

Concept Model, Attribute and Values Component: CMAG prioritisation May 2017

The results have been presented in order of the priority assigned (using the average of the results).

The green rows are issues that already have an assignee.

| K ey | Summary | UK | CA | AN | AU | R VGa | UK n ge | Canada | Netherlands | Austra lia |
|------------|--|------|------|------|------|----------|---------------|--|--|---|
| IHTSDO-446 | artf221498-Revise procedure model to cleanly distinguish means, need (focus), and desired/expected outcome | 3.00 | N/A | 3.00 | 2.33 | 2.78 | 0.67 | | | |
| IHTSDO-773 | artf228875-Otitis - review and correction of inconsistencies, duplicates, modeling | 3.00 | 3.00 | 2.33 | 2.33 | 2.67 | 0.67 | Highly used content, significant clinical area. | This is such a frequent used dx, it should be fixed asap | |
| IHTSDO-987 | Method attribute target values: Examination-action , Measurement-action - review of use | 3.00 | N/A | 2.33 | 2.67 | 2.67 | 0.67 | This item focuses on Method attribute target values examination-action , Measurement-action so would involve a lot of high use content. So caution would also be needed because of this. | | |
| IHTSDO-967 | Concept model for secondary disorders | 3.00 | N/A | 2.67 | 2.33 | 2.67 | 0.67 | | IHTSDO-556 X with Y, X due to Y is closed. What is the difference with this RFC? | |
| IHTSDO-678 | artf6235-Observable and Attribute semantic duality | 3.00 | N/A | 2.67 | 2.33 | 2.67 | 0.67 | User confusion with current status I would think. | | |
| IHTSDO-844 | artf6314-Immunization and vaccination | 2.67 | 3.00 | 2.33 | 2.33 | 2.58 | 0.67 | | How much of this content can be prioritized while the substance Re-design is now addressing Substances issues? | |
| IHTSDO-970 | Revision of existing content to proximal primitive modeling style by applying authoring form algorithm | 3.00 | 3.00 | 1.67 | N/A | 2.56 | 1.33 | Large volume so will contain high priority clinical areas. Impact on user in terms of changed content high but resulting in better subsumption based queries. | This needs to be undertaken as soon as possible, although there might be some benefit to chunk this project in smaller piece, especially because it will most likely impact extensions and existing projects | I'll abstain, just due to my view on PPM :) |
| IHTSDO-558 | artf221697-PATHOLOGIC PROCESS | 3.00 | N/A | 2.33 | 2.33 | 2.56 | 0.67 | | | |
| IHTSDO-974 | Review of the Monitoring procedure (regime/therapy) sub hierarchy with model development | 3.00 | N/A | 2.67 | 2.00 | 2.56 | 1.00 | 525 descendants. Significant task to develop a concept model. Lot of high priority health areas here. | | |
| IHTSDO-571 | artf6255-SEVERITY | 2.67 | 2.67 | 2.33 | 2.33 | 2.50 | 0.33 | | Large relateed other RFC, but blocking 1 RFC, but high priority for QV | |

