

Universidade do Minho Escola de Engenharia



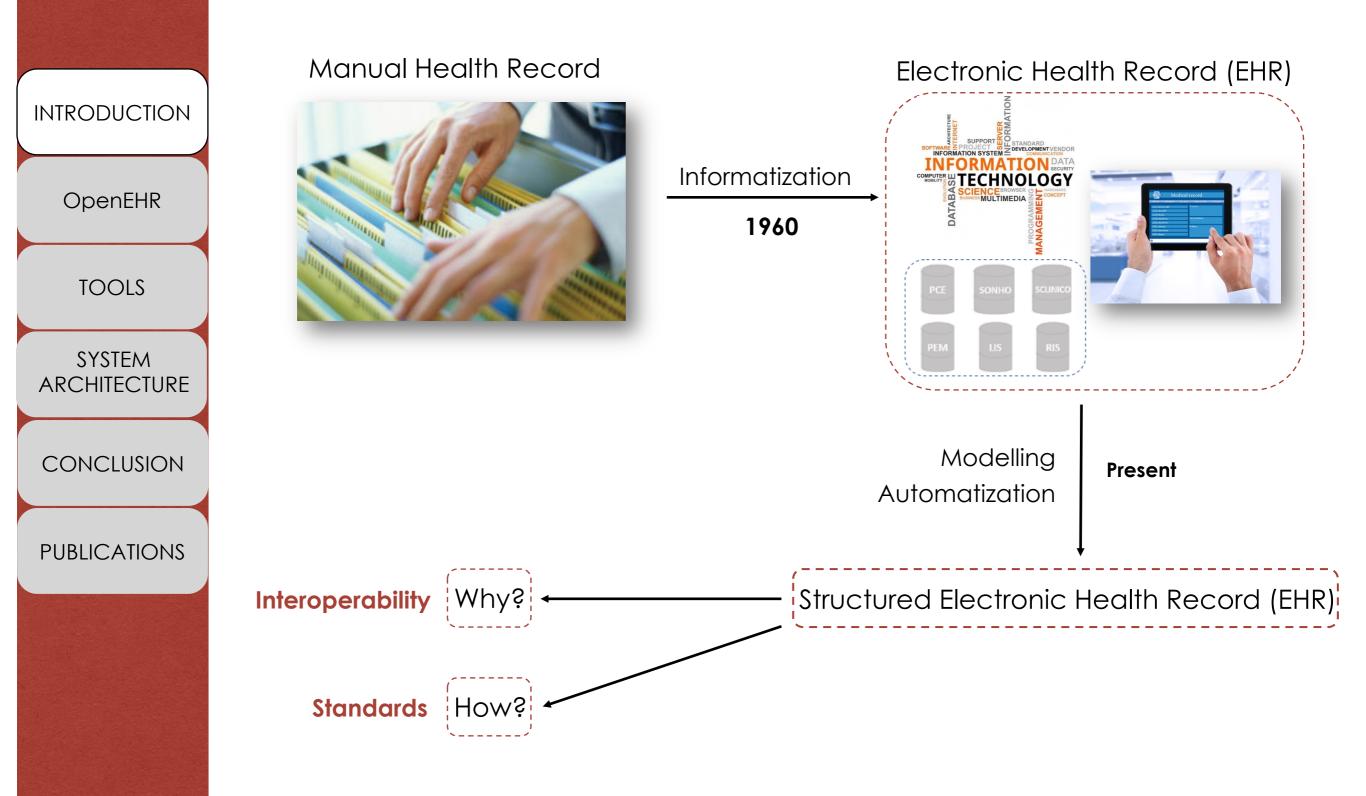
OpenEHR - The solution for an interoperable development



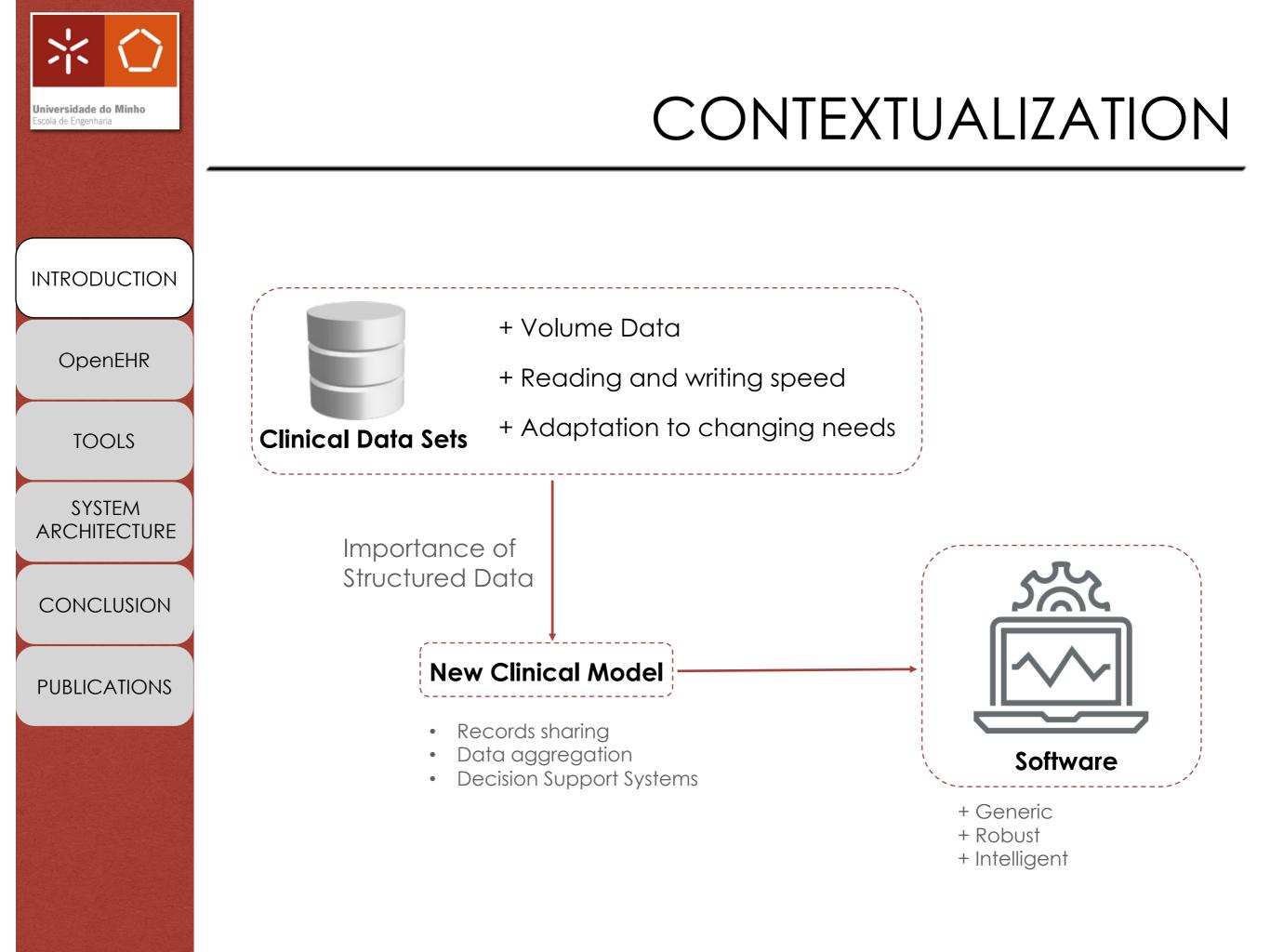
António Abelha

May, 5th, 2021



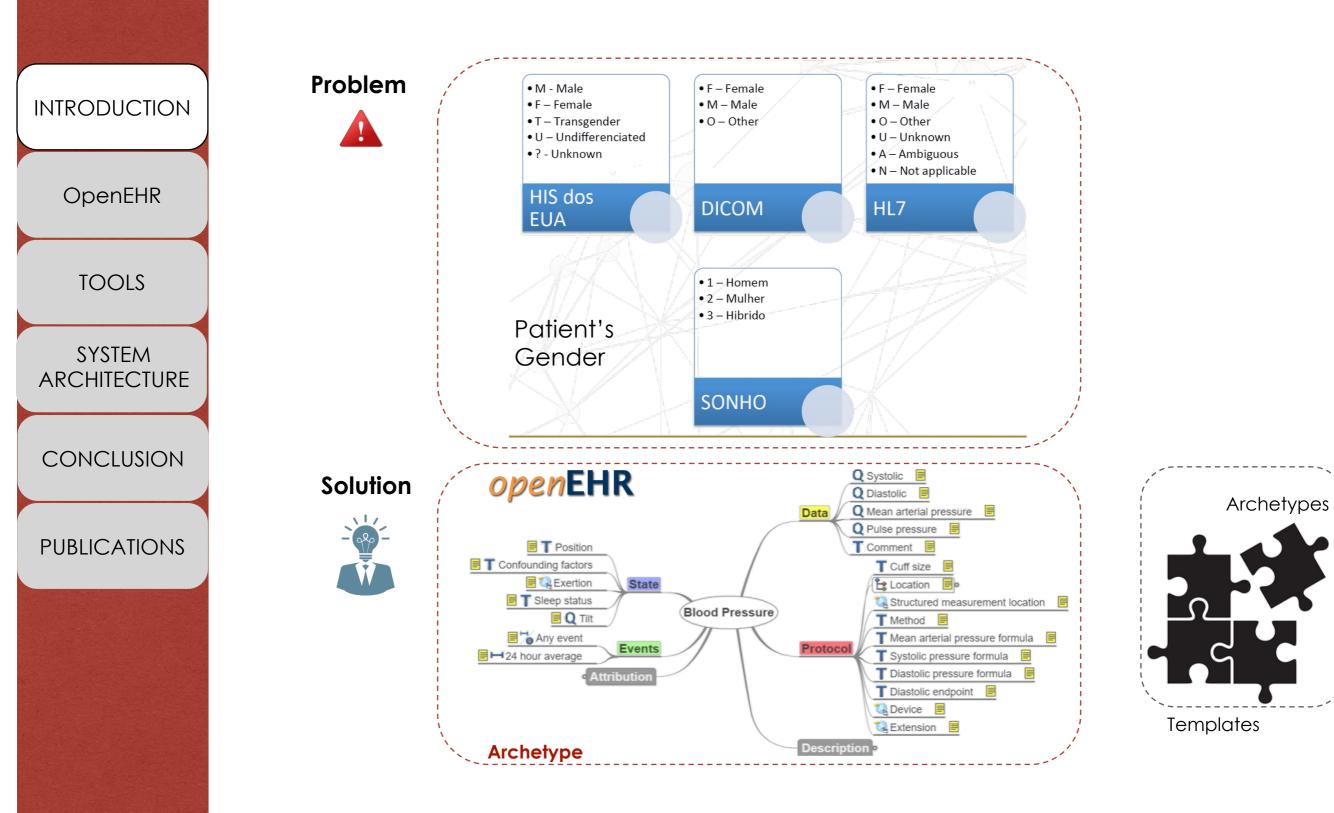


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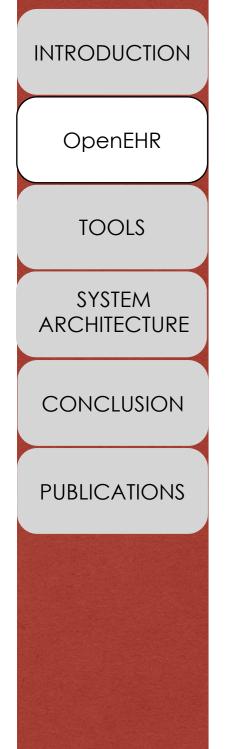




