



**Canada Health Infoway**

# **Patient Summary Working Group (PSWG)**

**April 2, 2025**

# Agenda

---

TOPIC	TIME
Welcome/Announcements	5 mins
Backlog Items	35 mins
CA:FeX Update	15 mins
Next Steps	5 mins

## PS-28 Two new valuesets for Immunizations

---

- **Comment:** Two new value sets hosted on the terminology gateway are being created for Immunizations in this release of SNOMED CT-CA . ImmunizationPractitionerOccupationCode and ImmunizationRoute of Administration.
- **Discussion:** This comment was from version 1.1 and so was against Terminology Gateway. Have these migrated to the new server? These have both been migrated to the terminology service. ImmunizationPractitionerOccupationCode and is part of NVC but not referenced in Patient Summary. ImmunizationRoute of Administration – will update value set guidance to point to the Terminology Service
- **Proposed Disposition:** Question answered, yes they have been migrated as November 2024 and we need to update the value set guidance on Route of Administration
- Ken Sinn / Allana Cameron 22-0-0

## PS-67 Create additional bindings for MedicationRequest.code and MedicationStatement.code to match Medication.code

---

- **Comment:** We need to review the additional bindings on MedicationRequest and MedicationStatement to match medication.code. Consider adding Din to additional bindings.
- **Discussion:** Related to PS-47 update canonical URL for MedicationCodes, where we verified the canonical URL and said to create a new ticket to review the bindings.
  - Current bindings:
    - [canadianclinicaldrugdataset](#) (preferred)
  - Current Additional bindings:
    - [LicensedNaturalHealthProducts](#) (candidate)
    - [WhoAtcUvIps](#) (candidate)
    - <http://hl7.org/fhir/uv/ips/ValueSet/medications-snomed-ct-ips-free-set> (candidate)
- **Resolution Disposition:** Double check the updated canonical URLs. Remove the IPS free set and replace with MedicationUvIPS. Create Health Canada DIN as a stub value set. Apply to all three medication codes
- **Vote** :Ken Sinn / Omar Hoblos 22- 0-0

## PS-33 AllergyIntolerance.code - recommending to remove ICD-10-CA from the bindings

---

- **Comment:** In AllergyIntolerance.code
  - What was the rationale for using ICD-10-CA versus SNOMED CT-CA?
  - Recommending SNOMED CT-CA subset (i.e. clinicalFindings) as the best fit due to the limitation of the allergy codes in ICD-10-CA.
- **Discussion:** BC, NL, and PEI were using ICD-10 for allergens. BC and PEI classify it under reaction.manifestation, whereas NL integrate adverse reaction/allergy information, suggesting that some systems might continue using allergyintolerance.code in this manner.
- Ontario proposing removing ICD-10-CA as they could not find substances in ICD-10-CA but only items like “propensity to allergy” etc. Need to follow up with Jurisidictions that might still be using this.
- **Proposed Disposition:** Keep ICD-10-CA valueset for 2.1 and discuss whether we can remove it for future version
- **Motion:** Allana Cameron / Sandy Ketler 22-0-0
- Motion to review AllergyIntolerance code bindings to include DIN as well as MedicationUvIPS as per ticket 67 on medication.code. Philip Sales / Allana Cameron 22-0-0

## PS-63 Consistency on the usage of the different flavor of the CodeableConcept

---

- **Comment:** It looks like some data elements use different types of CodeableConcepts in an inconsistent way.  
For example:  
condition.bodysite uses the standard CodeableConcept (non-Must Support).  
procedure.bodysite uses CodeableConceptPSCA (also non-Must Support).  
When should you use the base CodeableConcept versus CodeableConceptPSCA?
- **Discussion:** CodeableConceptPSCA was added as a parallel to <https://build.fhir.org/ig/HL7/fhir-ips/StructureDefinition-CodeableConcept-uv-ips.html> , which puts MS on CodeableConceptIPS.coding and CodeableConceptIPS.text.
  - AB was unable to meet the MS on CodeableConceptPSCA.coding so we relaxed it to have only MS on CodeableConceptPSCA.text.
  - CodeableConceptMedicationPSCA reapplies the MS on the .coding, since Alberta was able to meet that bar.
  - **We are aligning with IPS choice about where to use a specific profile rather than the general R4 profile, so it is case by case decisions**
- **Proposed Disposition:** Question answered, see above. Ken Sinn / Allana Cameron 19-0-1