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|------------|---|------|------|------|------|------|------|--|--|--|------------|
| IHTSDO-114 | artf6181-Morphology = acute inflammation, chronic inflammation | 2.00 | 3.00 | 2.33 | 2.67 | 2.50 | 1.00 | | This is also quite basic elements that need to be of high quality. To do asap. | Same problem as occurrence. Important to solve this for consistency in concepts and hierarchy and correct classifying | |
| IHTSDO-812 | artf222657-New attribute: Associated device | 2.33 | N/A | 2.67 | 2.33 | 2.44 | 0.33 | Noted that: Potential confusion: ASSOCIATED WITH = device, vs ASSOCIATED DEVICE = device. | | | |
| IHTSDO-407 | artf6299-Frequencies and Courses: recurrent, relapsing, continuous, intermittent, daily, etc | 2.67 | N/A | 2.00 | 2.67 | 2.44 | 0.67 | | | | 6265==6299 |
| IHTSDO-323 | artf6265-Frequency and course | 2.67 | N/A | 2.00 | 2.67 | 2.44 | 0.67 | Linked to IHTSDO407 above | | | 6265==6299 |
| IHTSDO-181 | artf6176-Disorders with a role group that has more than one Attribute of a kind. | 2.67 | 3.00 | 2.33 | 1.67 | 2.42 | 1.33 | Blocked by IHTSDO347 but important for QA | This needs to be undertaken as soon as possible, although there might be some benefit to chunk this project in smaller piece, especially because it will most likely impact extensions and existing projects | | |
| IHTSDO-867 | artf6252-OCCURRENCE | 2.67 | N/A | 2.33 | 2.00 | 2.33 | 0.67 | Large scale use of this attribute. | | Important to solve this for consistency in concepts and hierarchy and correct classifying | |
| IHTSDO-849 | artf6232-HAS INTENT | 2.33 | N/A | 2.33 | 2.33 | 2.33 | 0.00 | | | Important to solve this for consistency in concepts and hierarchy and correct classifying | 676==849 |
| IHTSDO-807 | artf6244-ACCESS | 2.67 | N/A | 2.33 | 2.00 | 2.33 | 0.67 | | | | |
| IHTSDO-947 | New attributes: 'Associated with' attribute hierarchy _Representing temporal associations between procedures and their related disorders. | 2.00 | N/A | 2.67 | 2.33 | 2.33 | 0.67 | | | This has actually progressed.. There's at least a "during" attribute now . | |
| IHTSDO-986 | Modelling of seizure concepts | 3.00 | N/A | 2.67 | 1.33 | 2.33 | 3.00 | 262 concepts that would require review. Review in terms of modelling and semantic tag is no small task. Possible duplication of content which is why I thought high clinical impact. | | | |
| IHTSDO-780 | artf6231-Procedure named by intended outcome | 2.33 | N/A | 2.67 | 1.67 | 2.22 | 1.00 | | | Overlap with the has intent attribute review | |
| IHTSDO-608 | artf6253-Imperatives | 2.33 | N/A | 2.33 | 2.00 | 2.22 | 0.33 | It is a significant change from current policy though. Could result in a high number of requests for additional content. | This is labelled as a small project, when in fact it can be blown... perhaps a more focussed starting point should be identified to constraint the resources better | | |
| IHTSDO-676 | artf222711-Add in a role group: "Has intent" | 2.00 | 3.00 | 1.33 | 2.33 | 2.17 | 1.67 | | Many related Tracker items | | 676==849 |