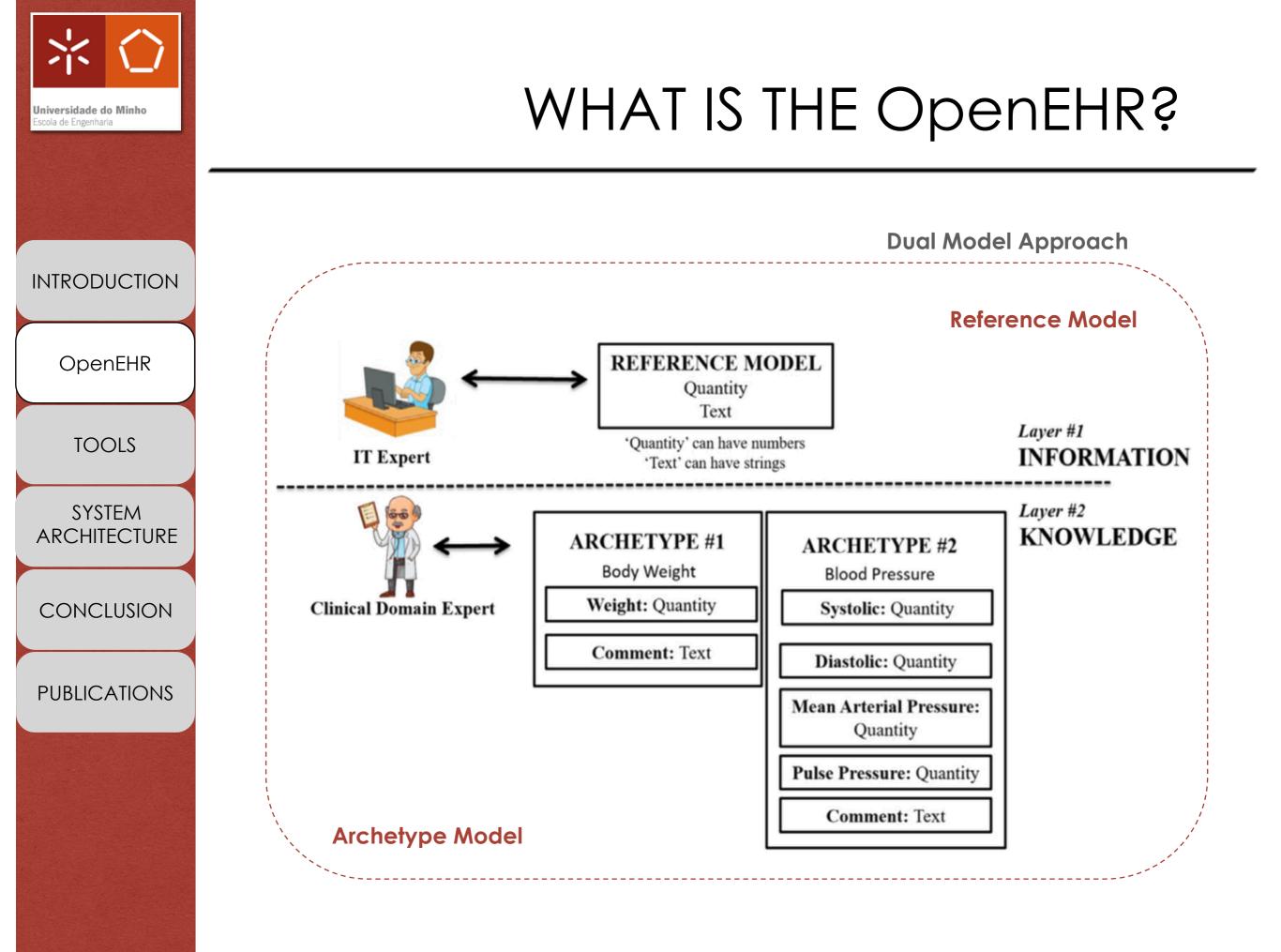
PROBLEM AND SOLUTION

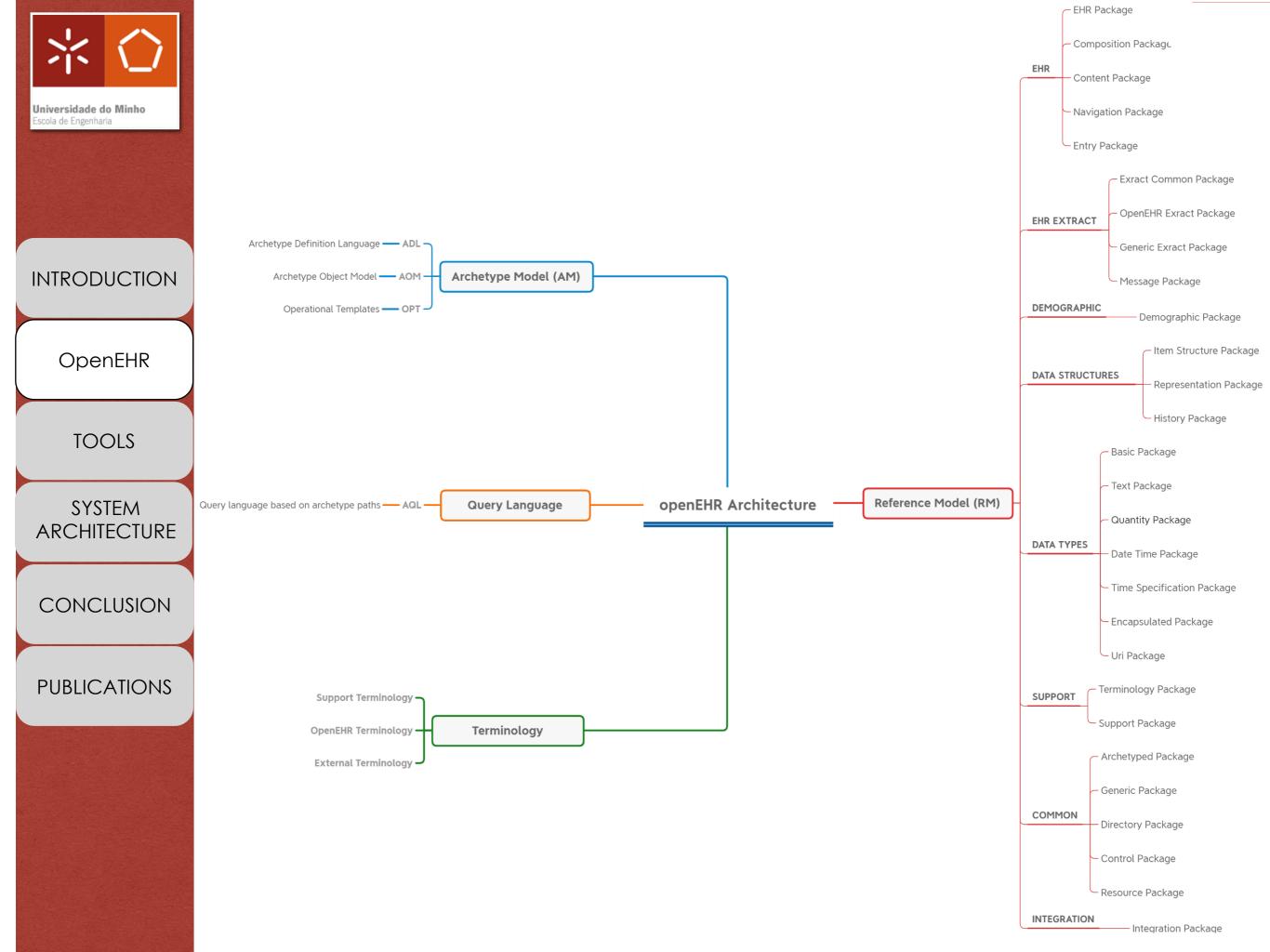


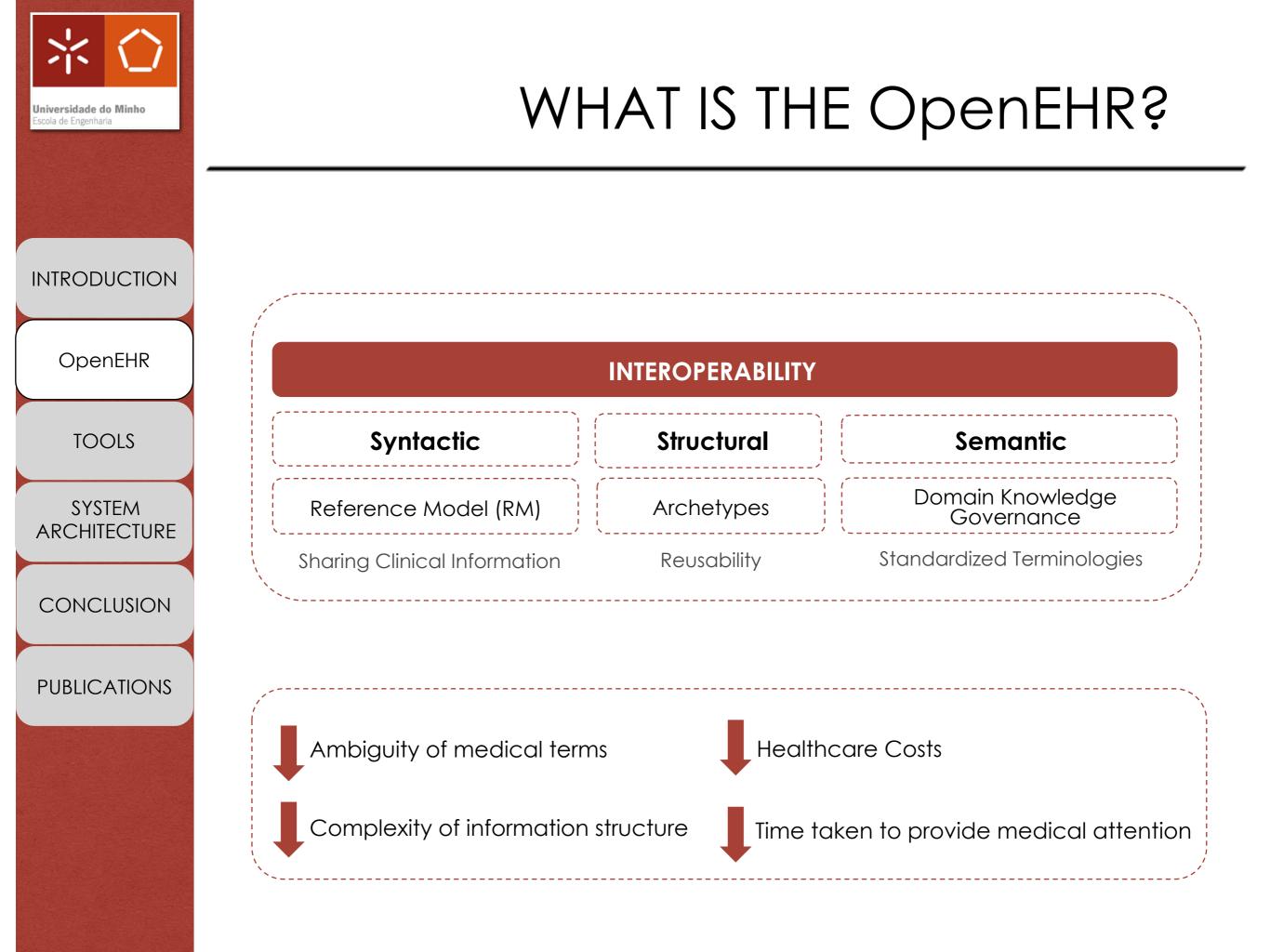




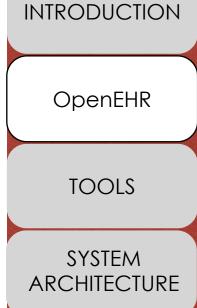
- Non-for-profit organisation since 2001
- An open specification for a Healthcare Information Model
- Promotes an open ecosystem centered on clinical information
- A vendor-neutral and technology-neutral solution
- Dual model to separate clinical and technical terms
- Developed to store and query large clinical datasets
- Clinicians identify new content, which is then automatically submitted to a clinical data repository









