system?
- Does it need to be understandable in electronic health applications in more than one national healthcare system?
- Can it be used in electronic health applications beyond a patient's national healthcare system, i.e. if a patient were to travel or relocate to a different country?

Use of proprietary names and works

This section considers scope as it relates to the incorporation of proprietary names (e.g. names of clinical forms or tools, and drugs) into SNOMED CT. The section is divided into two sub-sections. The first one covers SNOMED International itself. The second one covers third parties (e.g. SNOMED International Affiliates) who implement SNOMED CT in electronic health applications (Note: there is some overlap between these sections).

Clinical form or tool

In this section, we refer to the owner of a clinical form or tool. This term loosely refers to the person or organization who owns the intellectual property rights of the form or tool. This may be the individual or group who originally created the form or tool, the organization that employed the creators, or a commercial organization to whom the creators assigned their intellectual property rights.

SNOMED International

Names

Incorporating the name of a clinical form or tool (e.g. the XYZ Test), or the name of the score generated by a form or tool (e.g. the XYZ Test Score) into SNOMED CT does not require a license from the owner. It is possible that the owner holds a trademark (which may be registered or unregistered) representing the name or score, but simply incorporating that word into SNOMED CT does not infringe on the trademark.

This also applies to brand name drugs. SNOMED International does not need to obtain the permission of the trademark owner simply to include a reference to the brand name drug in SNOMED CT.

Questions

A clinical form or tool, including the wording of the individual questions within the form or tool, is generally a literary work and qualifies for copyright protection. The copying of all or any substantial part of a literary work, without a license from the owner, infringes on the copyright.

It is possible, though unlikely, that incorporating the wording of an individual question from a clinical form or tool may infringe on the copyright. However, it is much more likely that SNOMED International would systematically include all of the questions from the form or tool in SNOMED CT. Except in the case of the simplest of forms, that is likely to infringe on the copyright, without permission from the owner.

Answers

Certain questions may have a range of pre-determined answers. This could be as simple as Yes/No or a number within a specific range, but may also be more substantial (e.g. needs help cutting, spreading butter, etc., or requires modified diet).

Incorporating very simple answers into SNOMED CT does not require permission. However, incorporating more substantial text into SNOMED CT generally infringes on the copyright. This usually does not apply to individual answers, but it almost always applies when entire sets of answers are incorporated.

Scores

The principles that apply to individual answers also apply to the overall score generated by a clinical form or tool.

The incorporation of numbers does not infringe on the copyright. However, when each possible score has an associated textual description and all possible scores and descriptions are incorporated into SNOMED CT, a license is required.

Concepts representing questions, answers, or scores
A concept may be introduced into SNOMED CT that represents the text of questions, answers, or scores. For example, a form may include a question about a person's ability to dress and a range of possible answers. SNOMED CT may incorporate neither the text of the question nor any of the possible answers, but instead may incorporate a concept such as ability to dress. Similarly, if the form contains 20 questions, SNOMED CT may want to introduce 20 concepts, for XYZTest_Result1, XYZTest_Result2 and so on, to XYZTest_Result20.

The incorporation of a single concept into SNOMED CT, based on a question, answer, or score on a clinical form is highly unlikely to infringe on the copyright. However, if SNOMED CT systematically introduces a concept for every single question on a clinical form, it is likely to infringe on the copyright.

These concepts (e.g. ability to dress) may already exist in SNOMED CT, or they may be added in other contexts (This does not apply to concepts that represent specific questions within a form). This is unlikely to result in a copyright infringement.

Implementation of SNOMED CT

Names

The use of the name of a clinical form or tool or of a brand name drug will usually not infringe on the copyright. However, caution should be exercised by implementers who wish to use trademarks in a commercial context, i.e. a system that enables drugs to be purchased electronically. SNOMED International does not advise implementers on this matter, but recommends that implementers, who are in any doubt, contact the trademark owner.

In general, implementers should make no greater use of a trademark than is necessary. For example, displaying a graphical mark (e.g. a logo) on a screen or in printed material should be avoided.

Questions, answers, and scores

Implementers should manage questions, answers, and scores in the same way as SNOMED International (see above). When the incorporation of content from a clinical form or tool infringes on the copyright, the system reproduces (by display or print) the content also usually infringes. This means that the license to incorporate content by SNOMED International should also cover the system implementer.

Preexisting terms

As noted above, terms in a clinical form may already exist within SNOMED CT, even though they have not been copied from the form. This is not copyright infringement by SNOMED International. If, however, a system implementer chooses to arrange a collection of these pre-existing terms in a way that reproduces all or a substantial part of a clinical form (e.g. by populating a drop-down box with all of the possible answers to a specific question on the form), that may infringe on the copyright.

Form structure

A system may reproduce the structure and layout of a clinical form on a screen display or printed output (e.g. to make the system more accessible to users who are familiar with a paper-based form). This may infringe on the copyright, unless the structure or layout is very minimal (e.g. a bulleted list). An implementer who wishes to emulate the look and feel of a clinical form should seek a license from the owner.

Algorithms or logic

System implementers may use the algorithm or logic inherent in a clinical form or tool (e.g. the method by which an overall score is calculated). For example, a clinical form may instruct the user to perform a mathematical operation on the individual answers to produce the overall score, and the same operation may be carried out by the system. The use of the algorithm or logic is an infringement. SNOMED International avoids such use and encourages system implementers to contact the owner to discuss possible infringement.

Management of non-human content

Non-human content may be included in a request for new content via the SNOMED International Request System (SIRS) or may be identified in the International Release. Careful consideration is required to differentiate content that belongs in the International Release versus an extension. The basic principle is that content used in human medicine should be in the core. Content that is strictly non-human may be managed in an extension.

Examples of non-human content,

- Egg-related coelomitis (disorder)
- Dehorning (procedure)
- Bone structure of wing (body structure)

Types of content that should be in the core include the following:

- **Diseases and findings.** Anything that can occur in both humans and animals should be in the core.
- **Material entities.** Every substance that can cause adverse effects should be in the core (with the understanding that poisonings and adverse effects in humans may be caused by virtually any substance). Some material entities may be of interest only in a non-human or veterinary context. These entities may be added to, or left in, a veterinary extension.
Organisms. Most organisms should be in the core, with some exceptions. There are over 20,000 organism codes in the Veterinary Extension maintained by the Veterinary Terminology Services Laboratory (VTSL) at Virginia Tech University. Generally, these are not transferred to the core, except when used in public health or human medicine or when requested by more than one SNOMED International member country.

Organisms that are not used in human medicine can be added to the Veterinary Extension. It is publicly available to SNOMED International member countries and to Affiliate Licensees. To access the Veterinary Extension, see http://vtsl.vetmed.vet.edu or contact VTSL at vtsl.extension@gmail.com

Principles for determining National Extension content

A National Extension includes content outside of the scope of the International Release, but necessary for national conformance and interoperability. Each member-state determines the application and interpretation of this scope and whether or not concepts should be added to their extension.

Criteria to determine if concepts should be included in a National Extension include affirmative answers to the following:

- Is the concept outside of the scope of the International Release, but necessary for national conformance and interoperability?
- Is it useful throughout the national healthcare system?
- Does it need to be understandable throughout the national healthcare system?
- Does it need to be shared in a reproducible manner within the national healthcare system?

If so, then the concept may be eligible for the National Extension.