

FHIR SNOMED CT Free Set - Consider for inclusion / rejection (Red mappings)

Introduction

The SNOMED on FHIR working group (Terminology Binding Stream) have spent some time on trying to identify an equivalence mapping from SNOMED CT for a selection of FHIR ValueSet codes, as identified by Grahame Grieve. The group, consisting of a mixture of SNOMED and HL7 FHIR expertise, have achieved a range of results, which have been classified **Red**, **Amber** or **Green** according to the group's confidence level for each mapping. See [Free SNOMED CT set for FHIR](#) for a more detailed background and notes on each ValueSet. In presenting some provisional work, the mappings are being addressed as follows:

See also:

[20190601 - Response on free set content addition by Jim Case](#)

R ed	Discussion with SNOMED International (SI) Head of Terminology to consider <i>either</i> inclusion of additional concepts into SNOMED CT, or, confirmation that content should be considered out of scope
A m b er	Discussion with appropriate working groups in HL7
G r e en	Forwarding to Grahame Grieve for a first pass review

The following sections list the "Red" mappings where the working group were unable to perform a mapping with any level of confidence, and would like to ask SNOMED International's Head of Terminology [Jim Case](#) if he thinks the values listed should either a) be adding to the SNOMED International Edition such that a mapping could then be performed, or b) that they are out-of-scope / not-desirable for inclusion in the International Edition, in which case the working group's recommendation to HL7 would be to continue to use their existing value set.

In addition to the value sets listed below, the working group felt confident that use of SNOMED CT in **AllergyIntolerance.Category** would not add value to the resource as the mapping that was done was little more than finding matching words. See also comments from Bruce Goldberg in the parent document.

AdverseEvent.Outcome

Note that relapse is not covered here. Note the potential for overlap with ConditionClinicalStatusCodes - would it not be better to seek a generic solution across both?

HL7 Value	Suggested SNOMED Term
resolved	413322009 Problem resolved (finding)
recovering	Not Found
ongoing	Not Found
resolvedWithSequelae	Not Found
fatal	419099009 Dead (finding) (preferred due to also being a finding ie describes the current state of the patient)
unknown	Not Found

Condition.ClinicalStatus

The working group's thoughts here were to consider enhancing << 394731006 |Problem statuses (qualifier value)| and possibly include Clinical Groups (eg Nursing) in any discussion about proposed new concepts. This valueset does seem like its use would go beyond just that of FHIR and may have broader usage.

HL7 Value	Suggested SNOMED Term
Active	Not Found
.. Recurrence	Not Found
.. Relapse	Not Found
Inactive	Not Found
.. Remission	<p>Not Found. Note that the use of this value would lead SI to recommend that Condition code only ever be populated with the plain disorder eg 118600007 Malignant lymphoma (disorder) and not try to have the context of status supplied in two places through the use of 427141003 Malignant lymphoma in remission (disorder) </p> <p>Similarly for recurrence - 452241000124100 Recurrent malignant neoplastic disease</p>
.. Resolved	Not Found