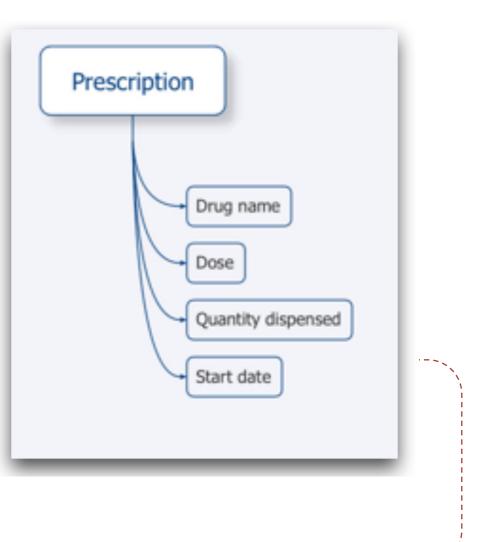


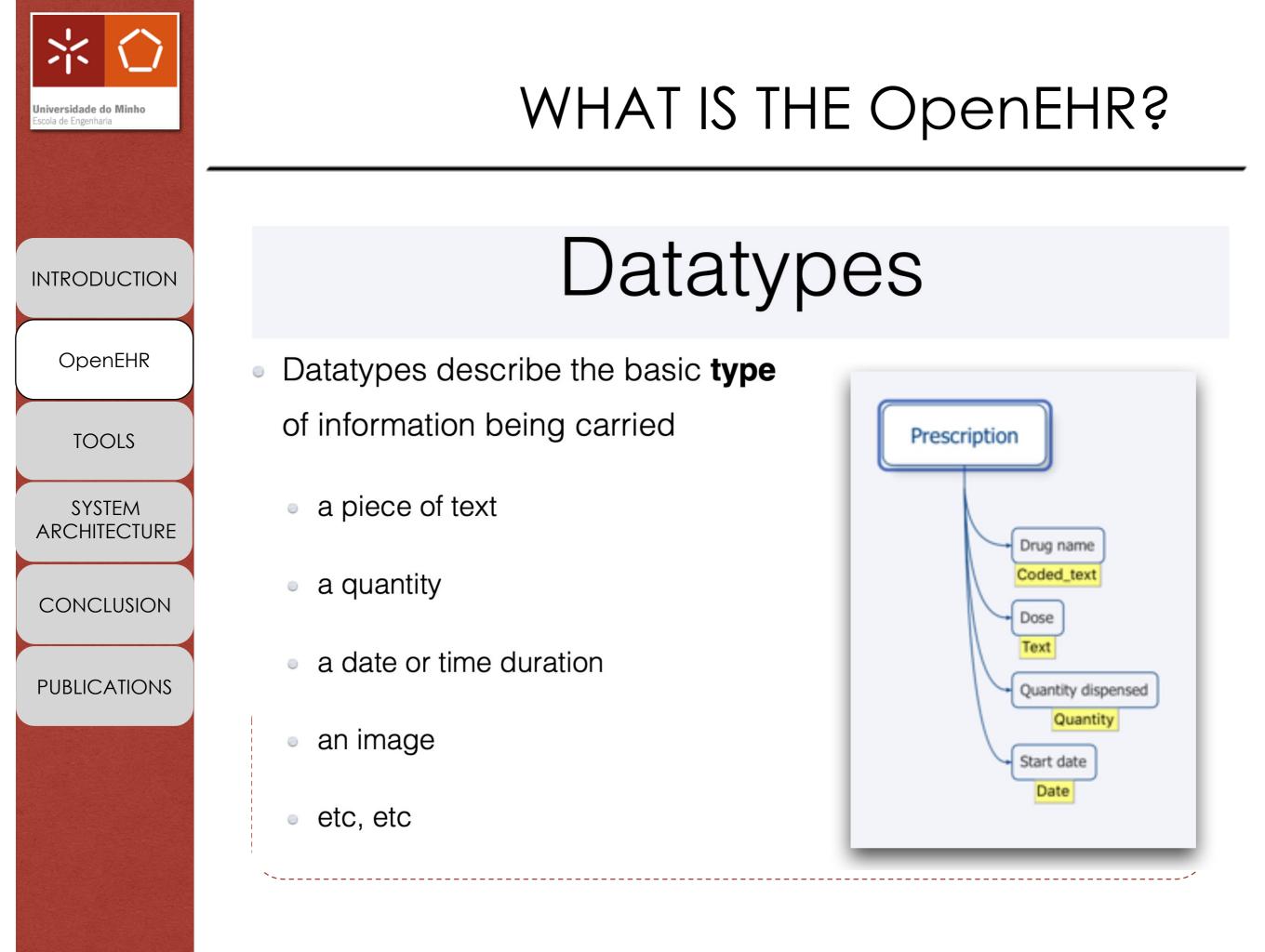


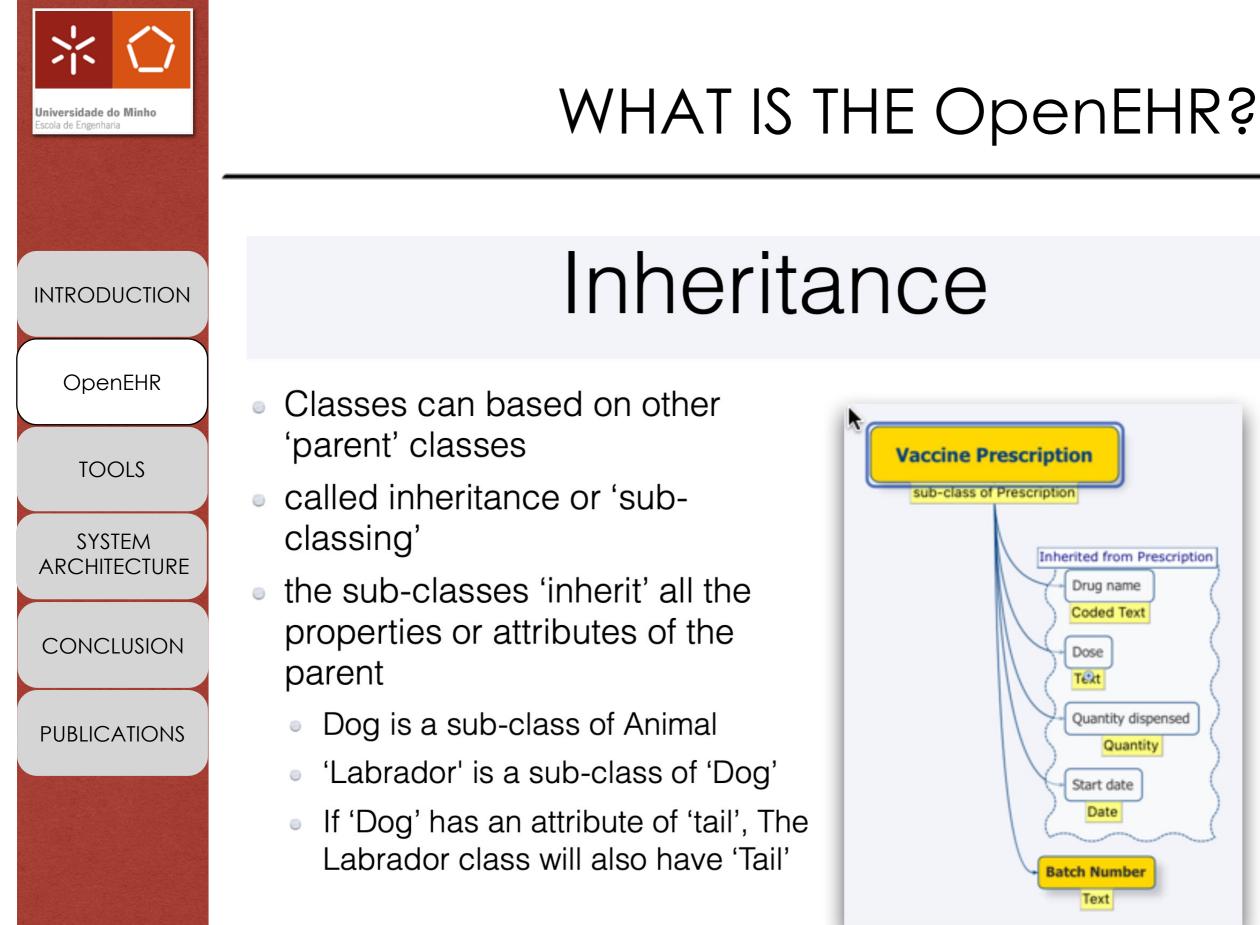
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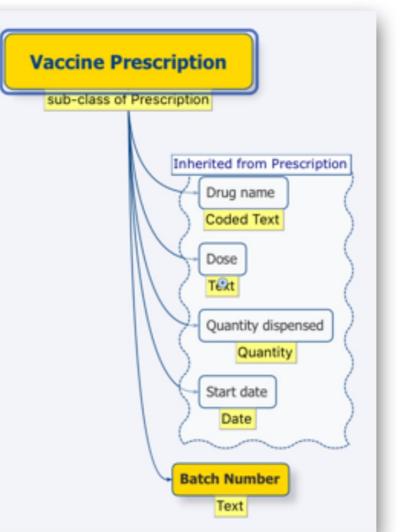
Classes

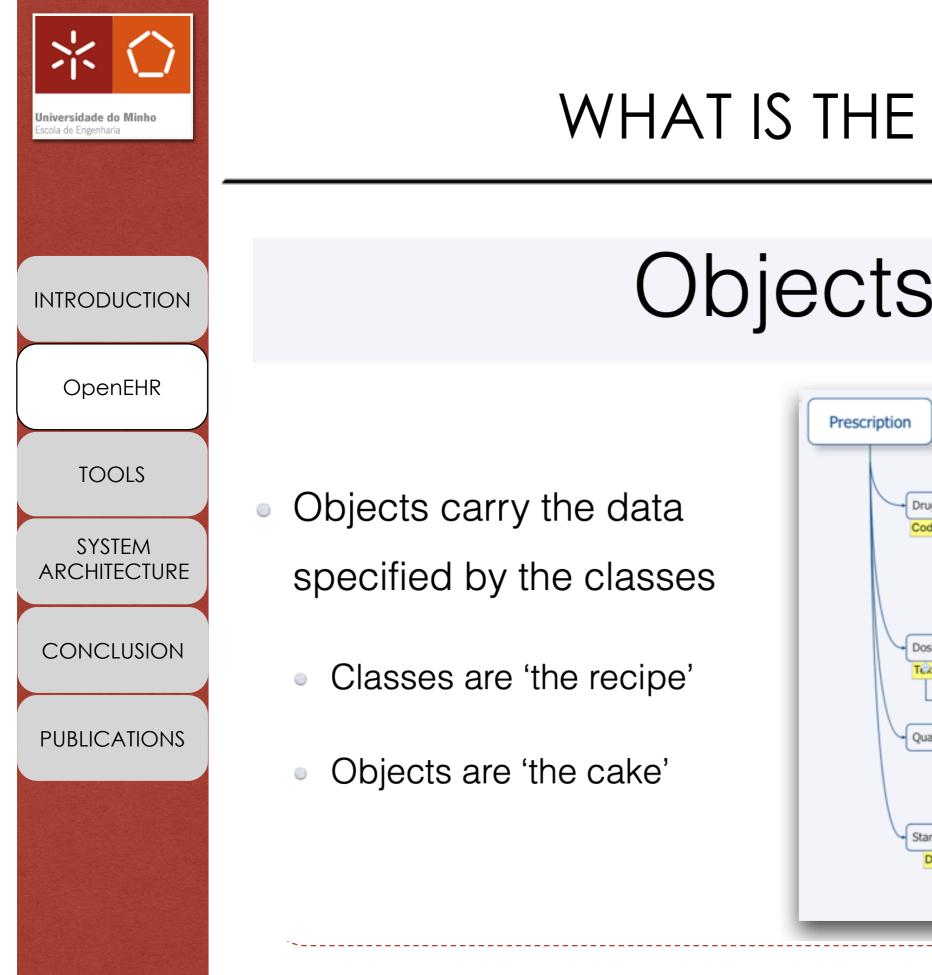
- 'Classes' are definitions of data structures
 - the 'assembly instructions' or 'recipe'
 - Classes have attributes (properties)



