# Preparation of Laboratory Record for eHR

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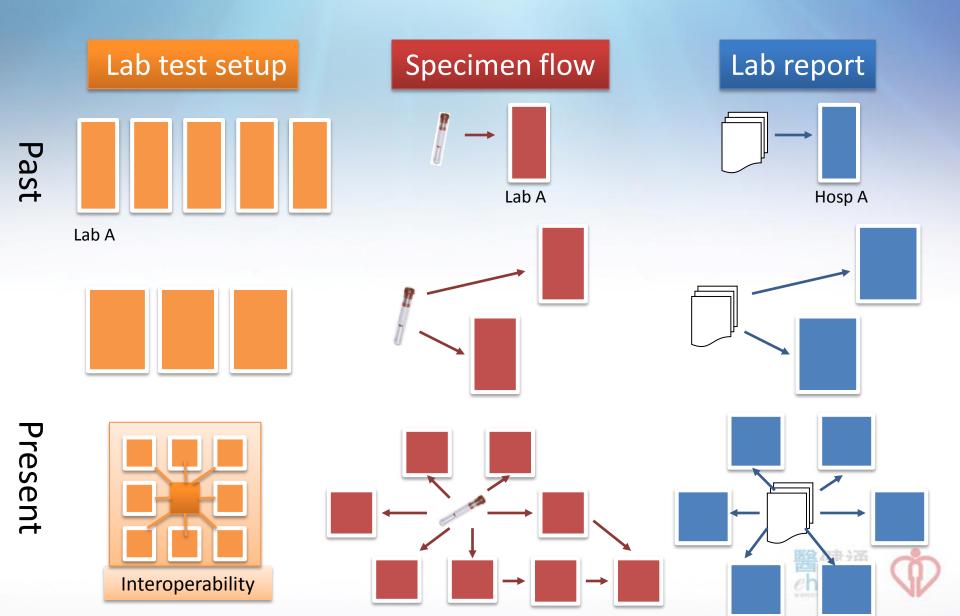


### Outline

- Understand the importance of using reference terminology for laboratory record in eHR
- Support interoperable results exchange via report structure model with reference terminology
- Adopt guidelines to define test display name for eHR
- Suggest the levels of compliance for General laboratory report in eHR



#### **Evolving Laboratory Business**



### Hospital Authority Statistical Report 醫院管理局統計報告 2009 - 2010

#### Hospital Authority Workload 醫院管理局服務數量統計

In-patient Discharges and Deaths 2009

二零零九年住院病人出院人次及 死亡人**數** 

1,341,885

Out-patient Attendances 2009/10

二零零九/一零年度門診就診人次

Specialist out-patient 專科門診- 6,198,016 General out-patient 普通科門診 - 4,638,482 Total Accident and Emergency
Attendances 2009/10

二零零九/一零年度急症室就診人次

2,214,422







Hospital 醫院	Pathology workload units 病理學工作量單位
Major Hospital	
主要醫院	
Alice Ho Miu Ling Nethersole Hospital 雅麗氏何妙齡那打索醫院	6,843,489
在総に当然何から1条質が Caritas Medical Centre	
明愛醫院	4,343,587
Kwong Wah Hospital	40.440.040
廣華醫院	13,412,849
North District Hospital	4,731,280
北區醫院	4,731,200
Pamela Youde Nethersole Eastern Hospital	12,961,209
東區尤德夫人那打索醫院	12,001,200
Pok Oi Hospital	1,340,277
博愛醫院 Prince of Wales Hospital	
威爾斯親王醫院	33,977,251
Princess Margaret Hospital	
瑪嘉烈醫院	19,658,630
Queen Elizabeth Hospital	20 275 204
伊利沙伯醫院	28,375,284
Queen Mary Hospital	29,222,421
瑪麗醫院	23,222,421
Ruttonjee and Tang Shiu Kin Hospitals	2,512,669
律敦治及鄧肇堅醫院	_,_,_,_,
Tseung Kwan O Hospital 將軍澳醫院	4,366,155
形中央階元 Tuen Mun Hospital	
屯門醫院	24,329,702
United Christian Hospital	40.000.500
基督教聯合醫院	13,296,532
Yan Chai Hospital	2,958,720
仁濟醫院	2,550,720
Major Hospitals Sub-total 主要 <b>醫</b> 院小計	202,330,055

