[Yesterday 2:37 pm] Chris Moy (AMC)

Hi All- my job is to remind everyone to keep it simple, perfection is the enemy of the good (to get runs on the board and get moving), and this is an iterative progress where we can improve over time. And today is about the "Core of The Core" which we need to get over the line as a starting point

like 1

[Yesterday 2:43 pm] Chris Moy (AMC)

Could I please ask participants to mute if not speaking- thank you:-)

like 1

[Yesterday 2:45 pm] Rob Hosking (Guest)

Important to remember that clinicians are the data entry people. I am concerned that other people will have influence over what clinicians are being required to enter. We don't want to interfere with clicnicians usual workflow

like 3

[Yesterday 2:45 pm] Roy Mariathas (Guest)

So sorry for the audio spam team, I'm not native to Teams.

[Yesterday 2:46 pm] Jenaya Price

Great to hear Stephen Chu online 🙂

like 1

[Yesterday 2:55 pm] Oliver Frank

**Rob Hosking (Guest)**

Important to remember that clinicians are the data entry people. I am concerned that other people will have influence over what clinicians are being required to enter. We don't want to interfere with clicnicians usual workflow

... and it is important that software vendors make it easier for users to enter high quality quality data and harder to enter low quality data. <https://www.dropbox.com/scl/fi/9wii43wkxj0jrpux1n910/Number-14-Monitor-data-quality-Medical-Observer-published-18-April-2017.docx?rlkey=4chbvgomupcx956zqlxt4jtvl&dl=0>

like 3

[Yesterday 2:58 pm] Oliver Frank

How does 'handover summary' differ from the other three types of summaries?

like 1

[Yesterday 3:04 pm] Chris Moy (AMC)

Key re transfer of care is identifying who you are sending to and information about the recipient

[Yesterday 3:04 pm]

Reuben Daniels (External) was invited to the meeting.

[Yesterday 3:04 pm] Alan Barclay

Are food allergies and intolerances captured anywhere?

[Yesterday 3:05 pm]

Steven Potashnyk was invited to the meeting.

[Yesterday 3:05 pm] Michael Legg on Dharawal land (Guest)

Thank you. Sorry I have another commitment now.

like 1

[Yesterday 3:05 pm]

Michael Legg on Dharawal land (Guest) left the chat.

[Yesterday 3:09 pm] Jacqui Rhodes

As a midwife, I think Pregnancy should be in 🙂

like 1

[Yesterday 3:10 pm] njferris (Guest)

Medical devices important for  e-requests in diag imaging

like 2

[Yesterday 3:11 pm] Janette

Sharing adverse/ allergies it’s the reaction that is important for sharing across health services

like 1

[Yesterday 3:12 pm] Rob Hosking (Guest)

Medications should include currently taken medications as well as access to previously used medications.

like 1

[Yesterday 3:13 pm] Roy Mariathas (Guest)

On observations - I don't think it carries the same weight as the other categories in the red box. Obs generally informs the clinical synopsis/encounter.

Also pregnancy status could be thought of as important as allergies/adverse reactions.

[Yesterday 3:16 pm] Stephen Chu

Chris Moy (AMC) (Guest) - take a look at international work: <https://build.fhir.org/allergyintolerance.html>

like 1

[Yesterday 3:16 pm] Marjoree Sehu

**Roy Mariathas (Guest)**

On observations - I don't think it carries the same weight as the other categories in the red box. Obs generally informs the clinical synopsis/encounter. Also pregnancy status could be thought of as important as allergies/adverse reactions.

Agree with you Roy Mariathas (Guest) - I think Observations may be less important.  I prob would just like to separate out pregnancy status from the rest of observation

like 2

[Yesterday 3:16 pm]

Johnson Law was invited to the meeting.

[Yesterday 3:17 pm]

Anthony Cichello was invited to the meeting.

[Yesterday 3:17 pm]

Oliver Frank was invited to the meeting.

[Yesterday 3:19 pm] Marjoree Sehu

Could I put a plug on the allergies field:  timeframe is an important part of allergy assessment eg childhood vs recent.

like 2

[Yesterday 3:28 pm]

Quyen Ho left the chat.

[Yesterday 3:28 pm]

Marie Pascal left the chat.

[Yesterday 3:29 pm] Tavares-Rixon, Danielle (H&B, Herston)

It does look like the Clinical Synopsis is related to Encounters

[Yesterday 3:29 pm]

Dave Shaw (Guest) was invited to the meeting.

[Yesterday 3:29 pm]

David Wiebe (External) left the chat.

[Yesterday 3:30 pm] Marjoree Sehu

**Tavares-Rixon, Danielle (H&B, Herston) (External)**

It does look like the Clinical Synopsis is related to Encounters

Looks like something that can cross different encounters as well.

[Yesterday 3:30 pm]

Oliver Frank left the chat.

[Yesterday 3:30 pm] Loya, Philip

Wouldn't the cliical synopsis be a part of exposing a result -- e.g. a discharge summary?   I can't say that I have clinicians creating and maintaining a summary regularly which isn't tied to a particular result

[Yesterday 3:30 pm] Tavares-Rixon, Danielle (H&B, Herston)

Yes, I am now thinking this is a piece of text that related to the handover

[Yesterday 3:31 pm] Tavares-Rixon, Danielle (H&B, Herston)

So it's more of handover text?

[Yesterday 3:31 pm] Sarah Dibley

Could we call this clinical handover summary?