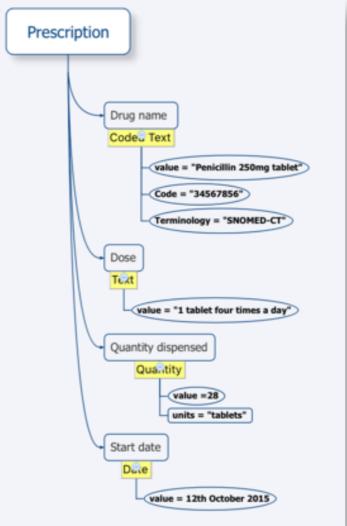








Objects





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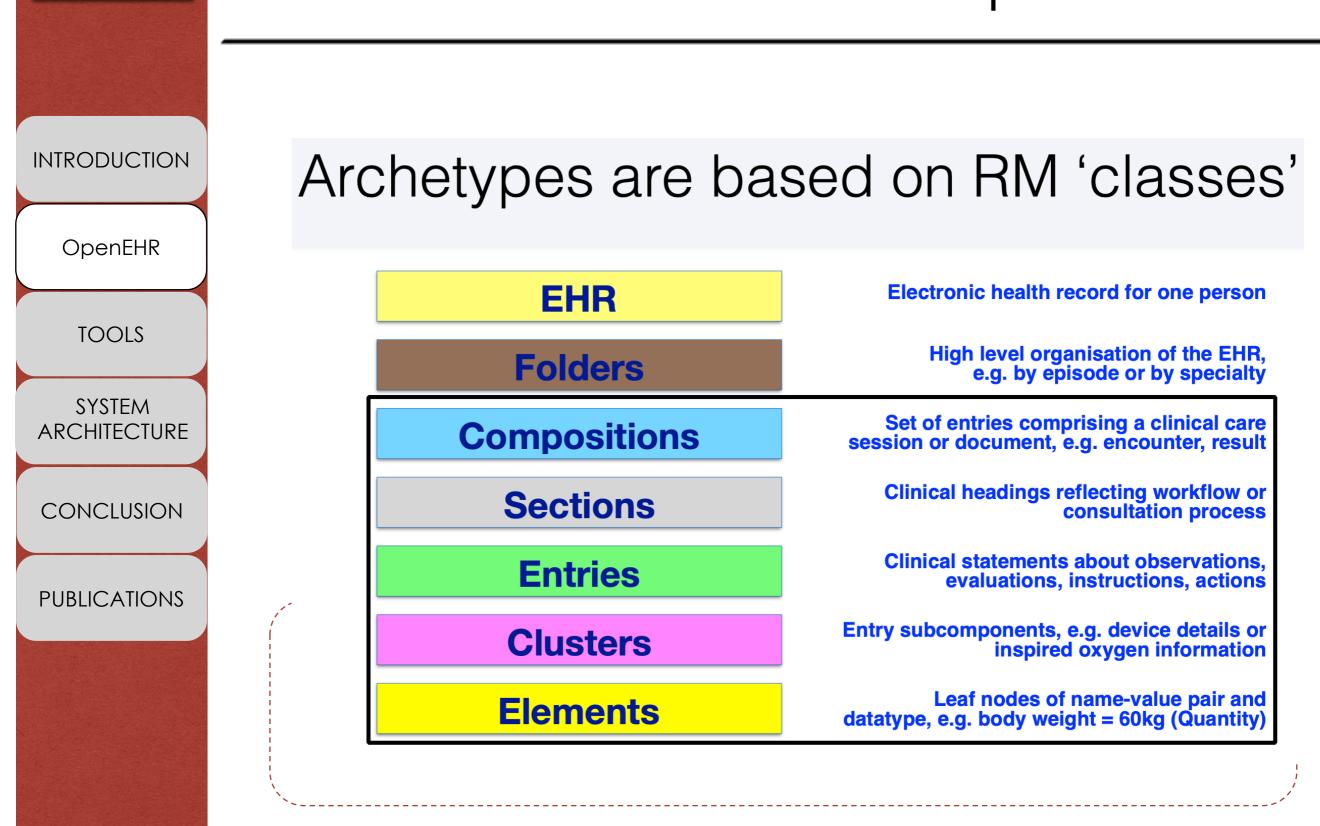
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Archetypes and the RM

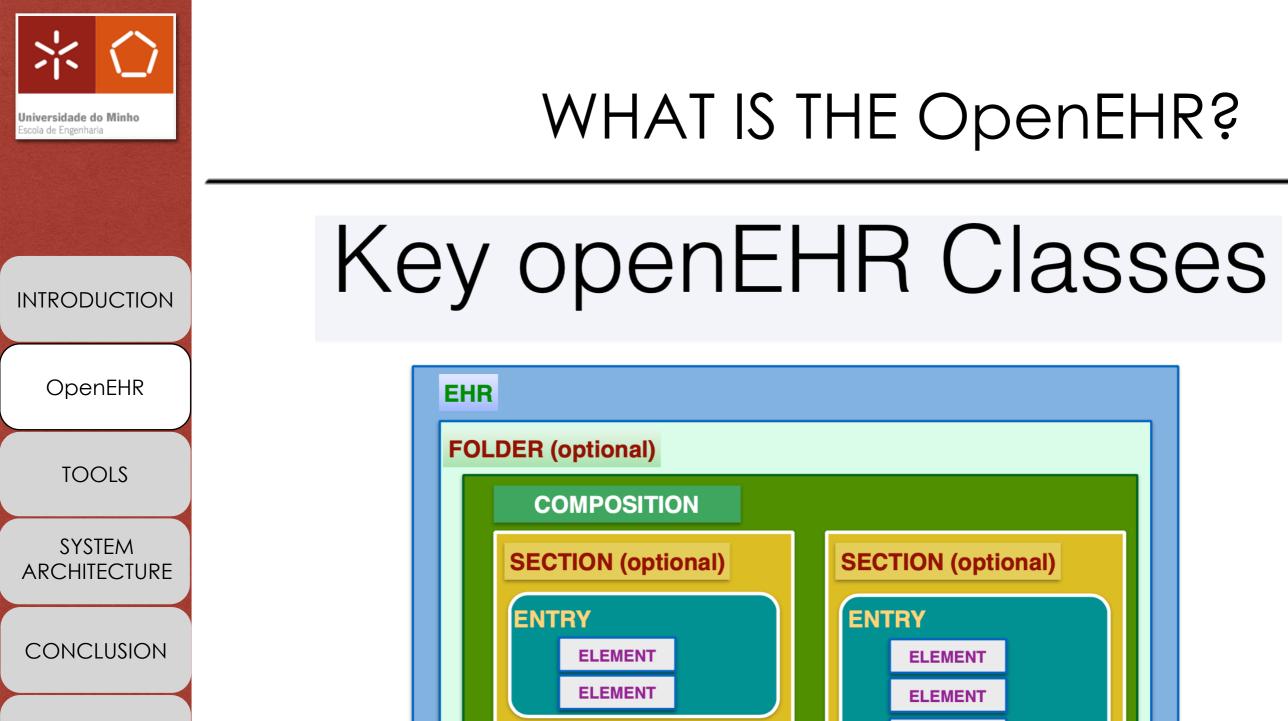
 Archetypes are built on top of the RM classes and 'inherit' their attributes

- e.g. An Observation archetype such as Blood pressure inherits the attributes of the RM OBSERVATION class
- Archetypes use the RM datatypes
- Most of these properties are technical but some are important to clinical modellers

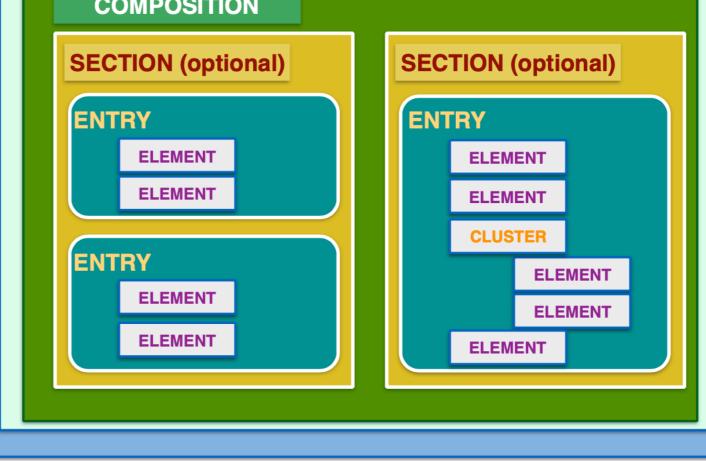
Q Systolic Q Diastolic Q Diastolic Q Mean arterial pressure Q Pulse pressure Q Comment Protocol Description	- `
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openEHR data objects

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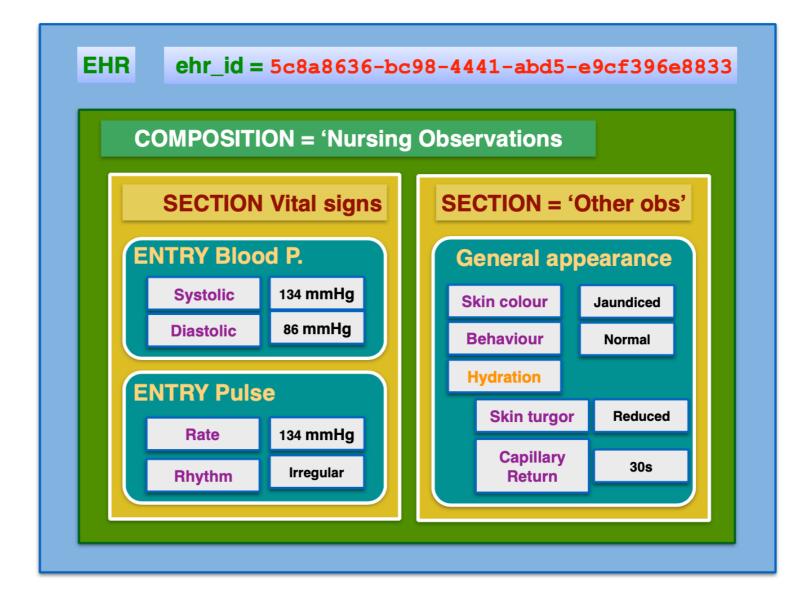
OpenEHR