# Pathology Tests Performed in Hospital Authority

Over 200 million of laboratory tests performed in 2009/10



#### Sample of Priority Health Conditions and Related Laboratory Tests

Health condition	Examples of laboratory tests used in diagnosis and/or patient management	Number of Americans Affected
Heart disease	Lipid panel, troponin	79.4 million (2004)ª
Respiratory disease <sup>l</sup>	Blood gas test, bacterial culture, viral culture	15.7 million <sup>II</sup> (asthma); 1.3 million <sup>III</sup> (pneumonia) <sup>c,d</sup>
Cervical cancer	Pap smear, human papillomavirus DNA testing	11,150 cervical cancer diagnoses (2007) <sup>e</sup>
Colorectal cancer	Fecal-occult blood test	112,340 colon cancer diagnoses (2007) <sup>e</sup>
Diabetes	Glucose, HbA1c	20.8 million (2005) <sup>8</sup>
End-stage renal disease	Creatinine, BUN	472,000 (2004) <sup>h</sup>
HIV/AIDS	Antibody testing, CD4 testing, RNA	1.2 million (2006) <sup>i</sup>
Maternal health (prenatal care)	Blood and Rh type with antibody screen	83.9% pregnant women began prenatal care in first trimester; 3.6% began prenatal care in third trimester or not at all (2004) <sup>j</sup>
Mental health/ substance abuse	Drug tests, liver function	24.6 million adults <sup>IV</sup> (classified with serious psychological distress) (2005); 22.2 million people <sup>V</sup> (classified with substance dependence or abuse) (2005) <sup>I</sup>
Influenza	Viral culture, serology, rapid antigen testing	5-20% of the U.S. population is infected with the influenza virus each year <sup>n</sup>
Health care-associated infections	Viral culture, molecular typing of microbial pathogens	1.7 million (2006) <sup>p</sup>

## Morbidity and Mortality Statistics for Selected Diseases 2005 - 2009

Disease 疾病類別		Detailed list number ICD 10th revision 《疾病和有關健康問	Number of patient discharges and deaths in Hospital Authority hospitals 在醫院管理局轄下醫院出院人次及死亡人數				;
	24,734,74	題的國際統計分類》 第十次修訂本的詳細 序號	2005	2006	2007	2008	2009
1.	Cancer 癌症	C00-C97	82,465	85,421	95,042	101,982	128,978
2.	Cerebrovascular Disease 腦血管病	160-169	24,742	24,910	25,053	25,190	25,614
3.	Ischaemic Heart Disease 缺血性心臟病	120-125	24,666	25,220	25,640	26,331	29,263
4.	End Stage Renal Failure 末期腎衰竭	N18	79,531	76,945	82,658	88,293	103,615
5.	Chronic Lung Disease 慢性肺病	J40-J47, J67	41,083	36,638	40,184	41,028	37,401
6.	Diabetes Mellitus 糖尿病	E10-E14	14,029	13,652	15,379	18,495	24,502
		Total 合計	266,516	262,786	283,956	301,319	349,373

# ehealth 香港特別行政區政府 HKSAR G

Table 3: eHR Implementation Phases

Level 1

Level 2

Level 3

eHR Content S	tandards Guic
	(V 1.0)

Coordinating Group on eHR Content & Informati

Jun 2009

	Person		
1	Healthcare practitioner		
	Encounters		
4	Referral		
١	Episode summary		
	Adverse reactions / allergies		
ľ	Problems		
	Procedures		
(	Assessment / physical examination		
	Social history		
	Past medical history		
	Family history		
	Medication		
	Immunization		
i	Clinical requests		
	Diagnostic test results		
	Care & treatment plan		
	Kev:		

Key:

Phase 1	Phase 2	Phase 3	Phase 4	Phase 5
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## Where are we today?



## eHR Information Standards Domain Group on Laboratory Records - Membership



# Laboratory data Terminology Adoption



Like a Question – Urine Culture?

