

Trillium II

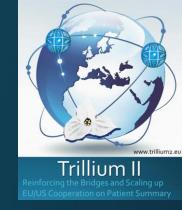
Reinforcing the Bridges and Scaling up EU/US Cooperation on Patient Summary

Hacking Health Athens – Webinar January 29th, 2019





Topics



- Trillium II project working with patient summaries and global standards
- HL7 FHIR International Patient Summary (IPS): an essential toolkit
 - What's the IPS?
 - HL7 FHIR in a nutshell
 - HL7 FHIR IPS specifications, tools (ArtDecor, Simplifier, GitHub, FHIR servers)
 - Examples
- 0&A





Trillium II
Reinforcing the Bridges and Scaling up
EU/US Cooperation on Patient Summ

The Trillium II project

January 29, 2019 Hacking Health Athens - webinar



Mission EU/US Memorandum of Understanding



Trillium II

Reinforcing the Bridges and Scaling up

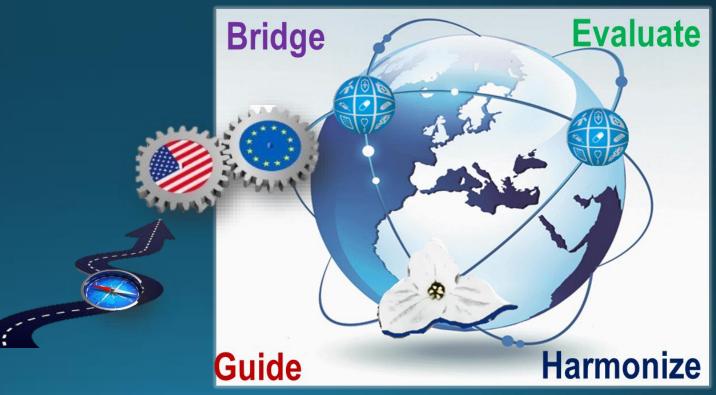
FU/US Cooperation on Patient Summan

"To support an **innovative collaborative community** of publicand private-sector entities working toward developing, deploying, and using eHealth science & technology

- to empower individuals
- to support care
- to advance clinical outcomes
- to enhance patient safety, and
- to improve the health of populations."

Critical Levers:

- International interoperability
- workforce development
- innovation ecosystems





The story began with epsos...can trans-European patient summaries be understood across the Atlantic?

Gap analysis

- Compared patient summary specifications in EU/US
- Shared clinical elements: problems, medications, allergies

Interoperability Assets

- Established a terminology prototype CTS-2 service: http://extension.phast.fr/STS_UI
- Developed Transformer of Patient summaries: http://informatics.mayo.edu/trillium-bridge
- Mediated Differences in EU/US IHE XCPD/XCA profiles for Patient Identity and Document Query/Retrieve

• Validation activities: 4 EU countries/ Kaiser Permanente

- EU/US Marketplace; HIMSS 2015; IHE Europe Connectathon 2015, eHealthWeek 2014,15

Feasibility study:

 Reflected upon standards, cross-vendor integration, incentives, clinical research, security and privacy, innovative business models, education

Recommendation:

"Advance an International Patient Summary (IPS) standard to enable people to access and share their health information for emergency or unplanned care anywhere and as needed. At minimum the IPS should include immunizations, allergies, medications, clinical problems, past operations and implants."







What do we do with international patient summary (IPS) standards?



- Highlight the social value of patient summaries
- Contribute to their Governance
- Develop, Collect, Assess learning resources
- Foster innovation & inform health policy
- Collaborate across standardization bodies
- Bridge grassroot patient summary initiatives
- Engage mobile Health companies & app developers
- Establish a Global Community of Practice for Digital Health Innovation using International Patient Summary Standards (IPS)





Scaling-up use of patient summaries

 Consider the IPS as an active window, a landing page to navigate a person's linked health data across locations & jurisdictions.



Identification vaccinations

medications

encounters

problems

Security preferences Health team

allergies

Health team

Implantable devices

- Trillium-II will select and ela
 - resources to accelerate implementation and sharing of experience
 - new use cases on the use of patient summaries from unplanned emergency care



More information about Trillium II?



- Web Site : https://trillium2.eu/
- Contacts
 - Scientific coordinator Catherine Chronaki [HL7]: chronaki@hlzeurope.org;
 - Administrative coordinator Janne Rasmussen [MedCom]: jar@medcom.dk





Trillium II Reinforcing the Bridges and Scaling up EU/US Cooperation on Patient Summa

What is the IPS?



What is the IPS?



International

It emphasizes the need to provide generic solutions for global application beyond a particular region or country.

- Patient
- **S**ummary

Health record <u>extract</u> comprising a standardized collection of clinical and contextual information (retrospective, concurrent, prospective) that provides a <u>snapshot in time of a subject of care's health information and healthcare</u>

SOURCE: ISO/TR 12773-1:2009 (en) Business requirements for health summary records — Part 1: Requirements]



HL7 Int. and CEN/TC 251 agreement (April, 2017)







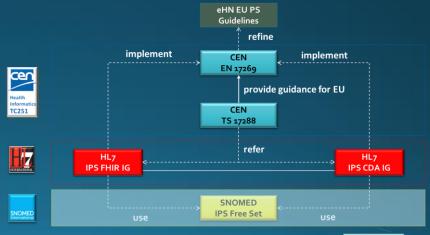
Vision

• "In order to further the care for citizens across the globe, we agree to collaborate on a single, common International Patient Summary (IPS) specification that is readily usable by all clinicians for the (crossborder) unscheduled care of a patient."