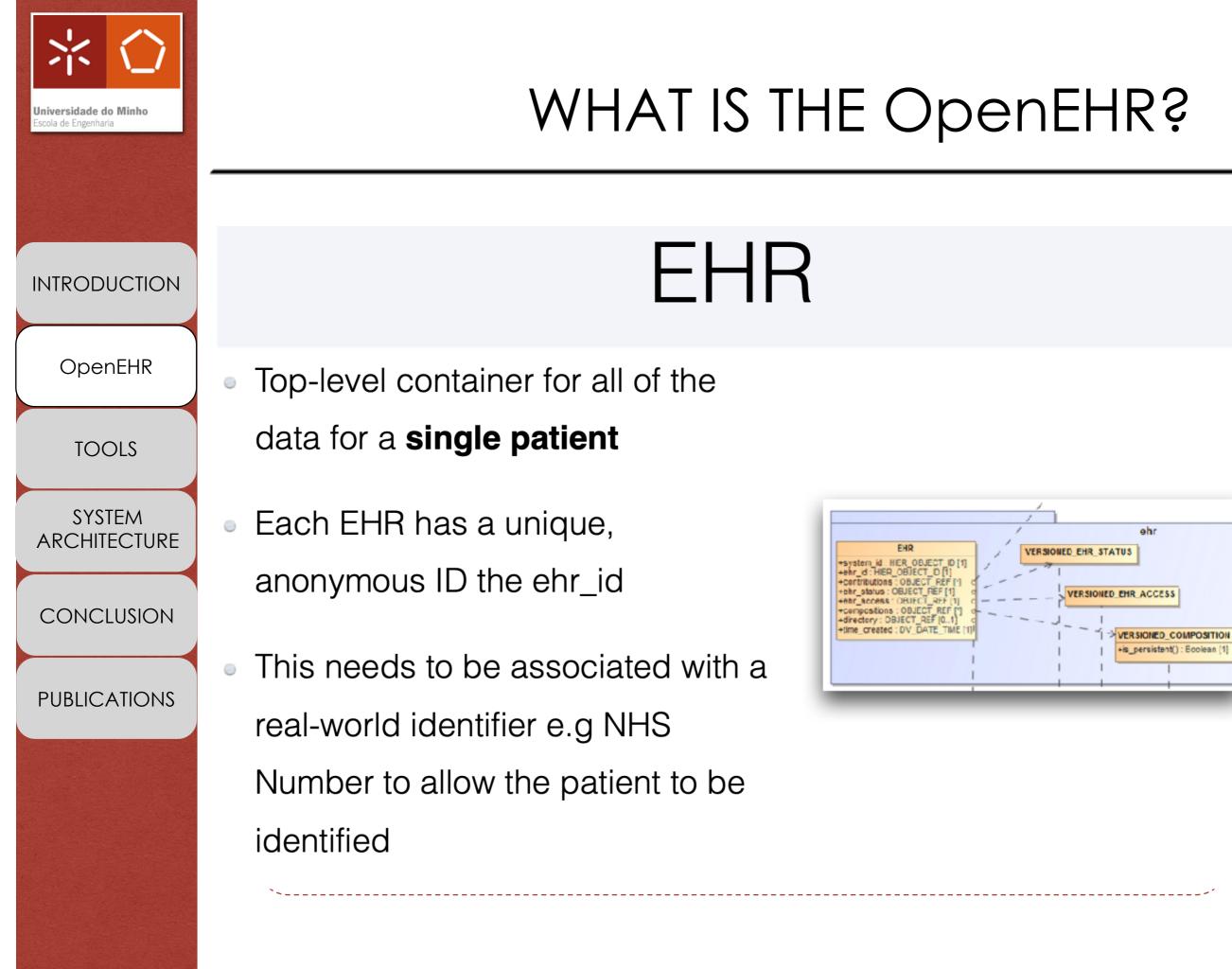
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Composition - the document container

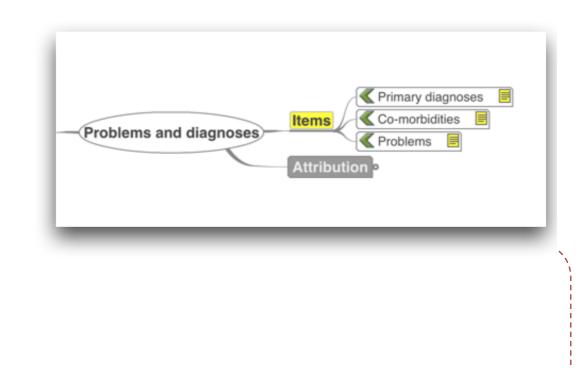
- Root 'document' for clinical data
- Carries most key medico-legal metadata
 - composer (clinical_author), start_time, end_time
 - organisation, clinical setting
- All recorded patient data saved inside a Composition
- Carries unique ID
 - UID::serverID::Version_Suffix
 - 5c8a8636-bc98-4441-abd5-e9cf396e8833::ripple_osi.ehrscape.c4h::1
- Versioned
 - All changes will create a new version

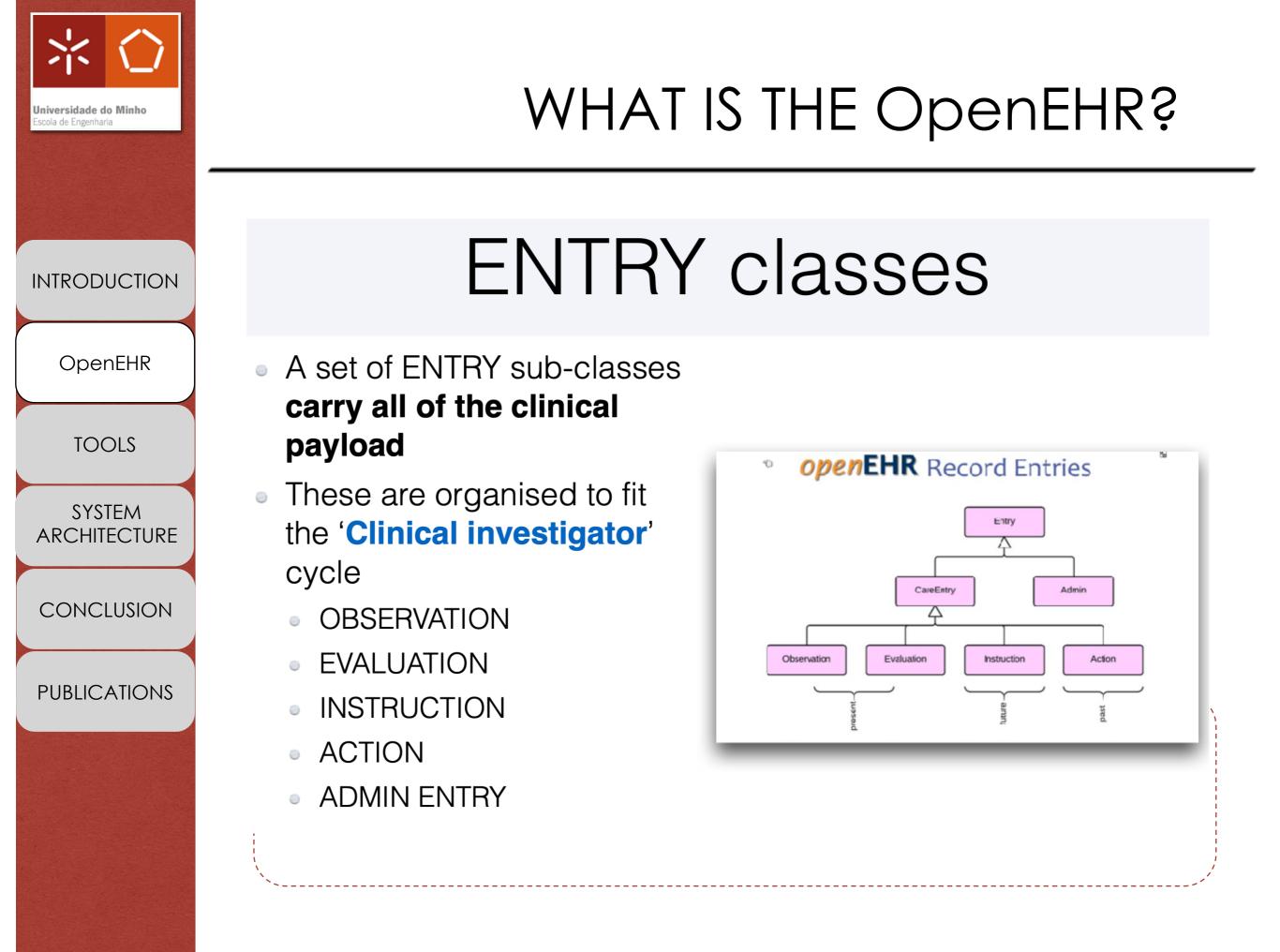


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SECTION

- Used to divide complex compositions into manageable pieces
- Just for human navigation and organisation
- Can be nested
- No important clinical RM attributes







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RM attributes for Observations

- Provider (optional 'provider of information', where this differs from the Composer)
- Subject (optional where record is not about the patient)
- Participations (Other people involved)

• Origin

- The start dateTime of the Observation
- The duration of the observation

Event-Time

- The start date_Time of an individual event
 - Useful when there are multiple samples for one test
 - e.g pulse / BP monitoring.



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RM attributes for Instructions

- Provider (optional 'provider of information', where this differs from the Composer)
 - Subject (optional where record is not about the patient)
- Participations (Other people involved)
- Activities
 - allows multiple chained 'sub-instructions'
- Narrative (mandatory safety feature)
 - needed in data, to ensure a complex instruction can always be dropped back to simple narrative
- Timing
 - Complex timing schedule for the whole instruction (rarely used)

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RM attributes for Actions

- Provider (optional 'provider of information', where this differs from the Composer)
 - Participations (Other people involved)
 - e.g. Operating assistant
- Time (the date and time that the action was performed)
 - e.g. date of a procedure or a prescription
- Current_status and careflow_step
 - the workflow status of the Action
 - e.g. planned, in-progress, completed, cancelled



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RM attributes for Quantity datatype

Units

• e.g.mmHg, mmol/l, /min

Normal_range

- For lab or device normal ranges
- e.g. 20-46 mmol/l
- Other reference ranges
 - For age or sex-specific reference ranges
 - Normal range for children : 18-28 mmol/l
- Magnitude_status
 - To allow numeric to be qualified
 - E.g <= 5 (Less than or equal to 5)
 - ~ 7.3 (approximately 7.3)
- Normal_status
 - High, normal, low based on HL7 lab messages
 - e.g. HHH,HH,H, ,L,LL,LLL





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RM attributes for Text/CodedText datatype

- Any Text datatype can also act as a CodedText datatype
 - if you have defined an element to be Text, it can still carry CodedText