INTERNATIONAL HEALTH TERMINOLOGY STANDARDS DEVELOPMENT ORGANISATION



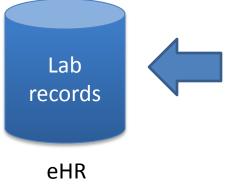
**SNOMED CT** 

Like an Answer – Escherichia coli



## Laboratory Standards Roadmap

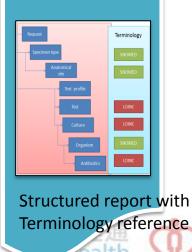




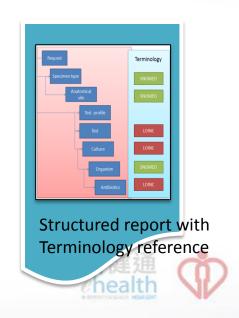




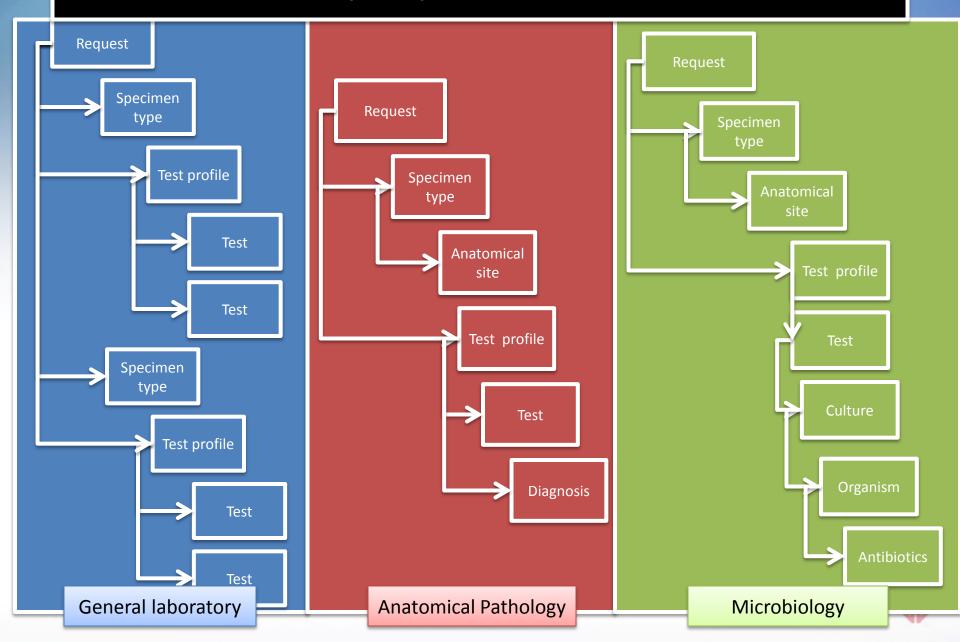
Interchange Format Specification



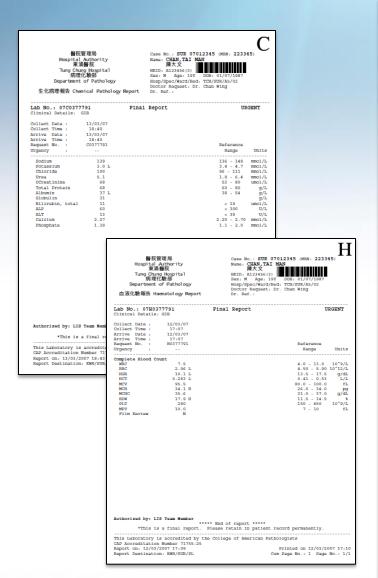
# Laboratory Report Structure Model with Reference Terminology

