2017-04-25 Editorial Advisory Group Face to Face Meeting

GoToMeeting Details

SNOMED Int'l Editorial Advisory group
SNOMED International - Editorial advisory group conference call
Tuesday Apr 25, 2017 9:00 AM - 17:00 PM UTC

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United Kingdom: +44 20 3713 5011

Attendees

Chair:
  • Jim Case

AG Members
  • Keith Campbell (AM)
  • Guillermo Reynoso
  • Bruce Goldberg
  • Paul Amos

Observers:
  • Emma Melhuish
  • Jeremy Rogers
  • Toni Morrison
  • Raj Dash
  • Mary Kennedy
  • Farzaneh Ashrafi
  • Nicola Ingram
  • Donna Morgan
  • Kin-Wah Fung
  • Emma Melhuish
  • Yongsheng Gao
  • Daniel Karlsson
  • Monica Harry
  • Krista Lilly
  • Sarah Harry
  • Chris Haresnape
  • Kai Kewley
  • Suzanne Santamaria
  • Kathy Giannangelo
  • David Markwell
  • Anne Randorff Højen
  • Jon Zammit
  • Robert Turnbull
  • Andrew Perry

Meeting Files

SNOMED International Position on the addition of “Patient-friendly terms” (PFT) to the International release of SNOMED CT

SNOMED International response to “Discussion paper - Allowance of Extensions to Modify Core Content”

Meeting minutes

Editorial AG conference call 2017-02-17
Editorial AG Conference Call 2017-03-30
Objectives

- Obtain consensus on agenda items

Discussion items

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Owner</th>
<th>Notes</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Call to order and role call</td>
<td>JCA</td>
<td>Technical issues prevented sound from being added to the Go To Meeting recording</td>
<td></td>
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<tr>
<td>2</td>
<td>Conflicts of interest</td>
<td>JCA</td>
<td>None.</td>
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<td>3</td>
<td>Approval of minutes from 02/17/2017 - 03/30/2017</td>
<td>JCA</td>
<td>EAG Agenda and Minutes 2/17/2017 Editorial advisory group conference call 3-30-2017</td>
<td>Minutes 20170217 approved</td>
</tr>
<tr>
<td>4</td>
<td>Drug Model and Substance Redesign status update</td>
<td>TMO</td>
<td>Actual and planned changes for the July 2017 International release Planned changes for the Jan 2018 release Discussion topics:</td>
<td>Minutes 20190330 approved</td>
</tr>
</tbody>
</table>

- Potential approaches for resolving “roles”. It impacts what extensions will be allowed to do.
- Necessary but not sufficient sets
- Technical approach needs to be discussed with the editorial group
- Dose forms and concept model for dose forms – needed for the January release
- Routes of administration – how it is used in the International release and how it might be expected to be used in extensions
5 ECE Update BGO

Update on ongoing issues with ECE:

- Complications and sequela including new/approved temporal relationships
- Revised model for hypersensitivity/allergy/pseudoallergy
- Intolerance model proposal
- Complication of pregnancy, childbirth and/or the puerperium (disorder)

Discussion

The primary question on the hypersensitivity model was the benefit of adding a number of primitive concepts to accomplish the organizational structure. It was stated that while suboptimal, it was the "best" solution to accomplish the remodeling with a single model pattern rather than having to have multiple patterns for dispositions and diseases.

The EAG recognized that while this was a substantial improvement in the content representation in spite of the need to add intermediate primitives. Clear guidance on the use of the HAS REALIZATION attribute would be needed to avoid it inconsistent or improper use.

It was suggested that the group may want to investigate the use of multiple sufficient sets to define these top-level concepts that are disjunctive (i.e. allergic condition). This will be discussed at the MAG in more detail.

Intolerance

Discussed in detail at the ECE meeting. Proposal to add a new PATHOLOGICAL PROCESS = Intolerance was not agreed to, requiring Intolerance to substance to remain primitive. Consideration of the severity of the intolerance was brought up but not resolved. Referred back to the ECE for final proposed resolution.

Complications and Sequella

The EAG agreed on keeping the current primitive concepts "Complication" and "Sequella" due to their widespread common clinical use. It was asked that future attempts to fully define these concepts be considered.

Implication is that nearly all combined disorders would be a child of Complication or Sequella or both.

Suggested that the FSN for 26634005 - During AND/OR after (attribute) be changed to "During OR after (attribute) - generally approved.

6 Genomics update IGR

Plans for working group meeting. Goals and objectives.

Discussion

In general the EAG is happy that this area is being developed. While the focus was on clinical genomics, PAM asked why the scope of SNOMED CT was not all of genomics, i.e. provide the genomics community with an environment to develop a comprehensive genomics model in the context of SNOMED CT.

What are the use cases being addressed so we know what is needed to be supported? Adding concepts for everything creates a maintenance burden and may not meet the needs.