- **Comment:** Timeline and guidelines when to use NVC as the preferred Immunization.vaccineCode terminology?  
What is the ultimate direction for vaccine, are we going to use NVC or the CHI valueset for vaccine Code.
- **Discussion:** CIHI value set reflects National Vaccine Catalog value set, and they are published on the Terminology Service
- **Proposed Disposition:** Ken to confirm alignment with NVC value sets and adjust if necessary.
- **Vote:** Ken Sinn / Allana Cameron 21-0-0

## PS-65 Request for Pan Canadian rather than Project Specific canonical URLs

---

- **Comment:** Ontario Health would like to request a more pan-Canadian canonical URL instead of using a project-specific one (e.g., PS-CA), so it can be used in other use cases.
  - ICD10CAAllcode  
ICD9CMAAllCode
  - LicensedNaturalHealthProducts  
CCDD
  - CCIAAllCode
- **Discussion:** for CCDD there is a pan Canadian.
  - ICD9, 10 and CCI they are managed by CIHI so we just have stubs
  - Need to align with CA-Core
- **Resolution Description:** we will switch to pan Canadian for CCDD value set. For the others, Infoway will work with the authoritative organizations for creation of a pan Canadian canonical for integration in future releases. This also applies to Health Canada DINs. Align this with CA-Core
- **Vote:** Ken Sinn / Dean Matthews 20-0-0

## Next Steps

---

- Apply comments / QA in preparation for April 11 release



**Canada Health Infoway**

# CA:FeX Update

Scope and Approach for next Release

April 2nd, 2025

# CA:FeX – A Simplified FHIR Exchange for Canadian Healthcare

## Objective

- Provide guidance for adopting a minimally viable FHIR (Fast Healthcare Interoperability Resources) RESTful exchange, covering both document and resource sharing
- Address Canadian healthcare needs while ensuring compatibility with recognized standards

## Scope

- Offers a structured approach to FHIR-based exchange workflows
- Ensures alignment (no conflicts) with:
  - International standards: IPA (International Patient Access) and MHD (Mobile Health Documents)
  - Canadian standards: CA:Core+
  - Document and Discrete Data Exchange

# CA:FeX – Current Status

## Published on InfoScribe

- V2.1.0 DFT-Ballot version of specification published on InfoScribe with a FHIR Implementation Guide on Simplifier

# CA:FeX – Scope of Next Release

Item	Key Activities
<b>Refine Capability Statements and ensure consistent conformance expectations</b>	<ul style="list-style-type: none"> <li>• Ensure consistency with Actors and Options outlined in the specification.</li> <li>• Clearly define conformance expectations for implementers.</li> </ul>
<b>Migrate FHIR artifacts to Simplifier</b>	<ul style="list-style-type: none"> <li>• Move all specification content to Simplifier.</li> <li>• Verify diagrams and overall documentation format post-migration.</li> <li>• Validate migrated content against FHIR and Simplifier publishing standards.</li> </ul>
<b>Clarify handling of patient identifiers</b>	<ul style="list-style-type: none"> <li>• Define best practices for managing Patient ID vs. Patient Identifier searches.</li> <li>• Ensure consistency across FHIR queries and patient matching workflows.</li> <li>• Consider adding patient.identifier to certain search transactions.</li> </ul>
<b>Analyze and document conflicts with international specifications</b>	<ul style="list-style-type: none"> <li>• Compare CA:FeX with IPA (International Patient Access), MHD (Mobile Health Documents), and IHE Profiles.</li> <li>• Assess conflicts in FHIR artifacts, transactions, terminologies, and use cases.</li> </ul>
<b>Prepare for Balloting and subsequent publication.</b>	<ul style="list-style-type: none"> <li>• Submit CA:FeX for Balloting through Canada Health Infoway.</li> <li>• Gather and categorize ballot feedback for specification improvements.</li> <li>• Incorporate changes into FHIR artifacts and documentation.</li> </ul>