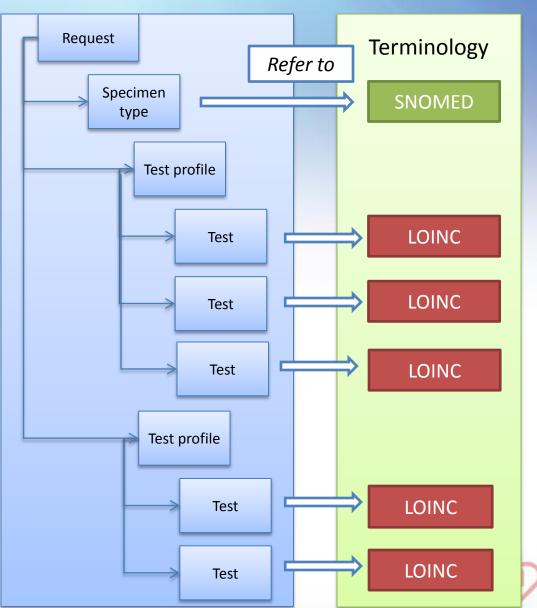


#### Laboratory Report Structure Model

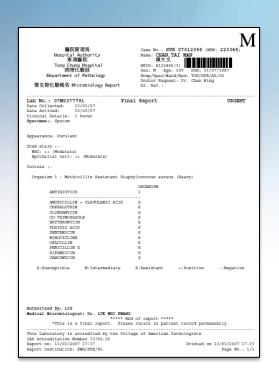


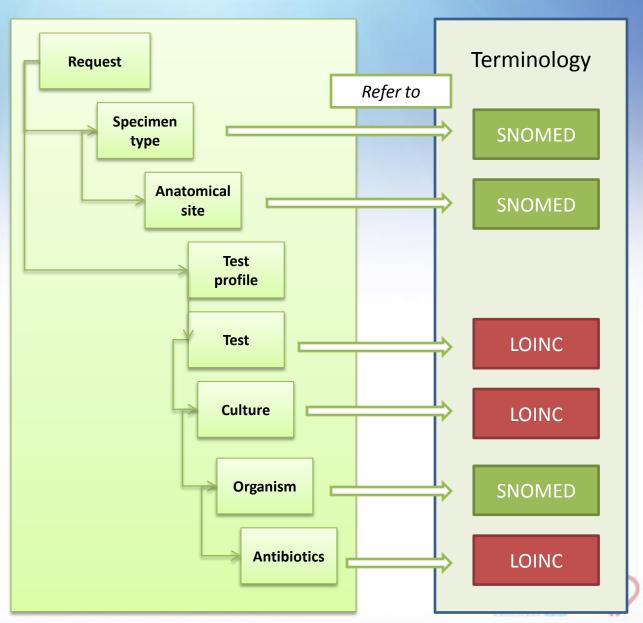
#### Structured report model - Clinical Pathology





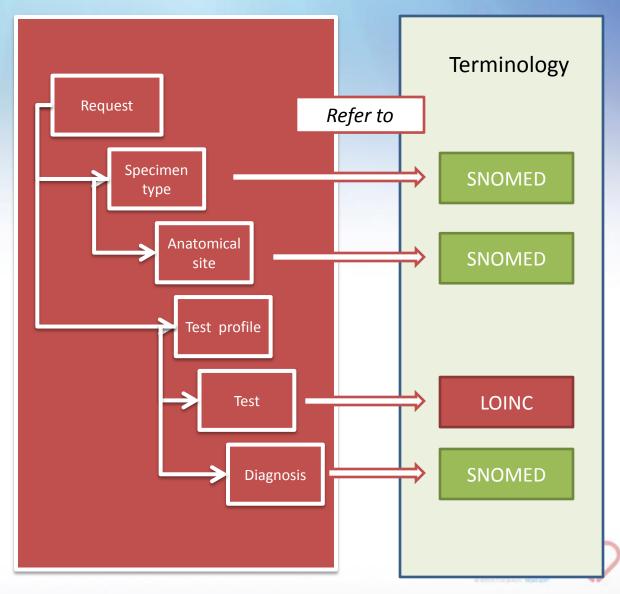
#### Structured report model - Microbiology





#### Structured report model - Anatomical Pathology





## Editorial guidelines for Test display name



**Editorial policy** 





### Editorial guidelines – Test name

#### General principles:

- Test naming should be Clear, Precise and Concise.
- Tests are named according to the test, condition or disease rather than particular methodology.



## Editorial guideline – Approach

Use LOINC as a base.

LOINC® Users' Guide-December 2010

formal Latin species names (in part because they were shorter). The LOINC short names are subject to change and should not be used as identifying keys in any database.

These names have been created via a table driven algorithmic process. We have used all upper case to represent acronyms, and mixed case in organism names as specified in naming conventions (e.g., genus is capitalized, species is not). For virus names we used the acronym assigned by Index Virum where available.