Scope

 "The IPS specification shall focus on a minimal and non-exhaustive Patient Summary, which is specialtyagnostic and condition-independent, but still clinically relevant." Implementable
Applicable for global use
Extensible and open
Sustainable

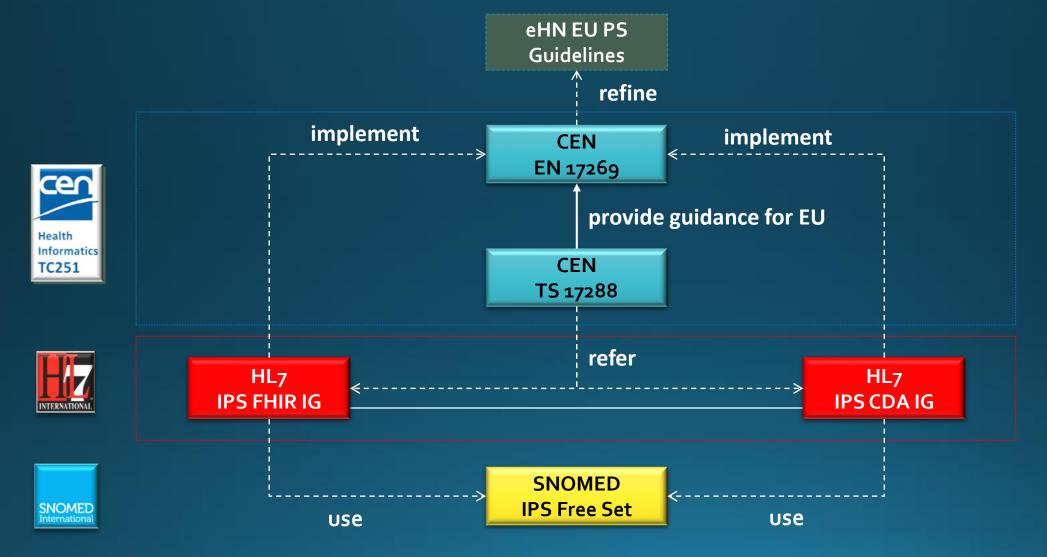
The Five IPS project Products



Provisional



The Five IPS project Products

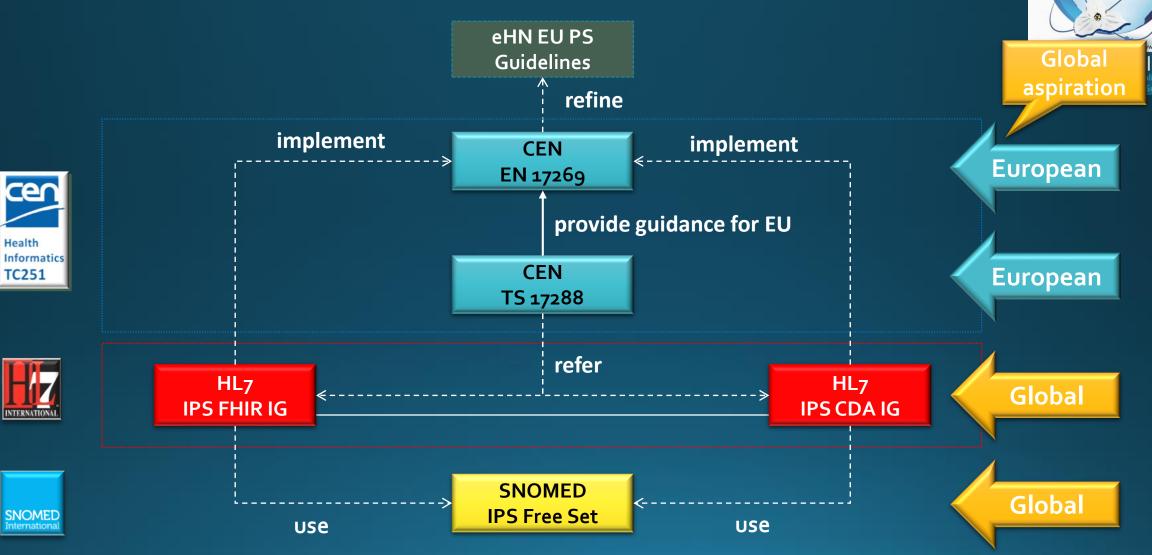




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EU/US Cooperation on Patient Summary



The Five IPS project Products





Timelines





CEN/TC251

- prEN 17269
 - ballot passed
- DTS 17288
 - ballot passed
- Ready for publication on March 2019

HL₇

- HL7 CDA IPS IG (STU)
 - published
- HL7 FHIR IPS IG (STU)
 - ballot passed
 - expected publication begin 2019

SNOMED Int.

- ▶ *IPS Free Set* (provisional)
 - Content finalised January 2019
 - Available to be added to specifications at drafting stage February 2019
 - ▶ Publicly available from SNOMED International June 2019



Data

Set

The International Patient Summary



Trillium II
inforcing the Bridges and Scaling up
//US Cooperations of Pitient Summary

Principles

Minimal

Non-exhaustive

Specialty-agnostic

Condition-independent

Implementable

Applicable for global use

Extensible and open

Sustainable



..but still clinically relevant



The International Patient Summary



Trillium II

Minimal

Non-exhaustive

Specialty-agnostic

Condition-independent

- Reflects the ideas of 'summary' and the need to be concise
- It alludes to the existence of a core set of data items that all health care professionals can use;



The International Patient Summary



Trillium II
Reinforcing the Bridges and Scaling u

Minimal

Non-exhaustive

Specialty-agnostic

Condition-independent

- It recognises that the ideal dataset is not closed, and is likely to be extended, not just in terms of requirement evolution, but also pragmatically in instances of use.
- Such data is outside the scope of the IPS standards until review.







