

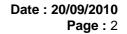
eHealth platform – G19 report Sumehr functional description

Abstract

This document aims to provide the functional description of the sumehr 1.1.

By 'functional description' we only suppose a description of the content of the sumehr (viewed as a document). The use cases of this document are not described in this note. The requirements for the management of the sumehr by the GP softwares are also out-of-scope of this short note.

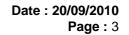
This description is independent of the KMEHR representation of the sumehr content.





Functional description

Concept	Purpose and fields	Cardinality
Creation date	Describes when the medical content was gathered	1-1
Patient	A SUMEHR is related to one patient. This patient is identified by its INSS number.	1-1
	Fields:	
	• INSS[1-1]	
	Family name [1-1]	
	First names [1-*]	
	• Sex [1-1]	
	Birth date [1-1]	
	Usual language [0-1]	
Author	A SUMEHR has one author. This author usually a general practitioner identified by a INAMI/RIZIV number.	1-1
	Fields:	
	INAMI/RIZIV number[1-1]	
	Family name [1-1]	
	First names [1-*]	
	Address [0-*]	
	Telecom contact [0-*]	
Risks	Allergies, adverse drugs reactions, social factors, other	0-*
	Fields:	
	Label [1-1]: textual description	
	Type[1-1]: allergy, adverse drug reaction, social factor or other	
	IBUI code [0-1]	
	• ICPC2 code [0-1]	
	ICD 10 code [0-1]	
	Other codification with source reference [0-*]	
Contact	Patient related person (family, etc)	0-*
	Fields:	
	Family name [1-1]	
	First names [1-*]	
	Address [0-*]	
l	Telecom contact [0-*]	





Healthcare	Healthcare professional contact.	0-*
professional	Fields:	
contact	RIZIV number [0-1]: if available	
	Family name [1-1]	
	First name [1-1]	
	Address [0-*]	
	Telecom contact [0-*]	
	Role [1-*] : specialty of the healthcare professional	
	1 Role [1-] . Specially of the healthcare professional	
GMD/DMG owner	Manager of the DMG/GMD. It can be a healthcare professional identified by an INAMI/RIZIV number or a 'medical practice' identified by a INAMI/RIZIV number.	0-1
	Fields (if physical person):	
	RIZIV number [1-1]	
	Family name [1-1]	
	First name [1-1]	
	Address [0-*]	
	Telecom contact [0-*]	
	Fields (if practice):	
	RIZIV number [1-1]	
	Name [1-1]	
	Address [0-*]	
	Telecom contact [0-*]	
Problems	Any current problem, diagnostic or care element.	0-*
	Fields:	
	Label[1-1]: textual description	
	• IBUI code [0-1]	
	• ICPC2 code [0-1]	
	• ICD 10 code [0-1]	
	Other codification with source reference [0-*]	
	Begin moment [1-1]: specifies when the problem started	
Relevant	Any relevant patient past problem, diagnostic or care element.	0-*
passive care elements	Fields:	
Cicinonia	Label [1-1] : textual description	
	For medical antecedents	
	o IBUI code [0-1]	
	o ICPC2 code [0-1]	





ICD 10 code [0-1] Other codification with source reference [0-*] Begin moment [0-1]: specifies when the problem started End moment [0-1]: specifies when the problem ended Current patient's medications. 0-* Active Medications Fields: Name [1-1] Code CNK [0-1]: CNK must be used if it is available Code ATC [0-1] Administration information [0-1] Begin date [0-1]: when the treatment starts End date [0-1]: when the treatment ends 0-* Administrated Administrated vaccines vaccines Fields: Indication from normalized list [1-*] Name [0-1] Code CNK [0-1]: CNK must be used if it is available Code ATC [0-1] Begin moment [0-1]: when the vaccine has been administrated 0-* Patient's wills Therapeutic limitation expressed for the patient