Clinical Data Work Group
Highlights
July 1, 2008

Present: Jim Martin, Ken Gerlach, Dave Campbell, Larry Derrick, Barry Gordon, Kate Hamilton, Bruce Riddle, Beth Schmidt, Roman Tsyvine

NAACCR staff:

I. The June 2008 meeting highlights were approved.

II. Ken reviewed the major milestones which have not changed since March 2008.

III. Jim noted that the cost-benefit document has not changed since the last review.

IV. Kate reported that the implementation guide (IG) has been enhanced with an expanded introduction and explanation of coding approaches. Many of the NAACCR data items are handled as observations. The course of treatment is a CDA procedure while the NAACCR radiation data items are covered under CDA substance administration. There is more work in the header sections with the inclusion of physician information. Some of this information was discovered while working on the transformations. The transformation software should be available in a couple of weeks with sample files and narrative generation. The transformation will go from the flat file to CDA except for the text sections, from CDA to flat file, and from CDA to human-readable reports. Kate will distribute to Lori when available.

V. After the transform software is available, Kate would like to convert the flat file to CDA and then convert the CDA to flat file and then run the EDITS. Larry thought this would be a doable first test.

VI. The transform software will be in XSLT. Once the transform software is released there will be a correction cycle.

VII. Barry asked about needed software for the deployment of the transform software to run the XSLT off site. Kate noted that an XML engine will be needed, she will send a ½ page of options, there will be an exe file to read 3 variables or arguments: input, output and transform file name;

VIII. At the Denver meeting, Bruce had expressed concerns about the obtuseness of the IG; but having read the editorial comments of the WG participants he is looking forward to the next version. Kate noted the IG is designed for implementers and has its own structure. We may need a slim document, an executive report or something explaining the mechanics of the IG. Generally an IG assumes the reader is familiar with CDA, transformations, and validations. The CDA sections are a reminder to focus the attention of the technical user.

IX. The Report to the Board may serve as the slimmer, less obtuse document; we will put on the agenda for the next meeting. We could list what needs to be explained then put into either the IG or other document; this is of secondary importance to the pilot and not a good use of Kate's time. We do however need to have a new vocabulary for ourselves and the greater community. Much of the web information on CDA is not user-friendly.

X. Barry noted that the assertion pattern in the IG is confusing. A more through explanation of this concept could be included in an appendix.

XI. When the transform software is release in two weeks and users start to test, users should contact Kate with questions.

XII. The parked items were reviewed. The Report to the Board will be moved up, we will need to find the related protocols and members will need to review prior to the next meeting. We had discussed sending tobacco history in the State Requestor Data Items section, as part of the pilot. This should be moved up on the agenda.

XIII. The next meeting is August 5, 2008 at 3:30 pm (ET).