Minima

Non-exhaustive

Specialty-agnostic

Condition-independent

- It does not imply that all the items in the dataset will be used in every patient summary.
- It is a starter set of data to help inform a person's treatment at the point of care, irrespective of the condition of the patient or of the specialist trying to manage the care.







Implementable

Applicable for global use

Extensible and open

Sustainable

- Promote (the evolution and convergence of) existing standards
- Rely on solutions that are already implemented or ready for implementation
- Consider new or additional solutions as they become available







Implementable

Applicable for global use

Extensible and open

Sustainable |

- Strive for global accessibility of standards for free
- Strive for a core set of globally accessible and broadly usable terminologies
- Do not include local solutions in that are not available in other jurisdictions
- Include free text in addition to the structured codes as needed





International Patient Summary

Implementable

Applicable for global use

Extensible and open

Sustainable

- Provide common content that can be extended for other use cases
- Be open to emerging solutions for unresolved issues or improvements (e.g. IDMP)









Implementable

Applicable for global use

Extensible and open

Sustainable

- Ensure robust maintenance and update process for the IPS
- Ensure clinical validity of the IPS, meeting requirements regarding
 - Clinical Workflow
 - Clinical Documentation
 - Information Quality



What is the first iteration of IPS?



- The focus of use for IPS is unscheduled (crossborder) care
- ..the data model for the IPS has been constructed to serve this case...
- ...but it provides a base-line usable also within other scheduled or planned care cases.



IPS Progressive Approach



Trillium II
Reinforcing the Bridges and Scaling up
EU/US Cooperation on Patient Summary



Problems:

Essential hypertension

Allergies:

No known Allergies

Medications

 hydrochlorothiazide 25 mg + triamterene 37.5 mg



Allergies:

- No known Allergies
- Asserter: patient

Problems

• Essential hypertension

Allergies

- No known Allergies
 Medications
- hydrochlorothiazio triamterene 37.5 m

Diagnostic Results:

• 11/11/2017 XYZ 999

Vital Signs:

• Average Blood pressure 150/100

Medical Devices

No known devices

History of Procedures

<....>



Problems:

Essential hypertension

Allergies:

No known Allergies

Medications

hydrochlorothiazide ar ma

Diagnostic Results:

- 11/11/2017 Proced e XYZ
 - Specimen .>
 - Performe < ...>
 - Exam1 xx/xx
 - InterpretationCode
 - Exam 2...
 - Report ID = 123456



The IPS is not an EHR!



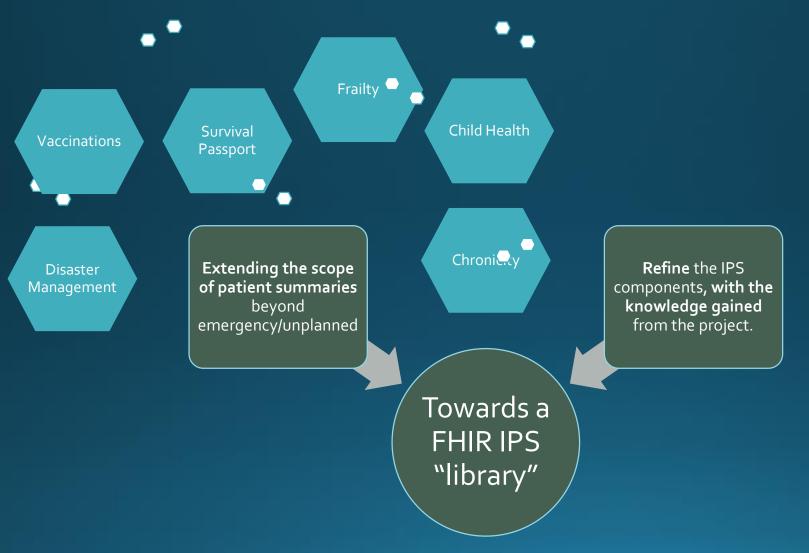


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..but it could be the basis for the future European EHR exchange format (EU EHR-xF) ..



Trillium II: extending the IPS





Trillium II
Reinforcing the Bridges and Scaling up



IPS Progressive Approach





1. The IPS document

2. The IPS data blocks

Current Intended Use



as a document

Expected Future Use





as a document and a as a library

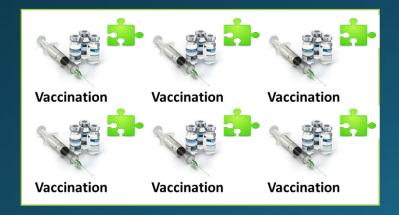


IPS Progressive Approach









Library of reusable..

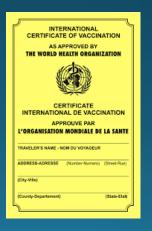
(fragments; resources; building blocks;...)

Common "core" set of data

With minimal common terminologies

Extensible







Trillium II IPS Sections

<u>IPS</u>

Subject

Medication Summary

Immunizations

Vital Signs

Functional Status (Autonomy/ Invalidity)

Encounters

Trillium II

Author

Allergies and Intolerances

History of Procedures

Past History of Illness

Plan of Care

Attester

Problem List

Medical Devices

Diagnostic

Results

Pregnancy (status + history summary)

Social History

Advance Directives

Custodian

Required

Recommended

Optional

"Header" R

Optional





FHIR in a nutshell..

