

Implementation Guide for using SNOMED CT with FHIR

UPDATE

These pages are currently transitioning into the SNOMED GitHub pages. See <https://github.com/IHTSDO/snomed-ig>

HL7 currently provide a daily build view of that which can be seen here: <http://build.fhir.org/ig/IHTSDO/snomed-ig/>

Introduction to using SNOMED with FHIR

General Implementation Considerations

SNOMED specific behaviours

Implementing Terminology Services with SNOMED CT

FHIR Frequently Asked Questions

Working with Language Reference Sets

Design Notes specific to Client Applications

Option for "pass-through" terminology requests so that FHIR server acts as proxy for Terminology Server. Operations such as Expand may need to make calls on to Terminology before collating results.

SNOMED Specific profiles (clinical resources)

<http://build.fhir.org/profiling.html>

Terminology Binding

Test Suites for using SNOMED with FHIR Servers

Assumptions and Audience

Introducing SNOMED to a FHIR audience and FHIR to a SNOMED Audience! Explanation of 4 levels of binding.

Code, Coding, Codeable Concept as specific to SNOMED CT (include link to introduction and points about display terms & multiple languages).

What is the scope of content for the guide? Targeting "Best Practice" for FHIR Implementers using SNOMED CT. Possible layered approach and potentially strict (for internal record keeping and communication) vs permissive profiles when . General guidance for bindings or specific details on each resource.

Audiences - Developer vs User of implemented services. ML Suggests single entry point document with multiple paths through the documentation.

Existing Documentation to Pull In

[4.2.1.0 Using SNOMED CT with FHIR](#)

[SNOMED CT canonical CodeSystem resource](#)

<https://hl7.org/implement/standards/fhir/snomedct.html>

Comparable Implementation Guides

[Rob Hausam](#) to supply

See also <https://simplifier.net/guides>

Child Documents

- [ConceptMap](#)
- [Expand \(Valueset\)](#)
- [FHIR Frequently Asked Questions](#)
 - [Accessing Historical Associations](#)
 - [Lookup and Expand](#)
- [General Implementation Considerations](#)
- [Implementing Terminology Services with SNOMED CT](#)
 - [Find Matches](#)
- [Introduction to using SNOMED with FHIR](#)
- [SNOMED CT Post Coordination in FHIR](#)

- [SNOMED CT Postcoordination Workflow \(Discussion\)](#)
- [SNOMED specific behaviours](#)
- [System Architects working with SNOMED and FHIR](#)
- [Terminology Binding](#)
- [Test Suites for using SNOMED with FHIR Servers](#)
- [Working with Language Reference Sets](#)
- [Working with Languages](#)
- [Working with ValueSets](#)

Feedback for HL7

19 March 2019

These two pages seem to be very similar?

<http://hl7.org/fhir/2018Sep/codesystem-operation-find-matches.html>
<http://hl7.org/fhir/2018Sep/operation-codesystem-find-matches.html>

Publishing Notes

4 June - group agreed to target R4 in the first instance but to indicate any future changes inline. Also (PJ) suggested section on major changes from STU3 to R4 where relevant to SNOMED eg \$compose is now \$find-matches

2 July - PJ: question over specific content for different stakeholders (FHIR spec does this) and how we present that - separate pages for developers (details) vs architect (integration, general 'use' of terminology services eg off the shelf solution. Why use the FHIR API at all?) vs business level?

16 July - PJ suggested initial page to target specific stakeholders (jumping off pages). Compare with FHIR "Getting Started" Page - "see the Overviews: [General](#), [Developers](#), [Clinical](#), and [Architects](#)"

ML suggestion that we introduce SNOMED "through the lens of FHIR", so stay away from language reference sets and stick with what can be seen directly from FHIR resources. (But we can have links to the detail & implementation course - PJ)