

2019 16 April AU Base Connectathon Sydney

AU Base Status

Slicing of identifiers

- Silce on profile have separate Identifier type profiles e.h. IHI
- Vital signs profile not really needed in AU base - consider just using STU3 profile

Slice by Valueset membership

- Medication.code etc. one slice for AMT - optional extension 'MedicationCodeType' bound to <http://build.fhir.org/ig/hl7au/au-fhir-base/ValueSet-medication-type.html>; FHIR path to check code membership of valueset based on the extension code; code bound to all AMT
- Have separate profiles for each slice of Medication.code

SNOMED coding for VitalSigns

- propose SNOMED-CT codes for vital signs to discuss further NCDHC
- start with a concept map to describe this

Terminology services for CI build

- FHIR versions specified by the IG
- Packaging NCTS terminology is an option
- Official request for terminology service use

Update of SNOMED-CT AU

R4 strategy and timeline

- AU Base 1 for FHIR STU3
- AU Base 2 for FHIR STU3
- AU Base 3 for FHIR R4 (port after STU3, including draft material)
- STU3 done based on any demand; assess this
- PD 1 for FHIR STU3 (record of POC) depends of AU Base 1
- PD 2 for FHIR R4 depends on AU Base 2 (CI ballot)
- CH 1 for FHIR STU3 based on AU Base 1 (record of POC)
- RCPA Cancer Reporting will be worked on
- Agency business
- ARGO 1 for FHIR R4 depends on AU Base 3

Other Activities

- NCTS STU3 service intent to go to R4
- (PC 1 for FHIR R4)
- QCTS terminology service will happen

R5 Sep/Oct 2020 - potential; will ask market; may be delayed

Birth Sex Representation

- We think observation - use LOINC and/or SNOMED-CT
- Genetic basis for sex / Presenting biology
- Investigate terminology
- QLD health will comment
- CSIRO will comment

Next Ballot:

- Encounter
- HealthcareService specialty/type binding fixes
- Prescribing

- Empty list / no data
- List/Section RTFM - R4 spec
- HI service - push IHIs with changes in demographic