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Akwnolegments



This presentation is based on the Kramer's presentation





The Acronym



Fast

Relative – No technology can make integration as fast as we'd like

Healthcare Interoperability

That's why we're here

Resources

Building blocks – more on these to follow



Resources



- "Resources" are:
 - Small logically discrete units of exchange
 - Defined behaviour and meaning
 - Known identity / location
 - Smallest unit of transaction "of interest" to healthcare

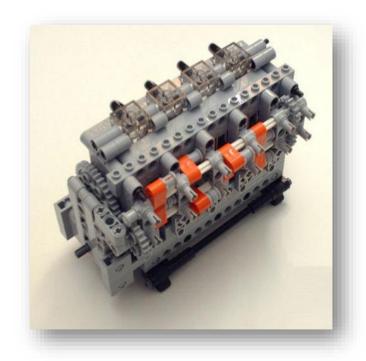


Concept is akin (in terms of scope) to HL7v2 segments, HL7v3 CMETs, as well as DICOM IEs.

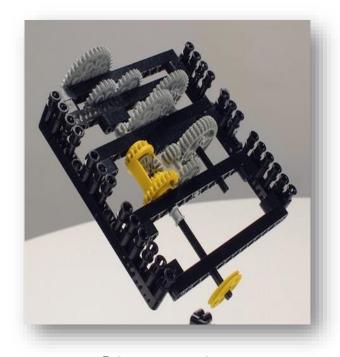


Resources





Patient

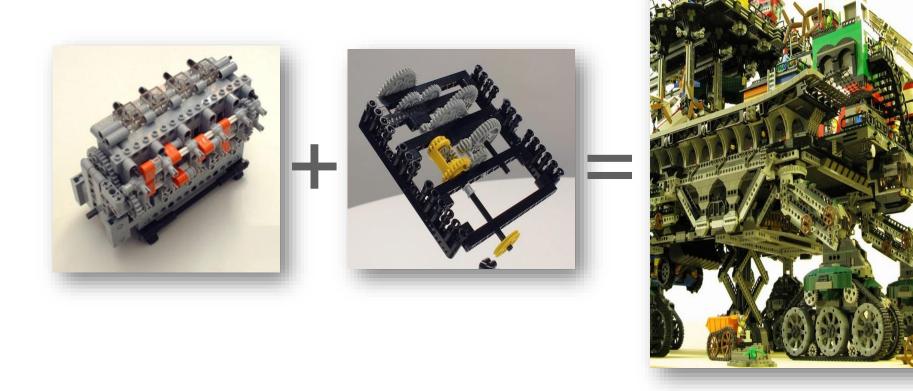


Observation



Resources







The 80/20 rule



- Design for the 80%, not 100%
 - Only include data elements in the artifacts if 80% of all implementers of that artifact will use the data element
- Allow easy extension for the remaining 20% of elements
 - which often make up 80% of current specs
 - Vocabulary approach to extension definition



V3/OpenEHR are designed to cover the 100%.

A Resource's identity

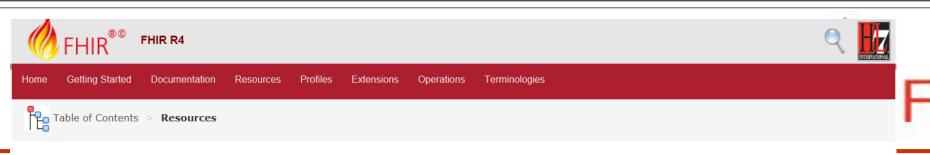


In fact: a URL

http://server.org/fhir/Patient/1
endpoint logical id

resource type





1.2 Resource Index

FHIR Infrastructure Work Group Maturity Level: N/A Standards Status: Informative

This page is provided to help find resources quickly. There is also a more detailed classification, ontology, and description. For background to the layout on the layers in this page, see the Architect's Overview. See also the abstract Base Resources Resource and DomainResource.

