

Minutes – Sparked Clinical Design Group Online Meeting 5

Meeting Details	
Date	23 April 2024
Time	2:30pm – 4:00pm AEST
Location	<input checked="" type="checkbox"/> Virtual <input type="checkbox"/> In person

Meeting Overview	
Agenda Items	<ol style="list-style-type: none"> 1. Welcome and acknowledgement of country 2. Recap of the last workshop 3. Dive into Clinical Model <ol style="list-style-type: none"> a. Service request b. Laboratory/pathology request c. Imaging examination request 4. AUCDI R1 Draft Update 5. Wrap up & Close

Discussion Summary	
Welcome	<ul style="list-style-type: none"> • Welcome and introductions • Acknowledgement of Country
Recap of last workshop	<p><i>Recap</i></p> <ul style="list-style-type: none"> • Previous meetings discussed a proposed data elements/groups and information model with a focus on clinically relevant topics. These topics included Pathology and Imaging Examination, Pregnancy and Menstruation, and Medical Device Summary • Robust discussion was held around the Gender Harmony project and the Sex Parameter for Clinical Use in eRequesting - currently no clear way forward for SPCU for AUCDI R1 and AUeReqDI R1 and there is a need for agreement between jurisdictions on this. Agreement and the development of change management plans need to be in place before it can be used by Sparked. SPCU has been placed in the backlog for future discussions. • Pregnancy information and menstruation information put on the backlog for AUCDI • Medical devices renamed to implanted medical devices • Discussion during meeting: Preferred name for imaging/radiology request. Imaging request OR Diagnostic Imaging request OR Medical Imaging Request OR Radiology Request <p><u>Decision: Majority voted for name ‘Medical imaging Request’ however, concern raised about the difference between referral/request terminology</u></p>

Clinical Model

Service Requests

- The service requests clinical model aims to provide a broad and generic framework for wide range of requests
- The model allows for multiple tests to be requested if related to a single provider, with a focus on imaging and pathology requests

Pathology Test Request

- The pathology test request refers to an order and or instruction for a laboratory test service
- **Discussion during meeting:** The data elements currently included within the pathology test request clinical model are Test Name, Fasting Status, Clinical Indication, Clinical Context, Reason for Request, Urgency, Service Due, Comments
 - Fasting status specific only to pathology test request
 - Reason for request – define the actual clinical question to be solved
- The Distribution list, Urgent Contact, and Billing Guidance data elements fall with the Technical Design Group
- **Discussion during meeting:** Clinical indication and reason for request seem similar
 - In the example of diabetes, suspected hyperglycaemia will be classified as reason for request and poorly controlled diabetes could be clinical indication
- **Discussion during meeting:** Knowing most systems have a single field (and data set) for clinical indication and reason for request, does the group see the value in defining two separate fields and is the distinction clear?
 - Having 3 different concepts that are all similar is going to be onerous for requesters and may require significant upskilling and education - **Agreement that there only needs to be one clinical indication/reason for encounter type data element for now**
 - Would be useful to have broad reasons for request – diagnostic, monitoring known conditions, routine preventative care, administrative reasons
 - One field needs to be mandatory, preference for reason for request to remove burden from patient
 - Issue with making fields mandatory, sometimes fields left blank for confidentiality however, reason for request could be mandatory with requesters putting in a broader reason for request, as listed above
 - Clinical indication field, context free text field, reason for diagnostic test which has small set of defined values

Mentimeter voting for Pathology Test Requests

- **Discussion during meeting:** Vote to include data elements for pathology test requests: test name, fasting status, clinical indication, clinical context, reason for request, urgency, service due, comment.
- Vote from 0 (disagree) to 1 (agree)
 - **Votes: Test name – 1, Fasting Status – 0.6, Clinical Indication – 0.6, Clinical Context – 0.7, Reason for Request – 0.6, Urgency – 0.9, Service Due – 0.4, Comment – 0.6**
- **Discussion during meeting:** any red flags for missing elements for pathology request R1?
 - Written responses (via meeting chat functionality) indicated none missing, ECDS linkage, Loinc code or similar ID
- **Discussion during meeting:** ECDS report – current process has clinician choosing tests and then justify; however, new proposal asks for issues experienced and then prompts tests

Imaging Requests

- An imaging request refers to an order and or instruction for a medical or diagnostic imaging service
- Imaging requests share the same data elements as pathology test requests, with the addition of Test Name, Modality, Target Body Site, and Contrast Use
- **Discussion during meeting:** Categorising requests – categorise ultrasound with steroid injection – at this stage it would go into test name, however, more complexities to be defined as we progress
- **Discussion during meeting:**
 - Modality often part of test name, would this be duplicating this information?
 - Some tests don't have a modality and target body site is implied in test name
 - Largely FHIR IG that will tease out the consistency issues surrounding this

Mentimeter voting for Imaging Requests

- **Discussion during meeting:** Vote to include data elements for imaging requests: test name, modality, target body site, contrast use
- Vote from 0 (disagree) to 1 (agree)
 - **Votes: Test name – 0.9, Modality – 0.8, Target body site – 0.9, Contrast Use – 0.8**

