

Clinical LOINC Meeting
Beneficial Life Building, Salt Lake City, Utah
Monday September 29, 2003

Attendance: See attached spreadsheet: "[2003 0926 SLC attendance](#)"

- 1) Clinical LOINC Tutorial - Stan Huff
 - a) See attached presentation: "loinc tutorial 030927 slc.ppt"
- 2) Questions and Answers/Open Discussion - Stan Huff and Clem McDonald
- 3) Suggestions on LOINC structure - Chris Chute
 - a) See attached presentation: "[LOINC Clin ObsOn Chris Chute](#)"
 - b) Conclusions
 - i) Substructure of many clinical items is complex
 - ii) The elements of the model are not drawn from consistent underlying Ontology
 - iii) We need to solve the information model/terminology model problem
 - iv) We need to consider templates, archetypes
 - v) Have a reference information model for the LOINC terminology (formal models)
 - vi) May need to use XML or OWL for representation of complex items
- 4) Document ontology/names/sections
 - a) VA submission - Viet Nguyen
 - i) See associated files "[VA Doc Title Submit 09 29 03](#)" and "[VA LOINC Re-Submission 03 Oct](#)".
 - b) Action items: Stan Huff**
 - i) Submit Rule: Move provider types into component**
 - ii) Subdivide mental health into Psychiatry, Psychology**
 - iii) Review use of setting of inpatient and out patient settings**
 - iv) Add the following items: Occupation Therapy, Neurology, Hematology, Hematology and Ontology, Rheumatology, Podiatry, Recreational Therapy, Rehabilitation Therapy, Speech Therapy, Audiology**
 - v) Remove EYE, ENT**
 - vi) Add new category (based on E&M items) for Anticoagulation, Hypertensive clinics**
 - c) Action items: Viet Nguyen**
 - i) Kinesiology – How how is this different from physical therapy?**
 - ii) Create new submissions**
- 5) Survey instruments - Tom White
 - a) See attached presentation: "[AssessmentInstrumentsInLOINC-2003-rev](#)"
 - b) Action items for Clem and Kathy:
 - i) Fix where the question text is in the LOINC file
 - ii) Fix where the answer list is
 - c) We will make unique LOINC codes for unique wording of a question
 - d) See also attached file ([Survey Instrument Content Thomas White 031109](#)) with

Questions/Answers between Clem McDonald and Thomas White

- e) See also attached files for example content that we would like to capture in the LOINC tables: "[LIV-HIV](#)" and "[SF-36](#)"

- 6) Relationships - LOINC, National Library of Medicine, and SNOMED CT
 - a) The NLM would like to have a clear boundary between what concepts are added to SNOMED and what concepts are added to LOINC. The NLM does not want to pay twice for the same work.
 - b) A group of folks including Kent Spackman, Clement McDonald, Bob Dolin, Stuart Nelson, and Stan Huff are working on a proposed agreement for laboratory items.
 - c) Stan Huff and James Campbell are working on a proposal for division of work between Clinical LOINC and SNOMED. Sundak Ganesan is evaluating a model of how Clinical LOINC items could be modeled in SNOMED, and evaluating the overlap between Clinical LOINC and SNOMED observables.

- 7) Root cause analysis codes (MERS-TH) - Sue Bakken
 - a) We were unable to reach Sue to discuss this item.

- 8) Nursing LOINC
 - a) Sue Bakken, Susan Matney, Judy Ozbolt are planning to meet at the AMIA Fall Meeting to plan future work.,
 - b) The group plans to have a statement about goals and objections by the Big Sky Meeting in January.

- 9) CDE Harmonization
 - a) NCI is using SAIC as a contractor for development of tools and terminology content
 - b) A primary goal is harmonization of CDE within NCI
 - c) One aspect of the project is the creation of meta-data related to the CDE elements
 - d) NCI is working to support CDE use in Phase III Clinical Treatment Trials and in CTEP
 - e) There is a need to avoid overlap and redundancy between data elements in different trials
 - f) SAIC also needs to coordinate with LOINC and other standards groups
 - i) ICD-O3
 - ii) Survey relevant standards (LOINC & HL7) and make specific recommendations of how those standards could be enhanced to make them appropriate for use by NCI
 - iii) It would be good to have a face to face meeting between LOINC and SAIC
 - g) Denise Warzel: Online tools and registry will be accessible through a Java Interface (Java API), early November

- 10) Order batteries/panels - James Campbell, Clement McDonald, Jeff Suico
 - a) Dr. Campbell's items will be used as the starting point
 - b) All items have been added
 - c) We need review of the Nebraska content and additions from other institutions
 - d) For each panel we need
 - i) A name
 - ii) The items that the panel contains, and whether the item is required, optional, or conditional
 - e) Action Item: Cessily Johnson (IHC) and Elizabeth King will compare to IHC and submit suggested changes

- 11) New items from IHC – Susan Matney
 - a) Tobacco history items were discussed with suggestions for changes [TobaccoAlcoholSubstance](#)
 - b) It was also suggested that the NHANES database be examined for Tobacco related questions

- 12) Warren Williams submitted some analysis of existing section-like names in LOINC.
 - a) See attached file: “[LN terms with relationship to doc structures W Williams 030915](#)”
 - b) We did not have time to discuss this item during the meeting.