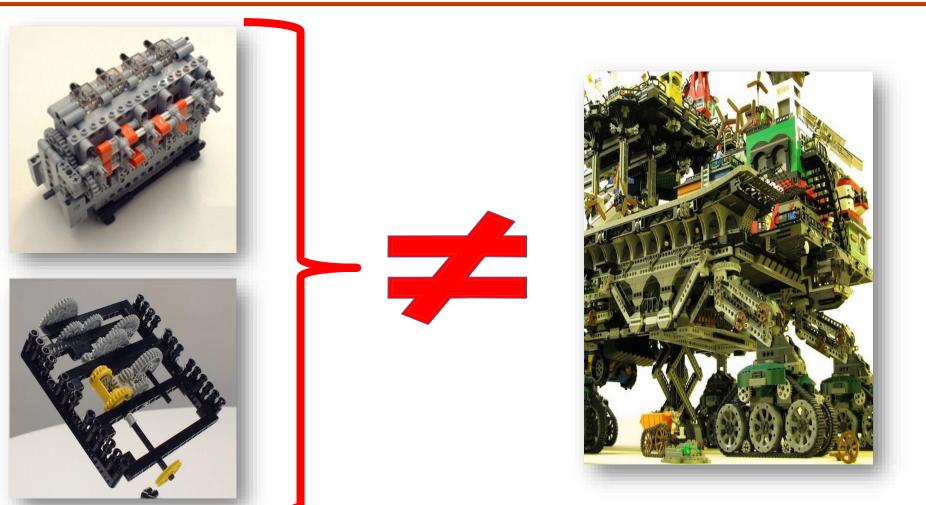


http://www.hl7.org/fhir/resourcelist.html



Extensibility





Extensibility













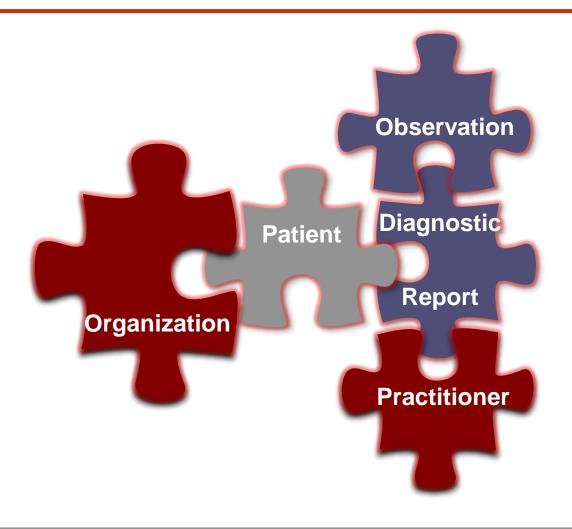
Extending a Patient resource



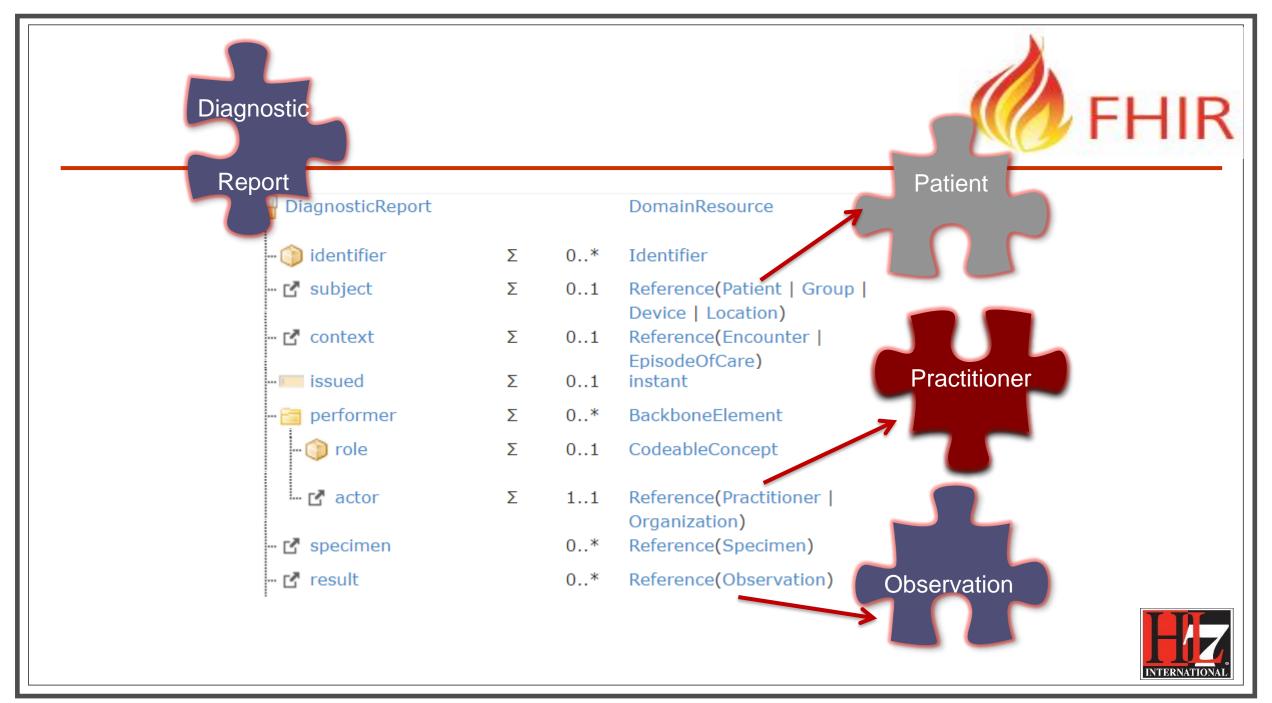
```
Key = location of formal definition
<Patient xmlns="http://hl7.org/fhir">
  <!-- some metadata and narrative -->
 <extension url="http://hl7.org/fhir/StructureDefinition/patient-mothersMaidenName">
    <valueString_value="Williams"/>
 </extension>
  <!-- more patient data --
                                     Value = value according to definition
</Patient>
  "resourceType": "Patient",
  "extension": [{
      "url": "http://hl7.org/fhir/StructureDefinition/patient-mothersMaidenName",
      "valueString": "Williams"
 }]
```

It's all about combining resources . . .









Resource Reference



example snippet taken from a DiagnosticReport:

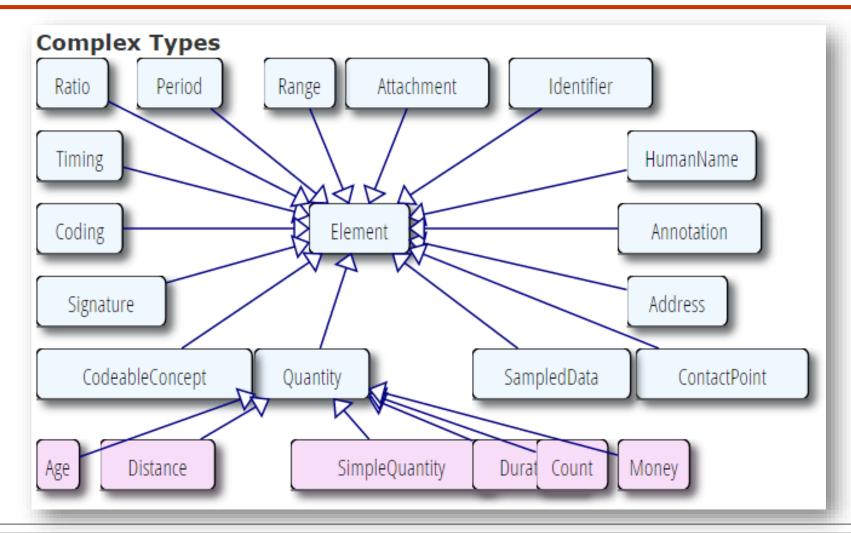
```
<subject>
   <reference value="Patient/f001"/>
    <display value="P. van den Heuvel"/>
   </subject>
```

```
"subject": {
    "reference": "Patient/f001",
    "display": "P. van den Heuvel"
},
```