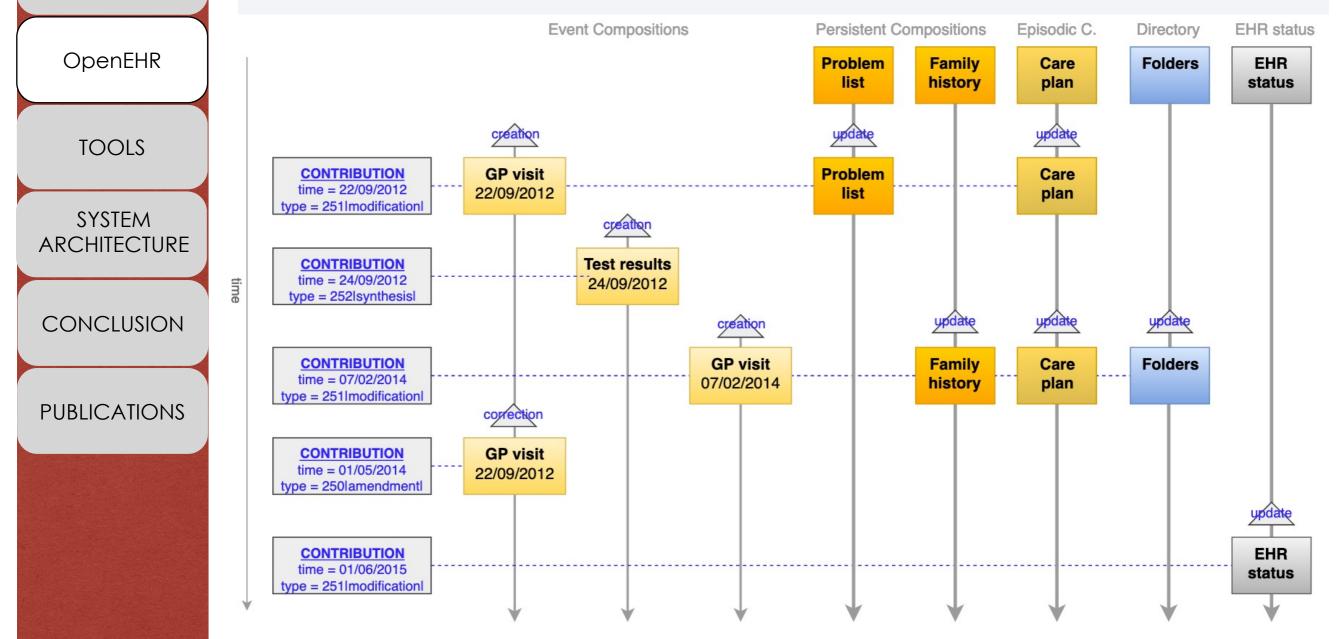
Defining_code

- The actual code of a CodedText e.g "123478-AS"
- The terminology/version of the CodedText e.g. "ICD-10"

Mappings

- to external terminologies
- e.g. The original code is an internal code "at007::Left" but is mapped to SNOMED code |123456|left|

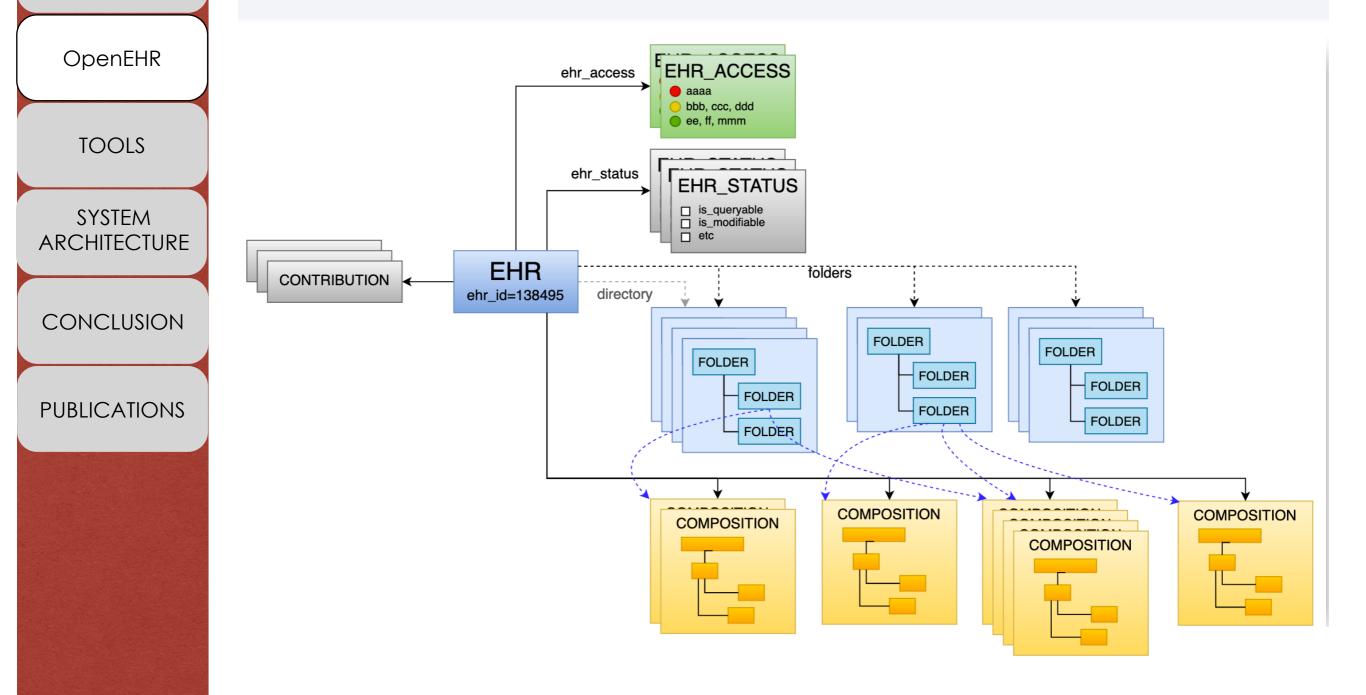
Contributions / versioning



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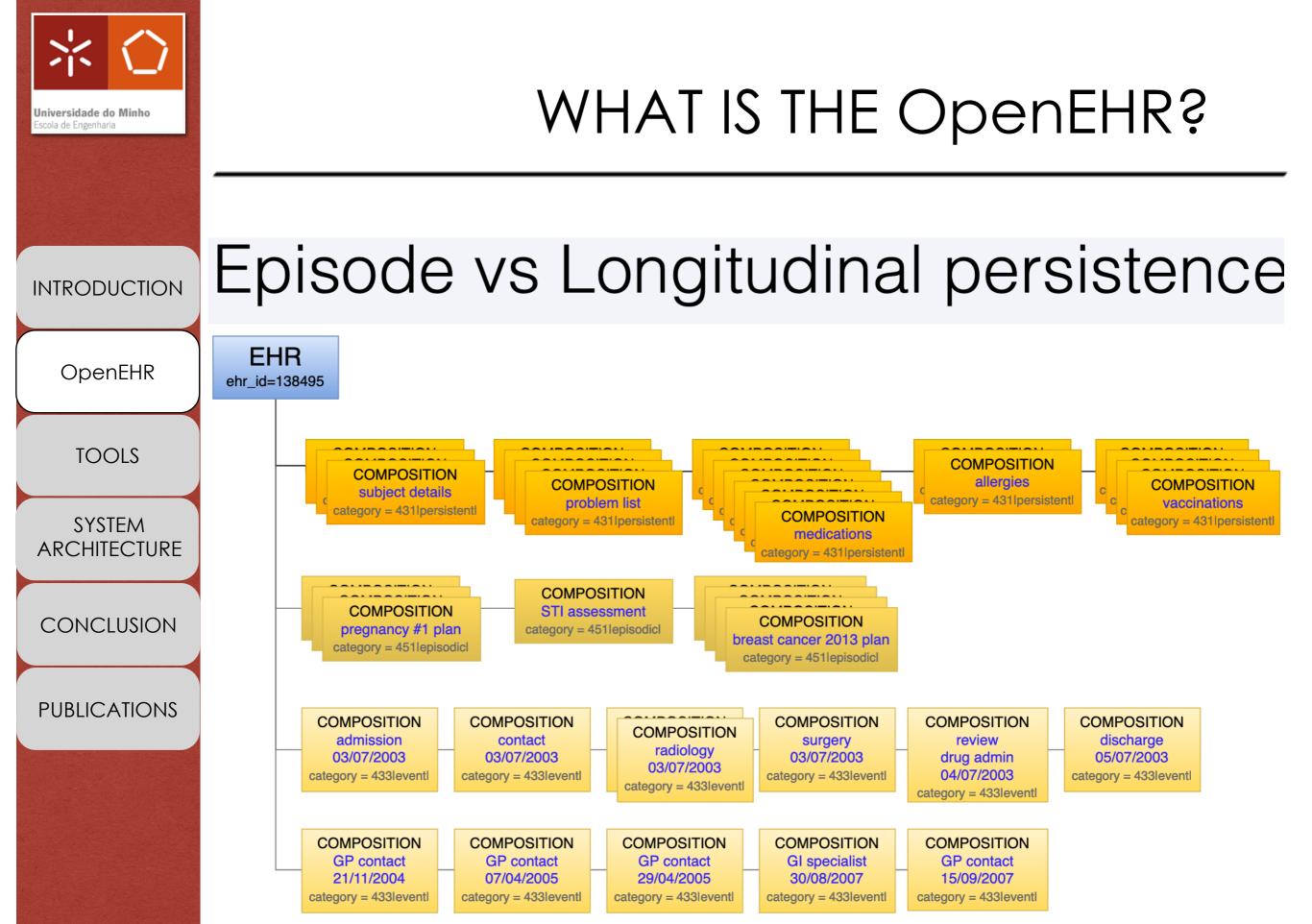
Episode vs Longitudinal persistence

Longitudinal Persistence

- Some persistent summaries should exist and be updated throughout the patient's lifetime
- End of Life summary, GP problem list

Episodic Persistence

- Most outpatient and hospital summaries e.g Allergy lists, Problem lists need to be re-created at admission, then maintained for the period of admission.
- A new Problem list may need ot be created for each episode of care



Links

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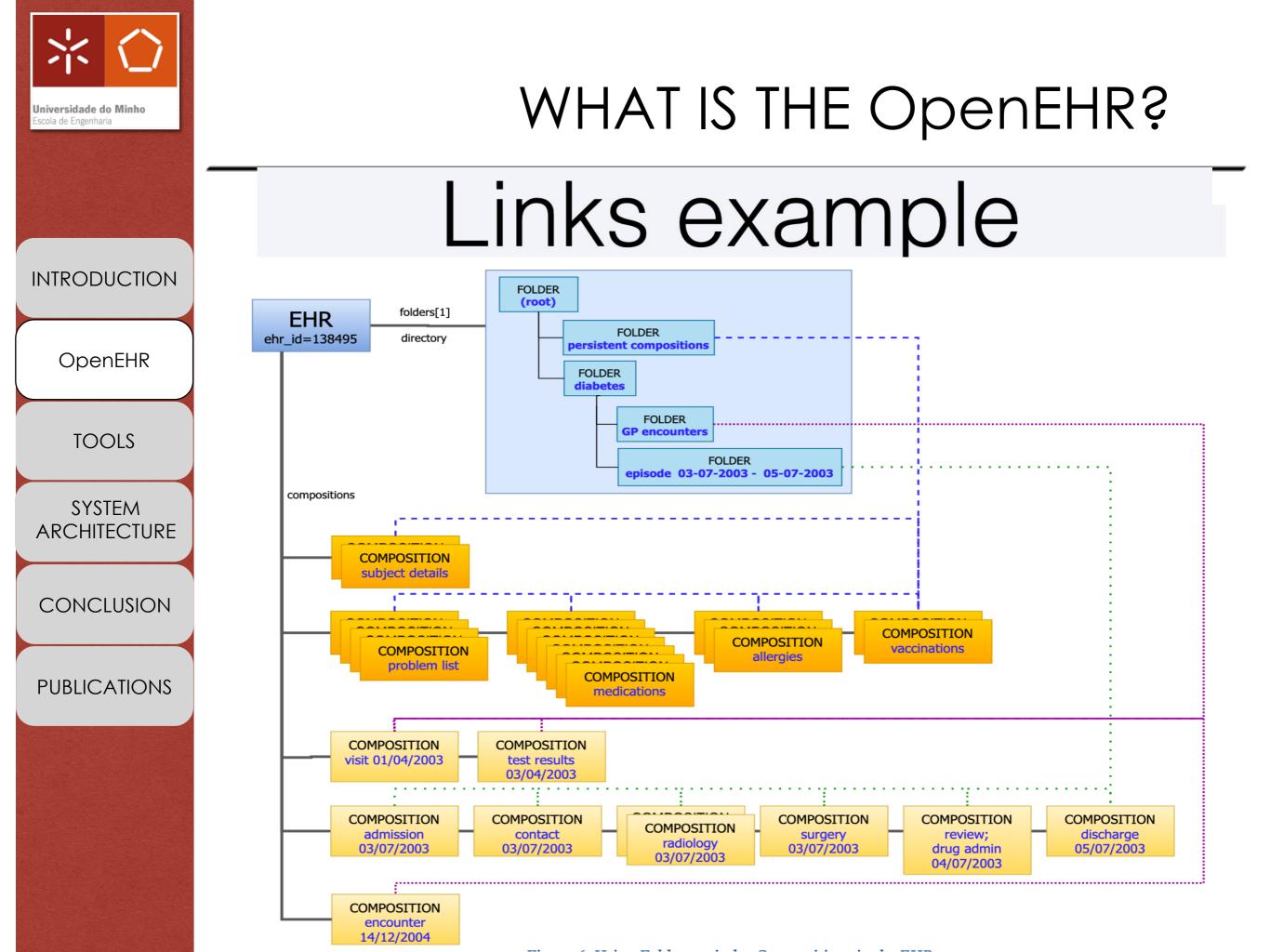
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- Most of the relationships between different Entries and Elements is defined in archetypes and templates, generally in the same Composition
 - Links allow the system developer to connect different Entries which do not have a 'pre-cooked' association, and where the Entries live in different Compositions





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WHAT IS THE OpenEHR?