2.9 Long Common Names

LOINC has received periodic requests from users to produce "pretty" display names that could be used in user interfaces, etc. While systematically created names (like the standard LOINC short names) can be guaranteed to be unique, they are sometimes not the most user-friendly. We have always expected that users would link their own local preferred names to LOINC terms for use in reports and displays. In contrast to systematically-created names, user-friendly names are often ambiguous.

After collecting and reviewing display names from several sources, we decided to create a new algorithmically-generated Long Common Name based on patterns we observed. As of the January 2009 release, we have included a new field in the LOINC database called "LONG\_COMMON\_NAME". These names have been created by an algorithmic process and are checked for uniqueness. Most abbreviations and acronyms that are used in the LOINC database have been fully spelled out in English. For allergens, the common English names are used instead of the more formal Latin species names. For coagulation, the more commonly used phrases such as "Prothrombin time" have been used.

We started creating long common names first for laboratory terms, but are now producing them for all terms. The text strings for the long common names are subject to change over time as we continue to refine the algorithmic process and collect feedback from users. In particular, many of the long common names for clinical terms have not had as intense focus as the laboratory terms have, so we expect these to be refined over time.





### **LOINC Common Name**

- Use LOINC Common Name as a base to construct our test display name for eHR
- Advantages- They are Distinct, Clear and Consistent
- For example:



Remove the Property

Replace "in" with ","

Alpha-1-Fetoprotein, Serum or Plasma

A proposed test display name for eHR



## Editorial guideline – (1)

#### Test display name format

- Analyte [(abbreviation)] [, Specimen] [, Qualifier] [, Methodology]
  - e.g. Glucose, Body fluid
  - e.g. Sodium, Urine, 24 hour
- The qualifier is essential to specify what kind of analyte is measured.
  - e.g. Testosterone, Free, Serum or Plasma
  - e.g. Troponin I.cardiac, Serum or Plasma
  - e.g. Prothrombin time (PT), Platelet poor plasma

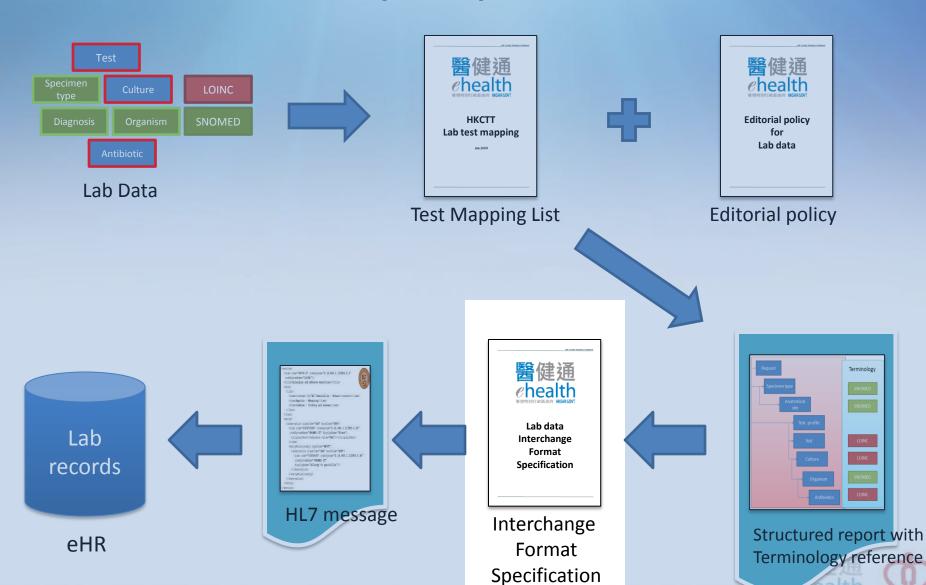
• ...