Datatypes, complex







Complex datatypes



HumanName

use: code [0..1] NameUse! text: string [0..1] family: string [0..1] given: string [0..*] prefix: string [0..*] suffix: string [0..*] period: Period [0..1]

```
<name>
  <family value="Everyman" />
  <given value="Adam" />
  <given value="A." />
  </name>
```



Coded types



```
CodeableConcept Σ
                           Element
                                        Coding
                                                                 Element
           Σ 0..*
- (iii) coding
                           Coding
                                                           0..1
                                       --- system
                                                                 uri
                Σ
                     0..1
                                       -- version
                                                           0..1
text
                           string
                                                                 string
                                                           0..1
                                       --- code
                                                                 code
                                       -- display Σ
                                                           0..1
                                                                 string
                                       userSelected Σ 0..1
                                                                 boolean
 <code>
   <system value="http://hl7.org/fhir/sid/icd-10" />
   <code value="G44.1" />
 </code>
                                          Codes are defined in code systems
 "code": {
       "system": "http://hl7.org/fhir/sid/icd-10",
      "code": "G44.1"
```



"Choice" properties



Observation (DomainResource)

identifier : Identifier [0..*]

status : code [1..1] ObservationStatus!

category: CodeableConcept [0..*] Observation Category?

code : CodeableConcept [1..1] LOINC ??

subject : Reference [0..1] Patient | Group | Device | Location

context : Reference [0..1] Encounter | EpisodeOfCare

effective[x]: Type [0..1] dateTime | Period

issued: instant [0..1]

performer: Reference [0..*] Practitioner | Organization | Patient |

value[x] : Type [0..1] Quantity | CodeableConcept | string | boolean | Range | Ratio | SampledData | Attachment | time | dateTime | Period

dataAbsentReason : CodeableConcept [0..1] Observation Value Absent

Reas...+

interpretation: CodeableConcept [0..1] Observation Interpretation



"Choice" properties



value[x] : Type [0..1] Quantity | CodeableConcept | string | boolean | Range | Ratio | SampledData | Attachment | time | dateTime | Period

```
"valueQuantity" : {
    "value" : 107,
    "unit" : "mm[Hg]"
}
```

```
<valueString
  value="Patient loves to sing" />
```

```
"valueString" : "Patient loves to sing"
```





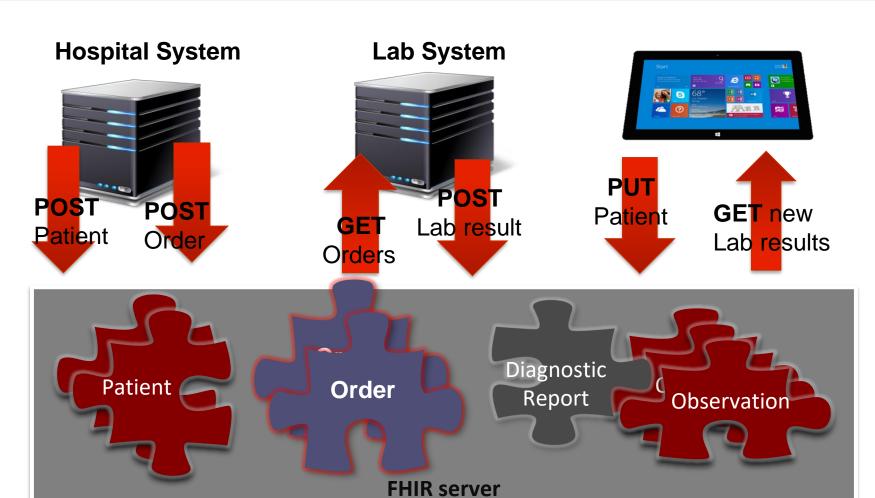


Updating, creating & deleting single resources using REST

REST - CRUD

REST: "Repository" model of healthcare







REST "representations"



```
Request:
```

GET http://myserver.org/fhir/Patient/1?_format=json

Response

HTTP/1.1 200 OK

Content-Type: application/fhir+json

Content-Length: 787

Request:

GET http://myserver.org/fhir/Patient/1

Accept: application/fhir+json



Communicating resources (with REST, see also http://www.hl7.org/fhir/http.html)



create

The create interaction creates a new resource in a server assigned location. The create interaction is performed by an HTTP POST operation as shown:

read

The read interaction accesses the current contents of a resource. The interaction is performed by an HTTP GET operation as shown:

GET [base]/[type]/[id] {? format=[mime-type]}

update

The update interaction creates a new current version for an existing resource or creates a new resource if no resource already exists for the given id. The update interaction is performed by an HTTP PUT operation as shown:

PUT [base]/[type]/[id] {? format=[mime-type]}

delete

The delete interaction removes an existing resource. The interaction is performed by an HTTP DELETE operation as shown:

DELETE [base]/[type]/[id]