# CA:FeX – Approach and Schedule

Phase	Key Activities	Timelines
<b>Scope Finalization &amp; Ballot Prep</b>	<ul style="list-style-type: none"> <li>Refine Capability Statements</li> <li>Clarify Patient ID vs. Patient Identifier Searches</li> <li>Prepare for Balloting</li> <li>Develop Simplifier Migration Plan</li> </ul>	April 1 <sup>st</sup> to April 15 <sup>th</sup> (2 weeks)
<b>Initial Simplifier Migration &amp; Conflict Identification</b>	<ul style="list-style-type: none"> <li>Begin Simplifier Migration</li> <li>Identify CA:FeX vs. International Spec Conflicts</li> <li>Validate Initial Content on Simplifier</li> </ul>	April 16 <sup>th</sup> to May 15 <sup>th</sup> (4 weeks)
<b>Refinement &amp; Ballot Submission Prep</b>	<ul style="list-style-type: none"> <li>Finalize Simplifier Documentation Migration</li> <li>Pre-Ballot Review &amp; Internal Testing</li> <li>Prepare for Ballot Submission</li> </ul>	May 16 <sup>th</sup> to May 30 <sup>th</sup> (2 weeks)
<b>Ballot Period &amp; Feedback Collection</b>	<ul style="list-style-type: none"> <li>Monitor Ballot Feedback</li> <li>Collect External Stakeholder Input</li> <li>Run Mid-Ballot Internal Review</li> </ul>	June 1 <sup>st</sup> to June 30 <sup>th</sup> (4 weeks)
<b>Ballot Reconciliation &amp; Content Updates</b>	<ul style="list-style-type: none"> <li>Categorize and Address Ballot Comments</li> <li>Update Simplifier Content Based on Feedback</li> <li>Conduct Final Working Group Review</li> </ul>	July 1 <sup>st</sup> to July 31 <sup>st</sup> (4 weeks)
<b>Finalization &amp; Publication</b>	<ul style="list-style-type: none"> <li>Perform Final Quality Assurance (QA) Checks</li> <li>Publish Final Version on Simplifier</li> <li>Document Release Notes &amp; Post-Publication Plan</li> </ul>	August 1 <sup>st</sup> to August 15 <sup>th</sup> (2 weeks)

# Helpful Links

---

## Published specifications (available on InfoScribe):

- [PS-CA v2.0.0 DFT-Ballot](#)
- [PS-CA v2.0.0 DFT-PreBallot](#)
- [PS-CA v1.1.0 DFT-Ballot](#)
- [CA:FeX v2.0.0 DFT-Ballot](#)
- [CA Core+ v0.1.0 DFT-Ballot](#)

## Working Groups (hosted on InfoCentral):

- [Patient Summary](#)
- [eReferral](#)

## Projectathon Information (available on InfoScribe):

- [IHE North America Connectathon Week 2025](#)

45 [2023 Final Report](#)



**Canada Health Infoway**

# Thank you!

## Contact Information

[interoperability@infoway-inforoute.ca](mailto:interoperability@infoway-inforoute.ca)

**VISIT OUR WEBSITE**  
infoway-inforoute.ca

**VISIT OUR SURVEY WEBSITE**  
insights.infoway-inforoute.ca/

**LET'S CONNECT ON LINKEDIN**  
[linkedin.com/company/canada-health-infoway/](https://linkedin.com/company/canada-health-infoway/)

**LET'S CONNECT ON TWITTER**  
@infoway