## Comments on some proposed Test display name for eHR

- the HA-ePR display name (most likely is UKspelling) more readable than LOINC's test name (US-spelling),
  - E.g. Haemoglobin pattern
  - Suggestion: Favor UK but US spelling also acceptable
- Some biochemical analytes in LOINC may be difficult to read.
  - E.g. "Follicle stimulating hormone" instead of "Follitropin"
  - Suggestion: make reference to HA-ePR display name with DG or (Editorial board) approval



## **Laboratory Report Contents**



### eHR Laboratory Report Content

- Outline data elements designed for capture and storage regarding the level of compliance
  - Level 1 -> lab report in PDF
  - Level 2 -> structured lab data
  - Level 3 -> structured lab data with Reference Terminology
- Organize the laboratory data for clinical communications:
  - General laboratory
  - Microbiology
  - Anatomical pathology



## Level of Compliance

 For general laboratory result: Level 1 or 3 are recommended.



eHR Content Standards Guideboo (V 1.0)

Coordinating Group on eHR Content & Information Stand

Jun 2009

Table 2 eHR Information Standards: Level of Compliance

HK	HL7	Data field	Field Content	
eHR			Value	PDF
1	1	institutional (free text)	institutional (free text)	Y
		description	description	
2.1	2	institute-defined code with institutional description	institutional (free text) description	Y
2.2	2	institute-defined code     institutional description     international code (HK)	institutional description	Y
3.1	3	<ul><li>institute-defined code</li><li>institutional description</li><li>international code (HK)</li></ul>	<ul> <li>institute-defined code</li> <li>institutional description</li> <li>international code (HK)</li> </ul>	Y
3.2	3	<ul> <li>institute-defined code</li> <li>institutional description</li> <li>international code (HK)</li> <li>fully specified</li> </ul>	institute-defined code     institutional description     international code (HK)	Y

醫院管理局 Hospital Authority 東涌醫院 Tung Chung Hospital

病理化驗部 Department of Pathology

生化病理報告 Chemical Pathology Report

Case No.: SUR 07012345 (MRN: 223345

Name: CHAN, TAI MAN

HKID: A123456(3) Sex: M Age: 19Y DOB: 01/07/1987

Hosp/Spec/Ward/Bed: TCH/SUR/A5/02 Doctor Request: Dr. Chan Wing

eHR Content -Header

General Laboratory report

Level 1



#### Lab No.: 07C0377791 Clinical Details: GIB

Collect Date :

Urgency Potassium Chloride 100 Urea OCreatinine Total Protein Albumin. Globulin Bilirubin, total

#### Final Report

Collect Time : Arrive Date : 13/03/07 Arrive Time : Request No. : Reference Range 3.0 L 3.4 - 4.796 - 111 mmo1/L 1.8 - 6.4 umo1/L 60 - 80 g/L 37 L 38 - 54 g/Lq/L< 19 umo1/L < 300 < 39 Calcium 2.27 2.20 - 2.70 mmo1/L 1.1 - 2.0 mmo1/L Phosphate 1.39

Authorized by: LIS Team Member

\*\*\*\*\* End of report \*\*\*\*\*

\*This is a final report. Please retain in patient record permanently.

This Laboratory is accredited by the College of American Pathologists

CAP Accreditation Number 71755-25

Report on: 13/03/2007 18:43 Report Destination: KWH/SUR/PL

Printed on 13/03/2007 18:44 Cum Page No.: 1 Page No.: 1/1



醫院管理局 Hospital Authority 東涌醫院

Tung Chung Hospital 病理化驗部 Department of Pathology

生化病理報告 Chemical Pathology Report

Case No.: SUR 07012345 (MRN: 223345)

Name: CHAN, TAI MAN

陳大文



Hosp/Spec/Ward/Bed: TCH/SUR/A5/02 Doctor Request: Dr. Chan Wing

Dr. Ref.:

Lab No.: 07C0377	7791	Final Report	UR	GENT
linical Details:	GIB	-		
Collect Date :	13/03/07			
	18:40			
Arrive Date :	13/03/07			
Arrive Time :	18:40			
Request No. :	C0377791		Reference	
Irgency :			Range	Unit
Sodium	139		136 - 148	nmo1/
Potassium	3.0 L		3.4 - 4.7	nmo1/
Chloride	100		96 - 111	mmo1/
Urea	5.1		1.8 - 6.4	nmo1/
OCreatinine	68		53 - 80	umo1/
Total Protein	68		60 - 80	q/
Albumin	37 L		38 - 54	g/
Globulin	31			g/
Bilirubin, total	11		< 19	umo1/
ALP	60		< 300	U/
ALT	13		< 39	U/
Calcium	2.27		2.20 - 2.70	mmo1/
Phosphate			1.1 - 2.0	mmo1/