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| IHTSDO-347 | artf6175-Relationship grouping: policy and content revision | 2.67 | N/A | N/A | 1.67 | 2.17 | 1.00 | | | | |
| IHTSDO-1000 | Review of the range for the Associated finding attribute | 2.67 | N/A | 1.67 | 2.00 | 2.11 | 1.00 | Impact on HL7 users (use ofn Link assertion) | I'M not sure I understand this request and its impact | | |
| IHTSDO-619 | artf222816-Review concept model: Screening intent vs. Screening type | 2.67 | N/A | 1.67 | 2.00 | 2.11 | 1.00 | | | | |
| IHTSDO-333 | artf230630-Allowance of "process" as an allowed value for attribute "due to" | 2.67 | N/A | 2.00 | 1.67 | 2.11 | 1.00 | Uncertain about terminology impact really but as this is an attribute then scored 3 | | | |
| IHTSDO-62 | artf222769-New attribute METHOD ACCESS | 2.33 | N/A | 2.00 | 2.00 | 2.11 | 0.33 | | | | |
| IHTSDO-525 | artf6211-Context values for actions | 3.00 | 2.00 | 2.00 | 1.33 | 2.08 | 1.67 | High volume content. Procedure context Important for Care Planning International Model | | No really sure that this is about - though actions are important... | |
| IHTSDO-741 | artf6174-SUBJECT RELATIONSHIP CONTEXT values | 2.67 | N/A | 1.33 | N/A | 2.00 | 1.33 | | | | |
| IHTSDO-726 | artf6319-consistently put HAS FOCUS in role groups | 2.67 | N/A | 1.33 | 2.00 | 2.00 | 1.33 | | What is the impact if the attribute is not grouped? If minor, keep low priority | | |
| IHTSDO-273 | artf222748-Review concepts: Intent actions vs. Means actions | 2.33 | N/A | 1.67 | 2.00 | 2.00 | 0.67 | | | | |
| IHTSDO-744 | artf6249-USING ENERGY | 2.67 | 2.00 | 1.67 | 1.33 | 1.92 | 1.33 | Potentially clinically important in energy source queries e.g. for radiation exposure. | If this was not fully implemented since 2007, how urgent is this? | | |
| IHTSDO-341 | artf6263-New attribute: SITE OF ORIGIN (of embolus, metastasis, etc) | 2.00 | 1.33 | 2.33 | 2.00 | 1.92 | 1.00 | | How urgent is this? | | |
| IHTSDO-858 | artf6279-definition of grouper, whitelisting of exceptions to MRCM rules in User Guide | 3.00 | 1.00 | N/A | 1.67 | 1.89 | 2.00 | Risk for groupers to be used wrongly in clinical record so important to define these. | Low priority | | |
| IHTSDO-216 | artf6273-percutaneous | 1.67 | 2.67 | 1.33 | 1.67 | 1.83 | 1.33 | | Large released other RFC, but blocking 2 RFC, but high priority for QV | | |
| IHTSDO-940 | artf6246-FINDING METHOD | 2.67 | N/A | 1.00 | 1.67 | 1.78 | 1.67 | Over 3500 concepts in some high use areas though not sure clinical impact would be high. | | | |

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|-------------------------------------|---|----------|----------|----------|----------|----------|----------|--|---|--|--|
| IH T S D O- 10 09 | What does "dysfunction" mean. Concepts are primitive | 2. 00 | 1. 33 | 2. 33 | 1. 33 | 1. 75 | 1. 00 | | How urgent is this? | | |
| IH T S D O- 219 | artf6248-USING SUBSTANCE | 1. 33 | N /A | 2. 00 | 1. 67 | 1. 67 | 0. 67 | | Is this ticket still relevant? | | |
| IH T S D O- 502 | artf6205-Aggravating and relieving factors | 2. 33 | 1. 00 | 2. 00 | 1. 00 | 1. 58 | 1. 33 | Unapproved attributes 1241001 Relieved by (attribute) and 410660005 Aggravated by (attribute) | If this was not fully implemented since 2010, how urgent is this? | | |
| IH T S D O- 612 | artf222721-Add concepts: Episodes of care | 2. 33 | 1. 00 | 1. 67 | 1. 00 | 1. 50 | 1. 33 | Problems with sounding like ICD episodes | Low priority | | |
| IH T S D O- 703 | artf6236-Unilateral | N /A | N /A | 2. 00 | 2. 00 | 2. 00 | 0. 00 | This is in construction now | | Important to solve this, also for NRCs to create consistent concepts | |
| IH T S D O- 149 | artf6223-Qualifier start-stop points for onset, severity, episodicity | N /A | 1. 00 | 1. 33 | 1. 67 | 1. 33 | 0. 67 | Don't understand this one and not much detail there. | Low priority | | |
| IH T S D O- 202 | artf6324-required vs indicated: same or different? | 1. 67 | 1. 00 | 1. 00 | 1. 33 | 1. 25 | 0. 67 | | Low priority | | |
| IH T S D O- 193 | artf6247-FINDING INFORMER | 1. 67 | 1. 00 | 1. 33 | 1. 00 | 1. 25 | 0. 67 | | Low priority | | |