Are there IP issues? Will be addressed by the genomics group as they recognize that IP and licensing are a remaining obstacle to open access to the needed data.

7 Proposed policy on acceptance of "Patient-friendly terms" into the International release JCA

There have been multiple requests from members to consider the addition of "Patient-friendly vocabulary". A draft position document discussing the pros and cons and a proposed policy for inclusion of such terms in the International release is provided for discussion and input.

SNOMED International Position on the addition of "Patient-friendly terms" (PFT) to the International release of SNOMED CT

- There are a number of private companies that have made a business of mapping or creating these types of descriptions.
- A number of specific examples were given as to the difficulty of adding these in a way that is universally understood.
- The notion of "degree of synonymy" did not make it into the RF2 specification and it was proposed that this be revisited.
- Universal agreement that PFTs do not belong in the international release
- If people ask about this, will be referred to the Education and Product support team
- The position statement was simplified and revised and sent to the CEO for approval
<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
<th>Proposal/Policy</th>
<th>Type</th>
<th>Description</th>
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<tbody>
<tr>
<td>8</td>
<td>8</td>
<td>Proposed policy: Allowance of Extensions to Modify Core Content</td>
<td>JCA</td>
<td>A discussion document submitted to the Content Managers Advisory Group requested clarification on what national extensions were allowed to do re: modification of core content. The following draft document addresses the primary issues and proposes a more set of policy statements related to what is allowable and not allowable by extensions, which affect core content.</td>
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<td>Discussion</td>
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<td>• Primary question is what is meant by the current license. After considerable discussion it was determined that as long as an extension did not modify the actual release files, (i.e. the original FPO distribution files could be recreated from the extension/edition) then they were not in violation of the license.</td>
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<td>• The perceived use cases were deemed valid</td>
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<td>• Structural errors</td>
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<td>• &quot;Gaps&quot; in the terminology</td>
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<td>• Is changing the stated relationships in the core considered a change of meaning? Only if the relationship is actually deleted from the distribution files. The following statement was agreed to: &quot;If a descendant module overrides the activity of the ancestor module, it is not a change to the ancestor module&quot;.</td>
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<td>• It is important for extension to be able to override type 1 errors in the core in order to allow for proper inferences in the extension content that is dependent on the core content.</td>
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<td>• The license explicitly states that recognized errors in the core by extensions must be communicated to SNOMED International. (Section 2.6 &quot;If the Licensee becomes aware of any material error or change or correction needed in the International Release, the Licensee agrees to advise the Licensor promptly of such error, change or correction by following the Licensor's procedures for change notification that the Licensor prescribes by Regulations and notifies to the Licensee from time to time.&quot;)</td>
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<td>Commentary from AU:</td>
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<td>• Proposed change to Section 2.6</td>
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<td>9</td>
<td>Editorial policy on relationship groups</td>
<td>JCA</td>
<td>Relationship group zero proposal (DKA, YGA)</td>
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<td>Normative relationship grouping editorial guidance</td>
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<td>Relationship group zero proposal (DKA, YGA)</td>
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<td>Initial proposed grouping guidance has been added to the SNOMED International Editorial Guide for four hierarchies: Clinical findings (disease only), Procedures, Situation with explicit context, and Observable entity. As we begin developing concept models for additional top level hierarchies, there is a need for additional guidance on how to create relationship groups with approved attributes.</td>
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<td>Discussion on this topic was not covered as it was in a timing conflict with the MAG.</td>
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<td>10</td>
<td>Clarification on &quot;substantive change&quot;</td>
<td>JCA</td>
<td>When trying to apply quality improvement process, there are often a large number of changes applied to existing content. While the current policy refers to changes related to the FSN, there are other types of changes to content that may be considered substantive. 7.3.1 Changes in the Fully Specified Name</td>
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<td>Examples include:</td>
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<td>• Changes to modeling that alters the transitive closure</td>
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<td>• Batch changes to FSN terms to adhere to naming patterns</td>
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<td>• Bulk movement from one top level hierarchy to another (e.g. clinical finding to situation)</td>
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<td>SNOMED Int'l needs to develop a more robust policy related to what is a substantive change and what is the notification/approval process needed to be completed before the change can be released.</td>
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<td>11</td>
<td>EAG membership nominations</td>
<td>JCA</td>
<td>EAG members with ending terms of service:</td>
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<tr>
<td></td>
<td></td>
<td>Kathi Campbell (may be reappointed)</td>
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<td>Paul Amos (may be reappointed)</td>
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<td>Proposal for addition of one more member to the EAG (pending approval by the MB)</td>
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<td>Apply for an Advisory Group</td>
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<td>Refer to skills matrix in SNOMED CT Editorial Advisory Group ToR v2.0.pdf</td>
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<tr>
<td></td>
<td>12</td>
<td>Future meetings</td>
<td>JCA</td>
<td>TBA</td>
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