Test name: Local codes & LOINC code

Authorized by: LIS Team Member

\*\*\*\* End of report \*\*\*\*\*

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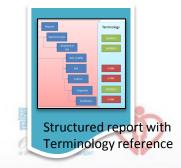
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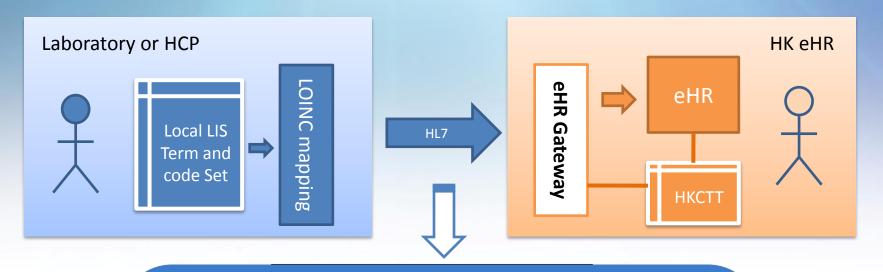
## General Laboratory report

#### Level 3

Recommend for General Laboratory results – common chemical and haematology tests. e.g. RFT, CBC,...



#### Level 3 compliance for General Laboratory data



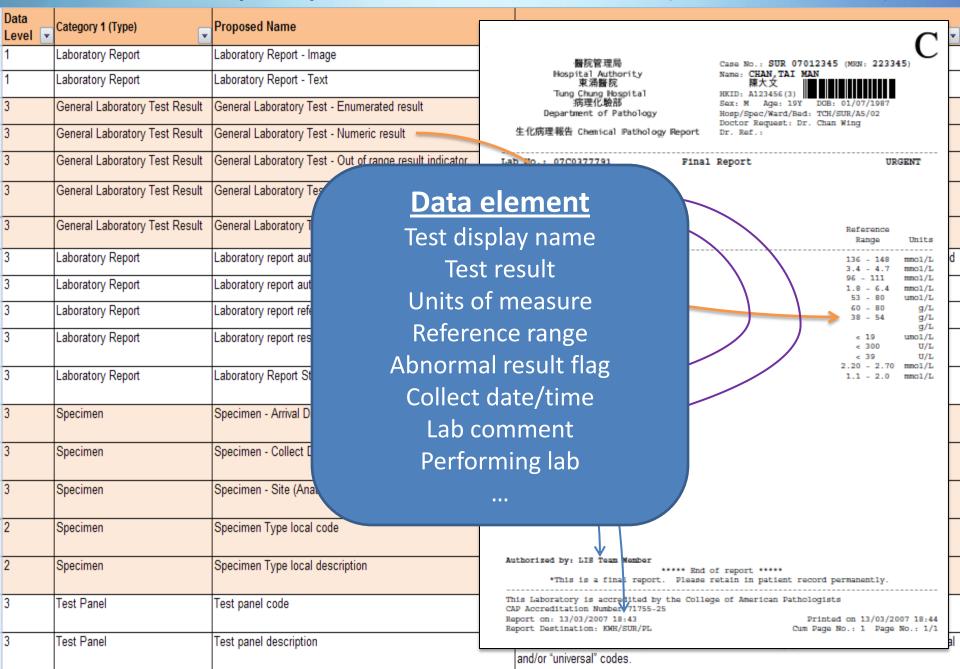
#### Benefits of Level 3 compliance

Better patient care with interoperable results sharing
Easier detection of medical abnormalities
Consistency of test display names
Reduction of risk due to misidentification of test result
Reduction in unnecessary testing
Reduction in the complexity of mapping
Easier epidemiological and statistical analysis





### Laboratory Report Content in eHR (General Lab)



## Coming Tasks for eHR

- Microbiology and Anatomical Path report content
- Laboratory test codes (with LOINC mapping) and test display name
- Table cleansing and verification of the mappings
- Quality assurance and ongoing maintenance issues
- Procedures to handle the change and update on the standardized data set
- A set of standardized units of measure and profile code for common lab tests

## **Thank You**



