2016-04-04 Editorial Advisory Group Conference Call

Date
04/04/2016
1800 UTC

GoToMeeting Details
https://global.gotomeeting.com/join/374912925
Use your microphone and speakers (VoIP) - a headset is recommended. Or, call in using your telephone.
Dial +1 (872) 240-3212
Access Code: 374-912-925
Audio PIN: Shown after joining the meeting
Meeting ID: 374-912-925

Attendees
- Paul Amos
- Bruce Goldberg
- Toni Morrison
- Emma Melhuish
- Monica Harry
- Krista Lilly
- Farzaneh

Apologies
- Guillermo Reynoso
- Keith Campbell

Objectives

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></td>
<td></td>
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<tr>
<td>2</td>
<td>Approval of minutes from 20160229</td>
<td>JCA</td>
<td>Minutes approved</td>
<td></td>
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Meeting Files
No files shared here yet.

Meeting minutes
2016-02-29 Editorial AG Conference Call Minutes
<table>
<thead>
<tr>
<th>3</th>
<th>Drug product Action Item follow up</th>
<th>JCA</th>
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<tbody>
<tr>
<td></td>
<td>KCA talk - That has been noted and will schedule when the group is ready. Additional support needed.</td>
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<td>Product roles - next release concepts will be active but relationships moved to a separate sub-hierarchy. Update documentation coming</td>
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<td>Status updates on drugs in London.</td>
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<tr>
<td></td>
<td>UK uses a role based organization of drugs. Will not be part of product hierarchy but there will be navigational hierarchies for therapeutic roles. EME verifies it suits with their expectations.</td>
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<td>New documents to be reviewed in London</td>
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<td></td>
<td>Much of the drug product content originated in Read V2. Plan is not to retire this content at this time. They would move into a minimally maintained module that could be used by members that need it. UK says that would work for them.</td>
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- TMO to invite KCA to present the VA RxNorm project to the drug modeling group.
- Paul Amos to speak to Jo Goulding and Emma Melhuish about the use of mappings to the drug concepts being considered in the drug strength project.
- TMO to revise the proposal document after getting input from Paul Amos about Read Codes v.2.
- JCA said that TMO should solicit input on the inactivation of concepts needing role from CMAG, then brief the MF. TMO should talk to IGR about how to do that.
- JCA instructed TMO to write up an inquiry to the MF and Content AG stating what the plan was, outlining benefits and detriments, and requesting information on how it would impact users.
- Check with Danish folks to determine the value of additional modeling of strength-related products - TMO

<table>
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<tr>
<th>4</th>
<th>Uses of slashes in FSN</th>
<th>JCA</th>
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<tbody>
<tr>
<td></td>
<td>Review discussion on editorial guidelines for use of &quot;&quot; in FSN. Use+of+slashes+in+FSNs</td>
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- Write up final recommendation and submit to Editorial Guide for update - JCA
<table>
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<tr>
<th>Page</th>
<th>Number</th>
<th>Task</th>
<th>Description</th>
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</thead>
</table>
| 5    | Continuation of Laterality proposal | JCA | Comments received from Content Managers Advisory Group  
Laterality Proposal  
Related issues: Bilateral and Unilateral concepts.  
Growing UKTC view of choosing Option 2 (lateralized anatomy) vs, Options 4 (relationship group).  
Use cases for lateralized body structures include specimen collection and substance administration. Will revisit this in London. Impact of Option is greater than the impact of Option 2 from a MCRM perspective. |
| 6    | Content tracker review | JCA | Content tracker dashboard  
- IHTSDO-858 - artf6279-definition of grouper, whitelisting of exceptions to MRCM rules in User Guide  
- ACCEPTED  
- IHTSDO-908 - artf221357-Extended (non-ASCII) UTF8 characters in terms  
- ACCEPTED  
- IHTSDO-512 - artf6196-Moving between hierarchies without retirement; policy  
- ACCEPTED  
- OPEN  
- IHTSDO-707 - artf222830-Editorial policy issue - “AND” vs. “AND/OR”  
- ACCEPTED  
- IHTSDO-387 - artf6200-Editorial policy approval: criteria  
- ACCEPTED  
- IHTSDO-541 - artf6253-Imperatives  
- ACCEPTED  
- IHTSDO-608 - artf6253-Imperatives  
- ACCEPTED |
| 7    | Use of URLs in definitions | JCA | Review of comments supplied by members.  
Use of URLs in Text Definitions  
Suggestion that is we use a reference in a definition in SNOMED CT, we should be able to point to that reference in the text description. For published papers, can use the standard bibliographic referencing procedure (many of these have a DOI). For items that are only published on the web, a DOI might be sufficient. An edge case is where there is not a gold standard definition that can be referenced.  
Use of URLs in text definitions: Not allowed.  
DOIs were viewed to be acceptable for use as pointers to sources of definitions. |
<p>| 6    | Assign PAM to IHTSDO - 387 |
| 7    | Assign BGO to IHTSDO - 541 |
| 6    | Summarize final decision on use of URLs |
| 6    | Determine if DOIs are acceptable in definitions |
| 6    | Write up summary and send to Editorial guide - JCA (How to find DOIs) |
| 6    | Find out what happens to a document with a DOI if it gets removed from access - JCA |</p>
<table>
<thead>
<tr>
<th></th>
<th>Potential agenda topics for London meeting</th>
<th>JCA</th>
<th>We are meeting for a full day in London. Need substantive topics to move forward. BGO - provide an update on the ECE activities.</th>
<th>Solicit additional agenda topics for London meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>May conference call date and time verification</td>
<td>JCA</td>
<td>JCA is traveling on May 23. Move call to May 30? Agree to move to May 30 at 1800 UTC.</td>
<td>Get clarification from CGI on support for AG members who stay over two days. - JCA</td>
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<tr>
<td>10</td>
<td>Additional items</td>
<td>EAG</td>
<td>PAM Asked for how many nights they are supported.</td>
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**Minutes of Meeting**