- **Discussion during meeting:** Vote to include data elements for imaging requests: clinical indication, clinical context, reason for request, urgency, service due, comment.
- Vote from 0 (disagree) to 1 (agree)
 - **Votes: Clinical Indication – 0.7, Clinical Context – 0.8, Reason for Request – 0.8, Urgency – 0.8, Service Due – 0.4, Comment – 0.7**
- **Discussion during meeting:** any red flags for missing elements for imaging request R1?
 - Written responses (via the meeting chat functionality) indicate none missing, adding procedures, allergies, copies to other clinicians

Implanted devices

- As part of the clinical model, implanted devices refer to a summary or overview of a single medical device, or category of device, that can be surgically inserted into the body
- The data elements included for Implanted Devices include Device name, Status, Comment, Last Updated
- **Discussion during meeting:** Device terminology – information received at point of referral can be scarce, so the device name needs to be broad (not specific device brands, etc) and made a mandatory field otherwise may be a challenge in the referral process
- **Discussion during meeting:** Patients with multiple implanted devices
 - For patients with multiple implanted devices, entering data into the mandatory fields each time would be time consuming
 - Device information kept within the patient health record, so it doesn't have to be recorded every time
- **Discussion during meeting:** Day of insertion
 - Make this an optional field as this info can be important
 - This in repeating cluster where specifics about brand name etc is recorded
 - Include both recommended and actual insertion and removal dates, as sometimes devices are left in for longer than recommended

Mentimeter for Implanted Device

- **Discussion during meeting:** Vote to include data elements for implanted devices: Device Name, Status, Comment, Last Updated

	<ul style="list-style-type: none"> • Vote from 0 (disagree) to 1 (agree) <ul style="list-style-type: none"> ○ <u>Votes: Device Name - 1, Status – 0.8, Comment – 0.8, Last Updated – 0.6</u>
AUCDI R1 Draft Update	<ul style="list-style-type: none"> • The AUeReqDI draft for community review is expected to be published by mid-May • An updated AUeReqDI R1 is being published in October
Wrap up and Close	<p>Upcoming meetings and notable news</p> <ul style="list-style-type: none"> • 15/5/2024 – Sydney F2F CDG/TDG meeting • More tickets will be released for this event, so add yourself to the waitlist

Decisions

Concept Name for Imaging/Radiology Request	Majority preference for Imaging/Radiology Request to be named Medical Imaging Request
<p>Vote to include data elements for Pathology Test Requests</p> <p><i>Test name, Fasting status, Clinical indication, Clinical context, Reason for request, Urgency, Service due, Comment</i></p>	<p>Test name – 1 – Include Fasting Status – 0.6 – Include Clinical Indication – 0.6 – Include Clinical Context – 0.7 - Include Reason for Request – 0.6 – Include Urgency – 0.9 – Include Service Due – 0.4 – Don't Include Comment – 0.6 – Include</p>
<p>Vote to include data elements for Imaging Requests</p> <p><i>Test name, modality, target body site, contrast use, clinical indication, clinical context, reason for request, urgency, service due, comment</i></p>	<p>Test name – 0.9 – Include Modality – 0.8 – Include Target body site – 0.9 – Include Contrast Use – 0.8 – Include Clinical Indication – 0.7 – Include Clinical Context – 0.8 – Include Reason for Request – 0.8 – Include Urgency – 0.8 – Include Service Due – 0.4 – Don't Include Comment – 0.7 – Include</p>
<p>Vote to include data elements for Implanted Devices</p> <p><i>Device Name, Status, Comment, Last Updated</i></p>	<p>Device Name – 1 – Include Status – 0.8 – Include Comment – 0.8 – Include Last Updated – 0.6 – Include</p>

Actions

ID	Description	Responsible	Due	Status
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001	Provide any Sparked feedback to fhir@csiro.au	All	N/A	Open
002	Join Sydney CDG/TDG waitlist for tickets if you are wanting to attend	All	26/4/24	Open

Attendees

• Madison Black	• Kylynn Loi
• Heather Leslie	• Chris Moy
• Charlotte Hespe	• Chaturica Athukorala
• Nisha Subramanian	• Reuben Daniels
• Kimberley Hilton	• Victoria Fitzgerald
• Sanjeed Quaiyumi	• Adrian Gilliland
• Dimity Holliday	• Carmen Wong
• Julie McFerran	• Peta Gordon
• Bronwyn Landy	• Kate Ebrill
• Harry Iles-Mann	• Todd Miller
• Jane Connolly	• Oliver Frank
• Chris Pearce	• Chris Kellalea-Maynard
• Rob Hosking	• Jacqui Rhodes
• Michael Osborne	• Michael Wilson
• Mya Thandar	• Steph Ong
• Danielle Tavares-Rixon	• Rachel Hayhurst
• Stephen Chu	• Cath Koetz
• Michael Hosking	• Caroling Hoyle
• Kambiz Bahaadinbeigy	• Kelly Knights
• Jillian Head	• Chris Pearce
• Marika Carr	• Philip Loya
• Patrick McSharry	• Chris Kane
• Jo Wright	• Christy Sieler
• Robin Mann	•