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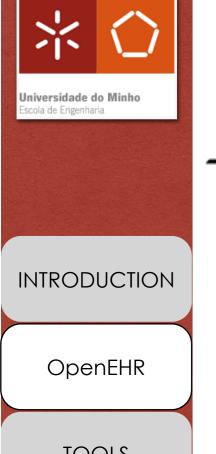
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Table 1 – Problems identified with Clinical Data Sets (CDS) and their OpenEHR Solutions

	Problems with CDS	Solutions with OpenEHR
1	Basic Data Types	Reference Model
2	Presentation Formats	Existing tools based on OpenEHR guidelines.
3	Design principles	Archetypes is a predefined structure.
4	Time of data capture	Archetypes have support for defining time-series.
5	Interpretation of data	Relevant archetypes have all relevant information for the interpretation of a measurement.
6	Integrity constraints	Archetypes are used to define integrity constraints in a uniform way.
7	Replication of domain knowledge	Making archetypes freely available at one central place is another mechanism to avoid 'reinventing the wheel'.
8	Multi-language support	Any translation occurs within one archetype only.
9	Non-integrated specialist applications	Archetypes can be shared by multiple HIS and authorities. Information can be exchanged between different systems keeping the semantic meaning.

Source: Expressing clinical data sets with openEHR archetypes: A solid basis for ubiquitous computing - Shelly Sachdeva, Shivani Batra, Subhash Bhalla



OpenEHR as a Solution

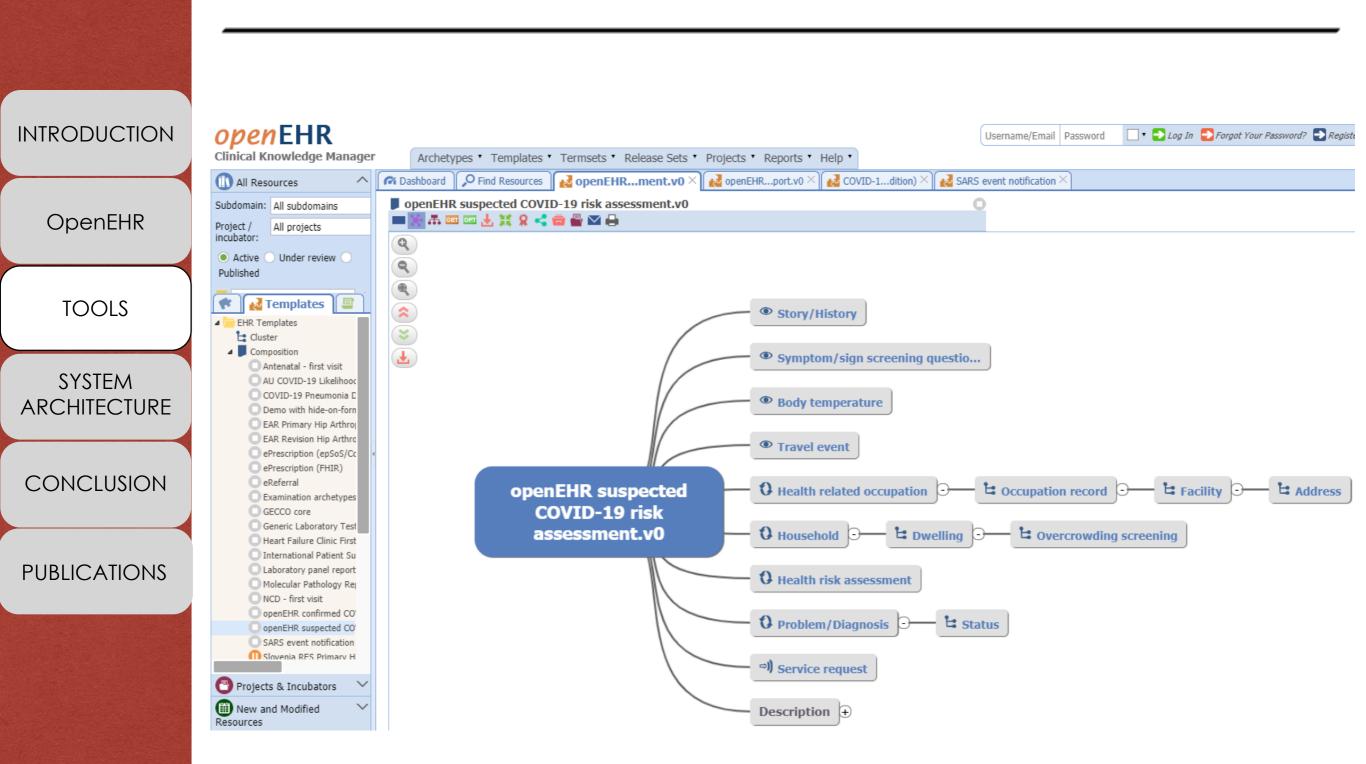
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	Lifelong

Main Goals

- The EHR @ Develop a New Clinical Model to support the EHR
- Ensure Structured Data
- M Improve of the information exchange between HIS
- Promote Interoperability at its different levels
- 🗑 Generate new Relevant Knowledge
- Ensure knowledge-based activities Decision Support Systems
- Tonsult the complete EHR of the patient, in real time

Lifelong	Longitudinal	Computable	Secure	Sharable	
New Healthcare System Features					





CKM

Source: https://ckm.openehr.org/ckm/



Archetype Designer

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	🛙 Dados de nascimento	at0015	Outro	
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	Initiativo do pedido da proposta INAME (from: Motivo do pedido)			
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Source: https://tools.openehr.org/designer/#/designer/repos/keg



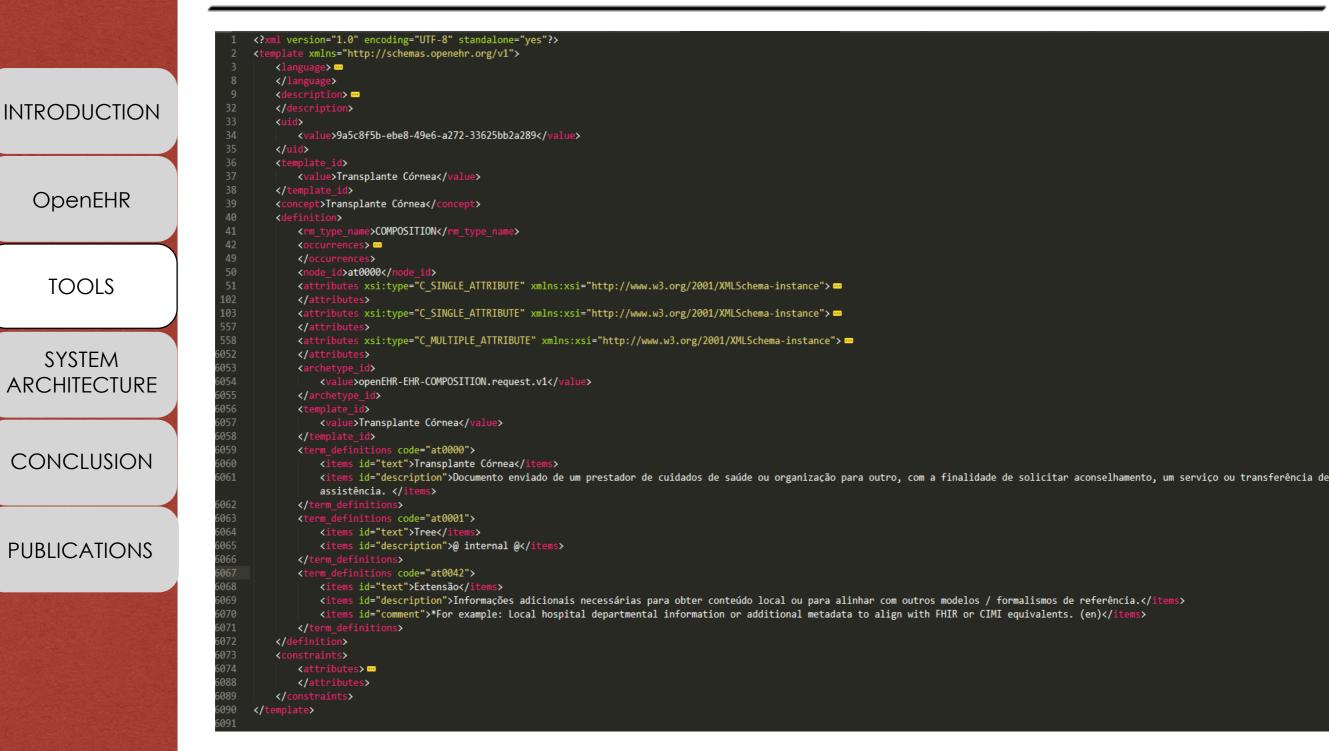
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Archetype Designer