JCA opened the meeting. He went through actions from previous meetings. TMO update the group on several of her actions (JCO updated the actions and added additional actions above, as the meeting was going on).

PAM said that in the UK, one reason why they were moving towards DMD within SNOMED CT was the ability to extract information from patient records based on a hierarchy that was based on the British National Formula for drugs used in the treatment of various conditions. He asked if there was any plan to add hierarchies of that nature to the International Release (IR)?

TMO replied that they would not be included within the product hierarchy. Ultimately concepts that represented what the drugs were meant to treat would be represented, but it was to be determined if that meant the relationship between the concept representing the product and concept representing the role of the product or what it’s meant to treat.

Emma said the UK would need some kind of hierarchical groupers, and having them in the main product hierarchy did not work. She said the UK would probably publish a separate hierarchy, but it was waiting to see what IHTSDO would do. Some vendors have used what was in the IR, so the UK wanted to use those but if they were to be retired, the UK would probably recreate them.

JCA said IHTSDO would value input from Members on how the organization could provide a foundational structure in the core.

TMO explained that the IR could not include groupers that were not universally true. Some were black and white, but some were grey, and on those IHTSDO would be relying on the contact group for input.

PAM said, given that the content of the drugs in Read v2 had been replicated in content but not relationships in clinical terms v.3 and that that had then been incorporated into SNOMED, a lot of that had been done at the individual or even the branded level, so how would that be extracted and/or mapped, and how would that affect the UK? Are there people outside the UK that might have inadvertently used that content and therefore also might be impacted?

Emma said a lot of content in the IR drug product hierarchy had come from the Read codes. The UK had reused some of that content within M&D. It included product strengths, which were not mapped, so a mass retirement of products with strength would cause some pain. TMO explained that she had been working with the technical group, and the plan was to move them to a module that would be minimally maintained by IHTSDO. Concept identifiers would stay the same, ensuring the appropriate relationships between those and the core.

Emma said that plan would work for the UK.

**Use of slashes in FSNs**

JCA said there had been some good discussion in Confluence on the topic. Some common nomenclature uses slashes a lot, such as heterozygosity in hemoglobins. He recommended writing editorial guidance that slashes were generally not allowed as part of the FSN unless they are a part of the nomenclature for that particular domain. He said he would send the guidance to MHA to include in the Editorial Guide.

**Laterality**
JCA said he had not gotten comments back yet from the tooling folks or the release folks, but the content managers had provided some interesting comments on the effect on the core of the proposal to move the relationship to a relationship group as opposed to creating lateraliized content, and what the advantages were of one over the other. He said he would need an estimate of how many concepts were currently modeled with laterality or bilaterality. He also noted that there had been a major proposal to address bilateral concepts, and the two proposals needed to be harmonized. Decisions on laterality would allow the addition of bilateral concepts very easily. He said there was also a need for information about on the Member perspective - what would it mean for the NRCs for content currently lateraliized? He said the US had a few thousand lateraliized concepts.

PAM also noted the need to consider unilateral concepts. He added that the UKTC was leaning towards option 2 rather than option 4. YGA should probably look at the implications. Ed Cheetham, PAM said, had sent a long reply about that.

JCA said a lot of use cases were from substance administration, and people were using lateraliized body structures as attributes in medical records. If they could not do that anymore, it would diminish their ability to represent that.

JCA said the group would have to revisit laterality. It still had not gotten the technical specifications. Option 4 would involve changes to the concept model and option 2 would not, so the impact of option 4 in the long run was greater.

Use of URLs in definitions
The group agreed that DOIs should be allowed but not URLs. JCA and MHA would write up guidance for the Editorial Guide about that. FAS said she would have to make some changes on content recently added to the IR.

Content Trackers
The group went through some content trackers with the idea that the members of the Editorial AG would take some of them on as part of their consultant terminologist continuing development.

May schedule change
The May meeting was changed from May 23 to May 30.

Adjournment
The meeting adjourned after one hour and 20 minutes.