



Canada Health Infoway

# Expansion of RouteOfAdministration

Proposal and Discussion

Virtual

April 11th, 2022

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# Agenda

- Land Acknowledgement
- Background/Rationale for the Proposed Expansion
- Enhancements for Review
- Benefits and Considerations
- Discussion and Feedback
  - On the Subset definition and on the membership

# **Land Acknowledgement**

The image features a minimalist design with a white background. On the right side, there are two large, overlapping abstract shapes: a dark blue shape at the top and a red shape at the bottom, both with curved edges. The text 'Land Acknowledgement' is positioned on the left side of the page.

# Land Acknowledgement

We respectfully acknowledge that the land on which we are hosting this meeting – the land that sustains us – includes the ancestral territories of many First Peoples. Canada Health Infoway recognizes the colonial injustices experienced by Indigenous Peoples, many of which continue today and continue to affect their health and well-being. I invite all attendees to reflect on the privilege they have of living, working and playing in the territory from which you are joining this call, and invite you to commit yourself with me to having an open heart and an open mind; to forging culturally safe spaces for and relationships with Indigenous Peoples in Canadian health care; and in making a meaningful contribution to reconciliation through our shared work.

# **Background/Rationale**

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# Background/Rationale For The Request

- Virtual Care Interoperability Initiative started work to develop the Pan-Canadian Patient Summary (PS-CA) Interoperability Specifications in June 2021
- Convene stakeholders around the patient summary space – to develop, test, and refine a specification that includes:
  - Use cases, Business Requirements, and Minimum Data Set
  - Content Data Model: Data Model & FHIR Profiles
  - Reference Architecture: Actors & Transactions & Sequence Diagrams
- Content Data Model defines the rules on data elements & terminology that make up the shared base constraints for implementation of patient summary in Canada

# New Requirements Identified : SNOMED CT-CA Data Exchange Value Sets

- Identified 8 SNOMED CT CA Data Exchange Value Sets
  - Draft: AnatomicalOrAcquiredBodyStructureCode
  - Draft: ClinicalFindingCode
  - Draft: DrugOrMedicamentSubstanceCode
  - Draft: PharmaceuticalBiologicProductAndSubstanceCode
  - Draft: PharmaceuticalDoseFormCode
  - Draft: ProcedureCode
  - Draft: SeverityCode
  - **RouteOfAdministration (already existing and in use as a panCanadian subset)**

# RouteOfAdministration

- A pan-Canadian subset in use since 2016
- Membership of concepts that has been « cherry picked »
- Is part of the SNOMED CT CA Edition, i.e. is published in 2 formats:  
human-readable (Terminology Gateway) and machine-readable (RF2)
- Updated twice a year (March and September), currently

# Enhancements For Review

1. Definition
2. Membership

# RouteOfAdministration – Current Definition

“This describes which path the administered medication takes to get into the body or into contact with the body and constitutes part of the where (the other part being site - see below). It is the way in or the course the medication must take to get to its destination. Note that a path is in no sense a description of a final destination; it is a stylized description of the path taken. For example, an oral antibiotic may be used to treat a severe infection on a toe; the oral route is used to get the medicine to be able to reach and treat the infection in the toe. For some specific routes of administration there may be an incidental sense of final destination, for example an ocular administration usually occurs when treatment of an eye condition is required. However, this is in no sense definitional: rectal administration of a medicine may be for a local effect (a steroid foam for treatment of colitis) or for a systemic effect (metronidazole for treatment of infection). The route of administration of a medicine should only be a description of the path taken and not the form. Examples: oral rectal intravenous (IV) subcutaneous (SC) intramuscular (IM).”

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# RouteOfAdministration – PS-CA tested

“This subset contains concepts that represent routes for medication and immunization administration, as well as routes in which individuals may be exposed to a substance. This is a broad data exchange subset that is intended to support semantic interoperability and conformance testing. It is recommended that jurisdictions define and implement more specific clinically curated subsets that contain a portion of these concepts for data capture at the point of care for their specific use case. This subset was defined using the intensional definition of <284009009|Route of administration value (qualifier value)| against the substrate SNOMED CT Canadian Edition.”

# RouteOfAdministration – Proposed

“This describes which path the administered medication **and immunization** takes to get into the body or into contact with the body; the route of entry or the course the medication must take to get to its destination. For example, an oral antibiotic may be used to treat a severe infection on a toe; the oral route is used to get the medicine to be able to reach and treat the infection in the toe. Examples: oral rectal intravenous (IV) subcutaneous (SC) intramuscular (IM). The route of administration of a medicine should only be a description of the path taken and not the form.

This subset is intensionally defined using the set of subtypes of 284009009 | Route of administration value (qualifier value)| and a set of pan-Canadian members. This is a broad data exchange subset that supports interoperability and conformance testing, and can be constrained to meet local use cases.”

# RouteOfAdministration – Enhanced Proposed on the April 11 call

“This describes which path the administered medication **or immunization** takes to get into the body or into contact with the body; the route of entry or the course the medication **or immunization** must take to get to its destination. For example, an oral antibiotic may be used to treat a severe infection on a toe; the oral route is used to get the medicine to be able to reach and treat the infection in the toe. Examples: intravenous (IV), subcutaneous (SC), intramuscular (IM). The route of administration of a medicine should only be a description of the path taken and not the form.

This subset is intensionally defined using the set of subtypes of 284009009 | Route of administration value (qualifier value)| and a set of pan-Canadian members. This is a broad data exchange subset that supports interoperability and conformance testing, and can be constrained to meet local use cases.”

# RouteOfAdministration – Membership

- March 2022 CA Edition: 82 members
- Proposed integration of PS-CA validated concepts: intensional definition using subtypes of 284009009 | Route of administration value (qualifier value)
  - Would add 82 new members including common routes such as:
    - 418664002 | Oropharyngeal route (qualifier value)|
    - 372472002 | Ocular route (qualifier value)
    - 54471007 | Buccal route (qualifier value)
- The current 82 pan-Canadian members will be retained

# **Benefits, Considerations**



# Benefits & Considerations of Enhancement


## Benefits:

- **One subset** with an increased relevance to more use cases
- Comprehensive coverage
- Reduction of maintenance burden (based on an intensional definition)
- Alignment with recommendations from Canadian stakeholders involved in PS-CA work and GDHP
- No changes to existing membership
- Membership refinement possible

## Considerations:

- The subset is published as an expanded form of an intensional definition.
- The change need to be confirmed for the PS-CA implementation: April 13
- The updated subset will be published as out-of-cycle on the terminology Gateway and the subset (machine-readable, RF2 version) will be updated as part of the next SNOMED CA Edition publication

# **Discussion & Feedback**

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**Canada Health Infoway**

# Thank you!

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