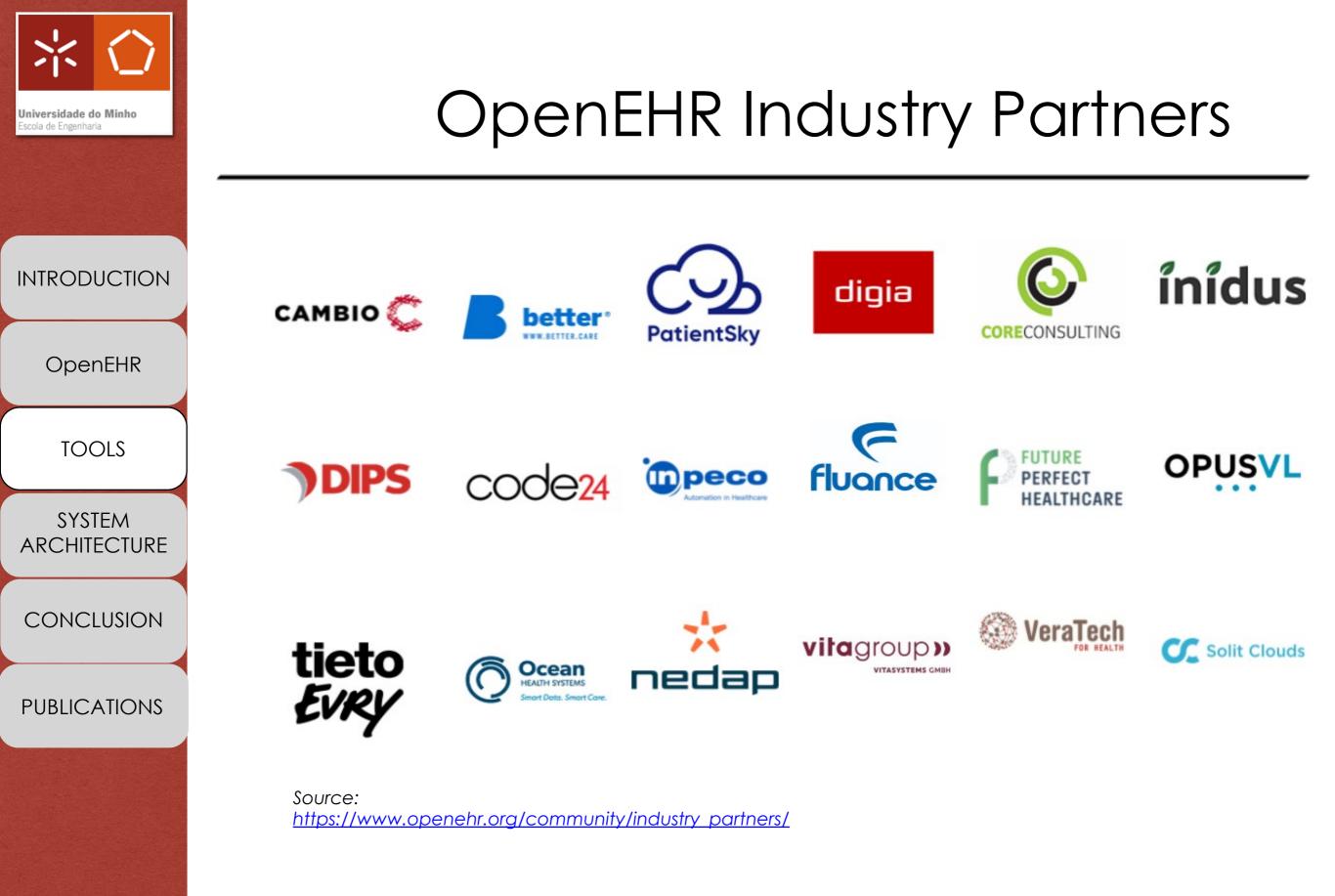
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Source: https://tools.openehr.org/designer/#/designer/repos/keg





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SYSTEM ARCHITECTURE Universidade do Minho scola de Engenharia **Modelling Tools Institution Databases** INTRODUCTION Archetype Designer CKM OpenEHR CHOOSING OPT FORMAT TO EXPORT AND PROCESS RETRIEVAL QUERY TO GET CORRESPONDING DATA TOOLS ProcessTemplate Algorithm 😻 SYSTEM Process OPT content ARCHITECTURE Process RM of OPT RetrievalData Algorithm 😻 Save both structures CONCLUSION NEW COMPOSITION INSTANCE

Is Clinical?

EHR CIM

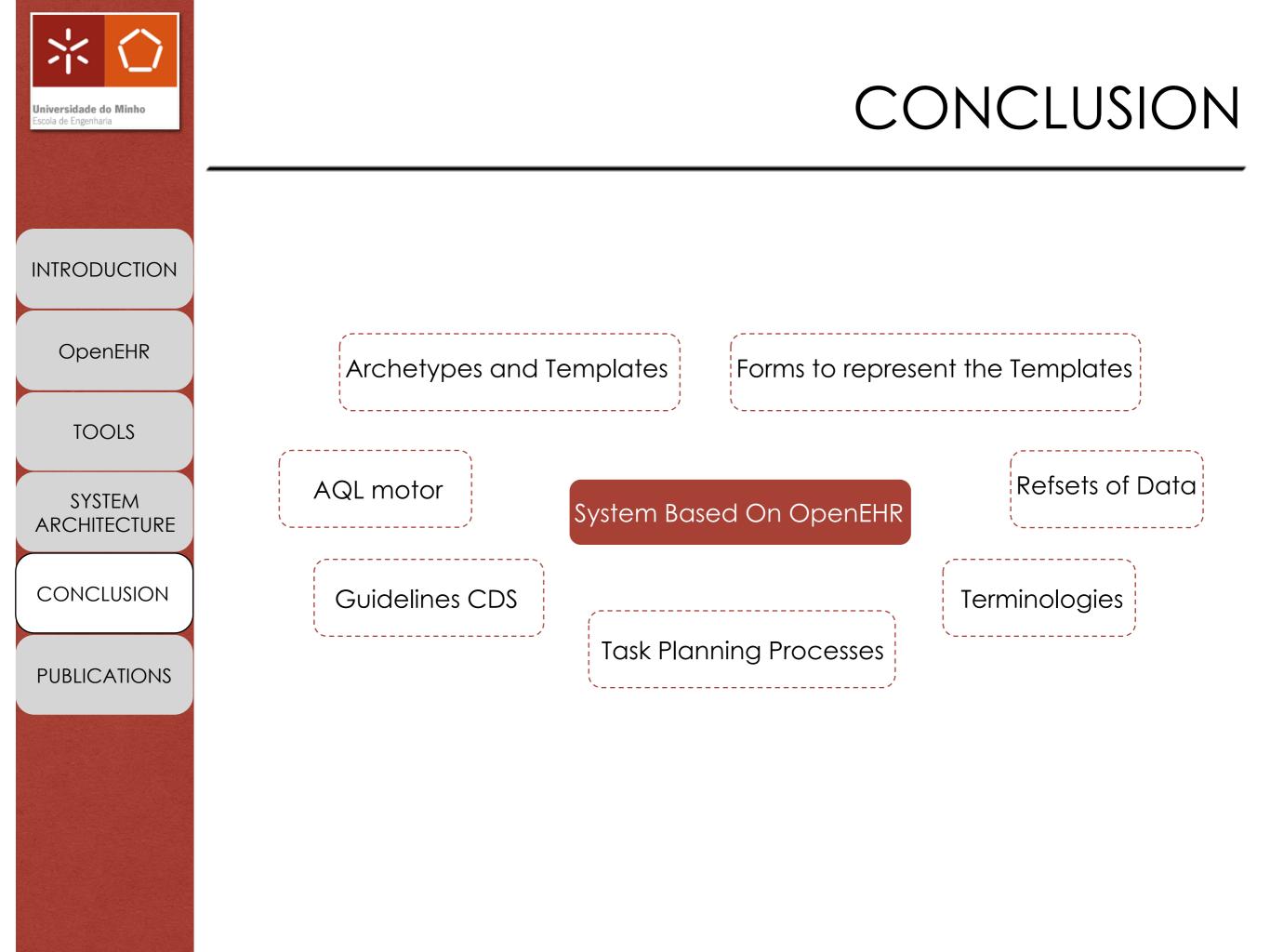
YES

EHR AOM

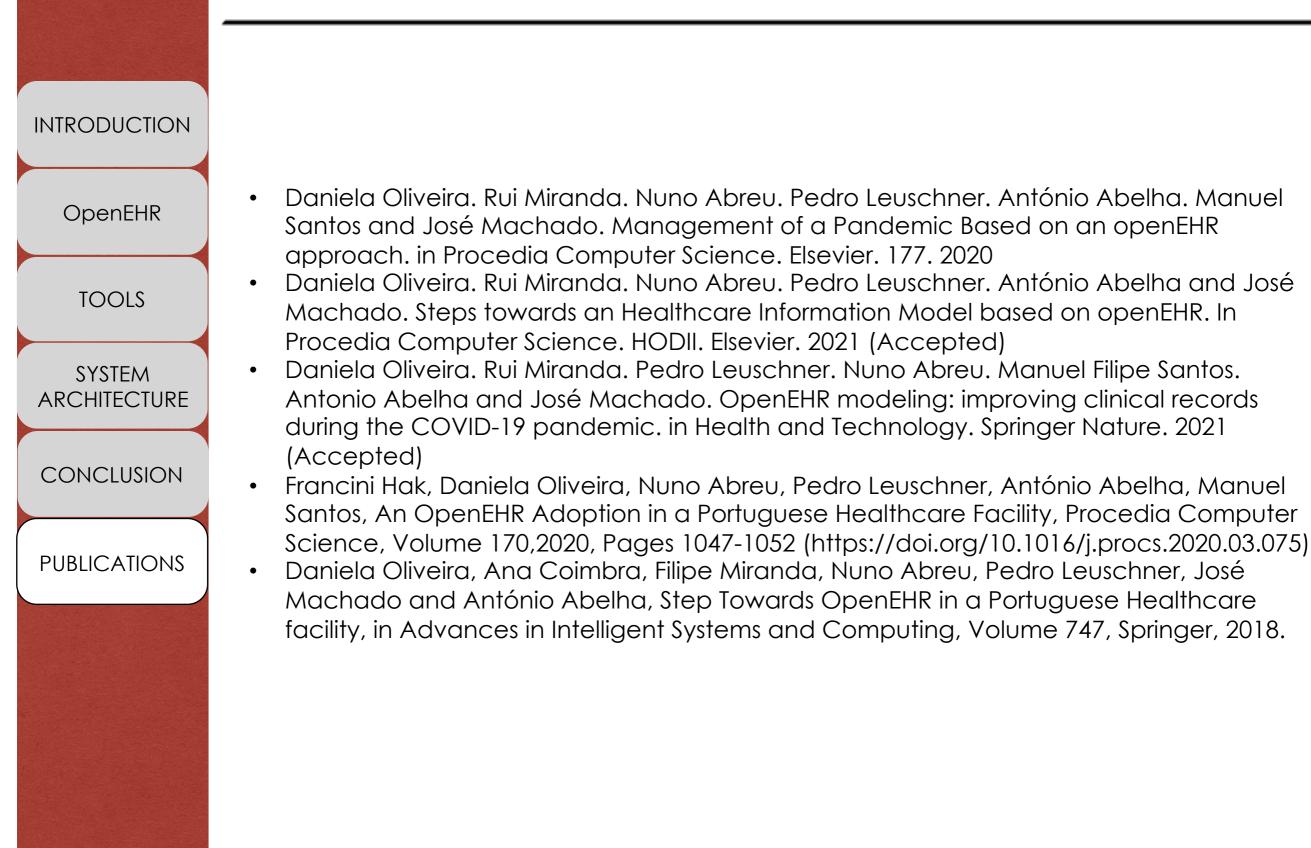
NO

EHR DIM





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OpenEHR - The solution for an interoperable development



António Abelha

May, 5th, 2021



RQ1 – Como modelar/criar estruturas OpenEHR?

- 1. Open EHR Modelling
- Better Platform
- CKM Repository



RQ2 – Como utilizar estruturas OpenEHR?

2. Process OPT Algoritm -> nodejs

- Processa o .opt
- Processa todo o RM associado
- Armazena estrutura numa document store database (SODA - Oracle 12c)



RQ3 – Como reutilizar estruturas OpenEHR?

3. FormBuilder Platform

• A partir de um template permite criar novas estruturas e diferentes formularios



RQ4 – Como aceder à informação guardada em estruturas OpenEHR?

- 4. AIDAEHR information Model (API)
- Submição, edição de composições.



RQ5 – Como migrar sistemas legados para estruturas OpenEHR?

- 5. RetrievalData Algoritm
- -> carregamento de mapeamentos



RQ6 – Qual a estrutura de dados para estruturas OpenEHR?

6. Separação de modelos de informação

- -> DIM modelo demográfico
- -> CIM EHR modelo



RQ7 – Qual o paradigma dados para estruturas OpenEHR?

7. Document Store Databse

-> SODA – Oracle 12c -> SODA – Oracle 19 (Task Plan Engine)



cola de Engenharia

Requisitos para uma implementação

RQ8 – Terminologias e Ontologias vs OpenEHR?

8. Criação de refsets por query ou estáticos para utilização em coded_texts e external codes