

MED20190123 Meeting

Attendance

- Brett Esler (Oridashi)
- Richard Townley-O'Neill (Digital Health Agency)
- Jose Veroes (eHealth NSW)
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Apology

- Dusica Bojicic (Digital Health Agency)
- Phil Robinson (Acrobatic Consulting Services)
- Eric Browne (Montage Systems)
- Jaymee Murdoch (Agency)
- David McKillop (Digital Health Agency)
- Liam Barnes (Digital Health Agency)
- Danielle Bancroft (FRED IT)
- Gamila MacRury (NPS Medicinewise)
- Shovan Roy
- Stephen Royce
- Jared Davison
- Matt Cordell
- Mina Wanis (MIMS Australia)
- Stephen Chu
- John Grimes
- Brian Dunstan
- Vikas Mittal (ADHA)

Agenda

- Process based on [Ballot and Resolution Process](#)
- Ballot Resolution (descending priority ranked)
- Issue resolution will record:
 - Disposition WG (Persuasive / Persuasive with Mod / Not Persuasive / Not Persuasive with Mod / Not Related / Referred and Tracked / Pending Input from Submitter / Pending Input from other WG / Considered for future use / Considered-Question answered / Considered-No action required, Withdrawn, Retract)
 - Disposition Comment
 - Mover/Seconder, For, Against, Abstain
 - Change Applied (Yes/No/Pre-applied)
 - Substantive Change (Yes/No)

Minutes

Reference	Summary	Priority	Vote	Disposition
FHIRIG-97	Semantics not clear for ETP Vendor Identifier	High	Affirmative + Suggestion	<p>Disposition: Persuasive</p> <p>Comment: This is numeric representation the identifier that is typically represented as a barcode; Identifier.system is supplied by the ETP vendor. Will clarify the short and long description re relation to barcode; and note that this refers to a specific prescription instance. We will add some real world examples.</p> <p>Vote: Brett / Phil : 6-0-0</p> <p>Change applied: No - needs to be drafted</p> <p>Substantive: No</p>

FHIRIG-70	No approval on pbs.gov.au system url	High	Negative	Disposition: Persuasive Comment: Brett will follow up with NCTS and PBS re content and referring to manufacturer (Phil R will send a PBS contact to Brett) Vote: Brett / Richard : 6-0-0 Change applied: No Substantive: maybe
FHIRIG-24	Binding: PBS Medicines Item Codes (required) - please review	High	Negative	Disposition: Withdrawn Comment: PBS code values are not in scope for this IG; the PBS CodeSystem included indicates this is an externally defined coding. Work is happening in NCTS to supply a full set of PBS codes that we intend to bind in a future IG version. Change applied: No
FHIRIG-52	medicationCodeableConcept and medicationReference are both 1..1	High	Negative	Disposition: Withdrawn Comment: This occurs in all type slicing in FHIR the IG publication represents cardinalities in this manner; follow up on this representation as it is confusing Change applied: No
FHIRIG-46	CodeableConcept for medication-brand-name	Medium	Negative	
FHIRIG-47	medication-generic-name	Medium	Negative	
FHIRIG-43	Query reference to "AU Base Patient" and "AU Base Organisation"	Medium	Negative	
FHIRIG-62	Form is a listed under Physical Product Manufacturer Organisation	Medium	Negative	
FHIRIG-32	PBS items have a code system page, why not PBS sponsors	Medium	Negative	
FHIRIG-41	Bodysite Location Qualifier value set incomplete	Medium	Negative	
FHIRIG-29	OID needed for pbs item codes	Medium	Negative	
FHIRIG-42	Too restrictive on bodysite	Medium	Negative	
FHIRIG-30	OID for medication type	Medium	Negative	
FHIRIG-33	OID for icpc-2plus	Medium	Negative	
FHIRIG-28	OID needed for gtin code system	Medium	Negative	
FHIRIG-27	unknown target disease	Medium	Negative	
FHIRIG-26	problems with vs-1	Medium	Negative	
FHIRIG-21	Intro.md file guidance missing an element that should not be used	Medium	Negative	
FHIRIG-56	AU Base Dispense Record to be extended to accommodate PBS dispensing requirements	Medium	Affirmative + Query	
FHIRIG-55	MULTUM code / as terminology system	Medium	Affirmative + Suggestion	

FHIRIG-96	AU Prescription StructureDefinition name	Medium	Affirmative + Suggestion	
FHIRIG-95	Multiple PBS sponsors	Medium	Affirmative + Suggestion	
FHIRIG-60	SNOMED CT Vaccine Codes	Medium	Affirmative + Query	
FHIRIG-57	AU Base Medication Statement enhancement to accommodate medication reconciliation	Medium	Affirmative + Suggestion	
FHIRIG-58	Medication Administration not in the "AU Base"	Medium	Affirmative + Query	
FHIRIG-79	Clarification required	Low	Affirmative + Query	
FHIRIG-69	Improve usage of brand / generic extensions	Low	Affirmative + Suggestion	

Actions

- BE: approved <https://github.com/hl7au/au-fhir-base/issues/206> - see comments
- BE: add guidance Immunization.primarySource when value unknown - see issue <https://github.com/hl7au/au-fhir-base/issues/221> - use NI null flavour and extension <https://www.hl7.org/fhir/extension-iso21090-nullflavor.html>
- BE: Verifier role - describe usage; checked by e.g. student or policy of second observe
- BE: create MedicationAdministration AU profile - done
- BE: add PractitionerRole where needed in MedicationAdministration
- BE: Witness for Immunisation administration - look at <http://hl7.org/fhir/stu3/valueset-immunization-role.html> valueset to expand - added to issues
- BE: move meds witness to MedicationAdministration.performer give advice on r4 transform - added to issues
- BE: AU Base Body Site - > naming in narrative
- BE: container types element in R4 query zulip chat
- BE: check international MedicationStatement needs informationSource
- BE: diluent zulip chat feedback required
- BE: add OID mappings to coding into base IG
- BE Check \$this type slice cardinality 1..1 base element 1..1 in slice (snapshot generator) - need to select one type slice before checking cardinality in the slice content followup Zulip with GG