[Yesterday 3:33 pm] Rob Hosking (Guest)

Clinical synopsis ,mey not just be handover as it may be request for opinion but care is  continued by the requesting physician/GP

[Yesterday 3:36 pm] Tavares-Rixon, Danielle (H&B, Herston)

I would plus one for teasing out Clinical Synopsis more - coming as a lead for the Technical Design Group.

[Yesterday 3:36 pm] Marjoree Sehu

The Clinical synopsis is like a "nice to have" from my point of view at this stage ... in a hospital workflow I guess

[Yesterday 3:38 pm] Rob Hosking (Guest)

Is it request for care?

[Yesterday 3:38 pm]

Steven Potashnyk left the chat.

[Yesterday 3:39 pm] Dimity Holliday

I'd be happy to participate with Phil when you deep dive into the clinical synopsis and the UX and clinical workflow.

like 1

[Yesterday 3:40 pm] Chris Moy (AMC)

What do you thing Stephen?

[Yesterday 3:42 pm] Janette

Who is defining criticality?  Pts usually mention high .

like 1

[Yesterday 3:44 pm]

Eli Brighton left the chat.

[Yesterday 3:45 pm]

Michael Yapp left the chat.

[Yesterday 3:47 pm]

Merran Cooper was invited to the meeting.

[Yesterday 3:48 pm] Stephen Chu

I can give detail history about criticality later when we get into the design

There had been extensive discussions at international HL7 FHIR design

[Yesterday 3:48 pm] Marjoree Sehu

I think we should consider taking criticality out

like 2

[Yesterday 3:48 pm] Loya, Philip

Happy to support most of these concepts -- Marjoree, Cerner (Oracle) has already mapped to most of these concepts between the screen you see in the EMR to meet US requirements

[Yesterday 3:49 pm] Sarah Dibley

also good to differentiate allergies/intolerances between medication and non-medication categories (in USCDI)

like 2

[Yesterday 3:50 pm] Chris Moy (AMC)

it would be fantastic- its been on the burner years

[Yesterday 3:50 pm] Janette

Remember the allergy/AR usually comes from the patient . In my environment is documented by the nurse on presentation . So needs to be useful uncomplicated

like 2

[Yesterday 3:50 pm] Marjoree Sehu

**Loya, Philip**

Happy to support most of these concepts -- Marjoree, Cerner (Oracle) has already mapped to most of these concepts between the screen you see in the EMR to meet US requirements

Thanks Loya, Philip.  I do know but CERNER mapping is not quite meeting our clinical needs and with current research outcomes / results.

[Yesterday 3:52 pm]

Shmuley (Guest) left the chat.

[Yesterday 3:52 pm] Sarah Dibley

**Janette (Guest)**

Remember the allergy/AR usually comes from the patient . In my environment is documented by the nurse on presentation . So needs to be useful uncomplicated

True - needs ability to document 'patient reported' vs 'clinician reported'

[Yesterday 3:52 pm] Loya, Philip

Marjoree Sehu - happy to have a conversation with you outside of the call if you'd like.   You can reach me at philip.loya@oracle.com

like 1

[Yesterday 3:52 pm]

Van Essen, Dylan left the chat.

[Yesterday 3:55 pm] Rob Hosking (Guest)

Should procedure include person who and/or where it was performed?

like 1

[Yesterday 3:55 pm]

Jenaya Price left the chat.

[Yesterday 3:56 pm]

Ilya Beda (Guest) left the chat.

[Yesterday 3:56 pm] Stephen Chu

**Rob Hosking (Guest)**

Should procedure include person who and/or where it was performed?

These would be optional data items

like 1

[Yesterday 3:57 pm] Marjoree Sehu

What does Sequence mean in vaccine administration?

[Yesterday 3:57 pm] Loya, Philip

Heb B has 3 doses, for examples --

like 1

[Yesterday 3:58 pm] Chris Moy (AMC)

1st or second out of course of several shots required

[Yesterday 3:58 pm]

Steven Brown left the chat.

[Yesterday 3:58 pm] Alan Barclay

BMI is not much use for individuals. Waist : height is a better measure

like 1

[Yesterday 3:58 pm]

Olivia Maiolo left the chat.

[Yesterday 3:58 pm] Marjoree Sehu

I like Vital signs and Measurements.  I missed it but BSL is there?

[Yesterday 3:59 pm]

Unknown User left the chat.

[Yesterday 3:59 pm] Stephen Chu

**Alan Barclay (Guest)**

BMI is not much use for individuals. Waist : height is a better measure

waist: hip ratio

[Yesterday 3:59 pm] Rob Hosking (Guest)

Needs to be mltpile reasons for encounter as people often come with more than one issue

like 1

[Yesterday 3:59 pm]

Tim Blake left the chat.

[Yesterday 3:59 pm] Alan Barclay

Waist : Height is better than Waist : Hip

like 1

[Yesterday 4:01 pm] Janette

Fabulous meeting .

like 1

[Yesterday 4:01 pm]

Lok Cheung left the chat.

[Yesterday 4:01 pm] Roy Mariathas (Guest)

Thanks so much!

[Yesterday 4:02 pm] Stuart Hanson (Guest)

Thank you

heart 1

[Yesterday 4:02 pm] Tavares-Rixon, Danielle (H&B, Herston)

Thanks everyone

[Yesterday 4:02 pm] Jacqui Rhodes

Thank you!

heart 1

[Yesterday 4:02 pm] Hilton, Kimberley

Great meeting - thanks Kate, Kylynn, Heather and team 🙂

heart 1