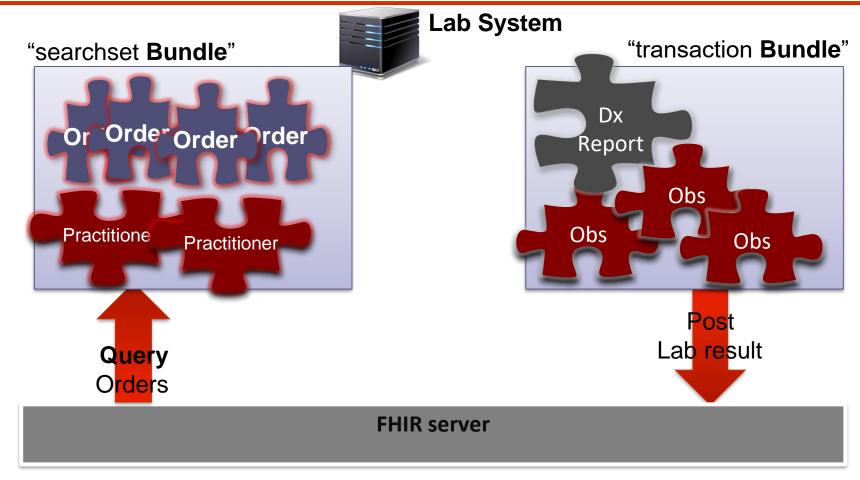


How FHIR communicates sets of resources

BUNDLES

Bundling resources







Types of Bundles



Code	Display	Definition
document	Document	The bundle is a document. The first resource is a Composition .
<u>message</u>	Message	The bundle is a message. The first resource is a MessageHeader .
transaction	Transaction	The bundle is a transaction - intended to be processed by a server as an atomic commit.
transaction-	Transaction Response	The bundle is a transaction response. Because the response is a transaction response, the transaction has succeeded, and all
<u>response</u>		responses are error free.
<u>batch</u>	Batch	The bundle is a set of actions - intended to be processed by a server as a group of independent actions.
<u>batch-response</u>	Batch Response	The bundle is a batch response. Note that as a batch, some responses may indicate failure and others success.
history	History List	The bundle is a list of resources from a history interaction on a server.
<u>searchset</u>	Search Results	The bundle is a list of resources returned as a result of a search/query interaction, operation, or message.
collection	Collection	The bundle is a set of resources collected into a single package for ease of distribution that imposes no processing obligations or behavioral rules beyond persistence.







SEARCH FUNCTIONALITY

Basic search



Syntax

GET [base]/[resourcetype]?key=value&...

Getting all patients

GET http://acme.org/fhir/Patient

Example:

GET http://acme.org/fhir/Patient?name=eve



Search parameters



Each resource has a set of "standard" search parameters, so **not every element can be searched!**:

Name	Туре	Description	Paths
active	token	Whether the patient record is active	Patient.active
address	string	An address in any kind of address/part of the patient	Patient.address
birthdate	date	The patient's date of birth	Patient.birthDate
family	string	A portion of the family name of the patient	Patient.name.family
gender	token	Gender of the patien Parameter	Patient.gender
given	string	A portion of the given Type	Patient.name.given
identifier	token	A patient identifier	Patient.identifier
language	token	Language code (irrespective of use value)	Our last search
link	referenc	e All patients linked to the given patient	used this one
name	string	A portion of either family or given name of the patient	Patient.name



Parameter types



For each type there are specific prefixes and modifiers

number, date and quantity:
Search for [param] = gt[value] retrieves resources
where [param] has a value greater than [value]

http://acme.org/fhir/Patient?name:contains=eve



More information





3.1.1 Search

FHIR Infrastructure Mr Work Group	Maturity Level: Normative	Standards !

Searching for resources is fundamental to the mechanics of FHIR. Search operations traverse through an existing set of resources filte operation. The text below describes the FHIR search framework, starting with simple cases moving to the more complex. Implementer complexity that they require for their implementations.

3.1.1.1 Summary Table

Search Parameter Types	Parameters for all resources	Search result parameters
Number	_id	_sort
Date/DateTime	_lastUpdated	_count
String	_tag	_include
Token	_profile	_revinclude
Reference	security	summary
Composite	text	total
Quantity	content	elements
URI	list	_ contained
Special	_has	_containedType
	_type	

http://www.hl7.org/fhir/search.html







FHIR DOCUMENTS

Documents



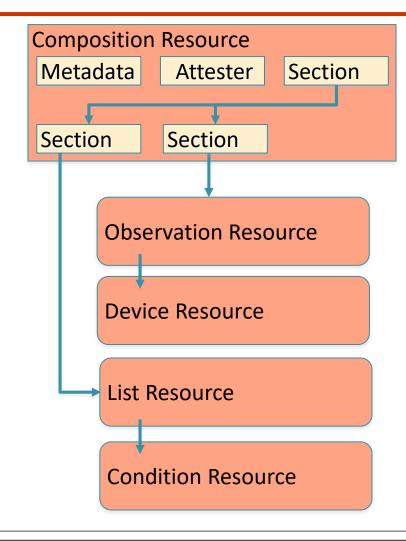
- Collection of resources bound together
 - Root is a "Composition" resource
 - Composition is a sort of extended CDA header (includes sections; reference to entries;...)
- Sent as a Bundle resource
- Can be signed, authenticated, etc.
- No context conduction



http://www.hl7.org/fhir/documents.html

Documents - are bundles





```
<Bundle>
  <entry>
      <Composition \/>
 </entry>
 <entry>
      <Observation />
 </entry>
 <entry>
      <Device /> ✓
 </entry>
 <entry>
      <List/>
 </entry>
 <entry>
      <Condition/>
 </entry>
</Bundle>
```

The IPS Composition



```
    Composition 

 ▶ identifier
                          section (1+) 🔷 💥 🥕
  status (1)
                                                    🕶 sectionProblems (1) 🕕 🕞 🥜
                           sectionMedications (1) 1 pm
 title (1) 🜓 🥜
                           ▶ sectionAllergies (1) 🕕 🕝 🥕
 ▶ class
                                                     → code (1) 
                           ▶ sectionProblems (1) 🕕 🕝 🥕
 ▶ subject (1) 🕕 🥕
                                                     encounter 
                                                      mode (0)
                           ▶ sectionImmunizations ◆ ↑ ↑
  date (1) 1
                                                     ▶ orderedBy
                           ▶ sectionMedicalDevices ◆ ↑ ↑

→ entry (1+) 
◆ 
→ 

 author (1+) 
                           ▶ sectionResults 

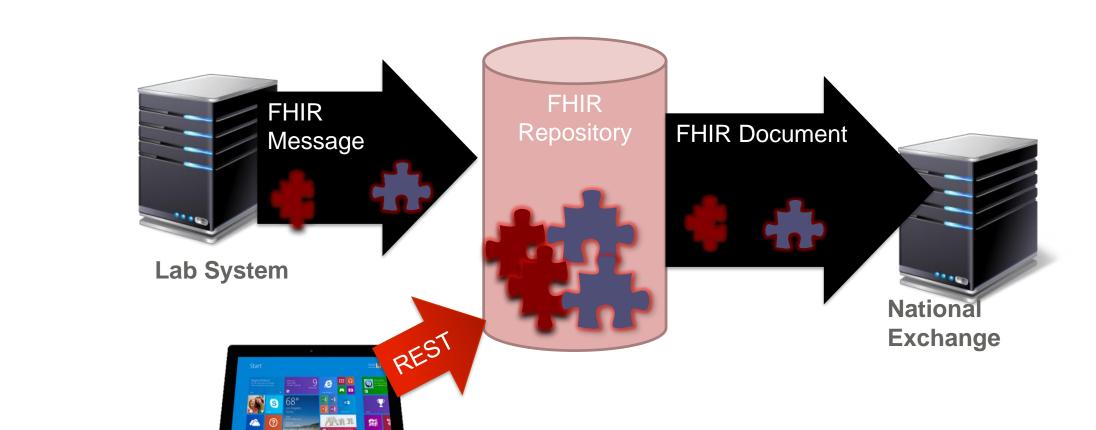
→ problem (1+) 
◆ 
↑

  title (1) 🕕 🧷
                           reference
  confidentiality
                           identifier (0) 🥜
 display
 → custodian 🕕 🥕
                           emptyReason (0)
 relatesTo (*) 🕩 🥕
                                                      section (0)
                           ▶ section (1+) (1+)
 healthcareProviderParticipant (*) // j
```



Regardless of **paradigm**, the content **is the same**









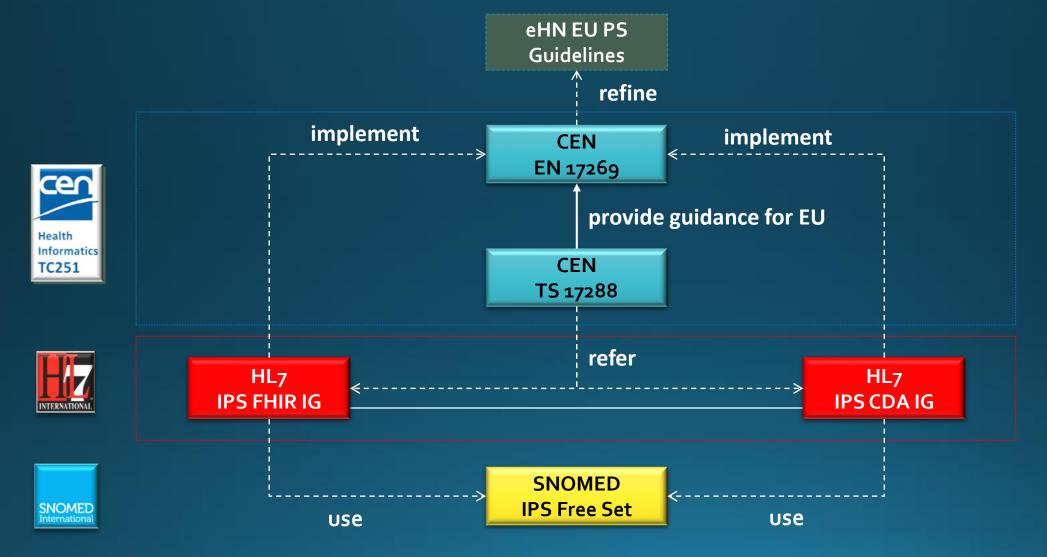


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THE HL7 FHIR IPS



The Five IPS project Products



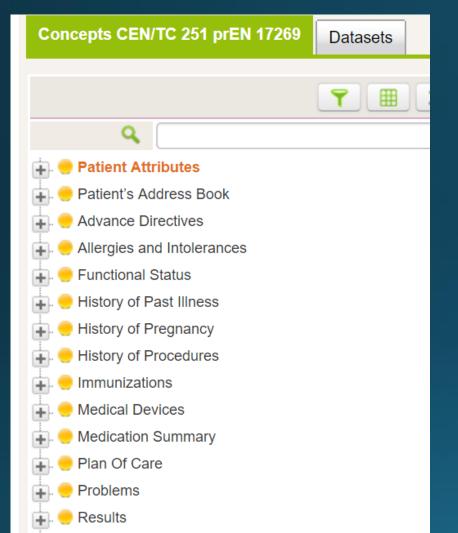


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EU/US Cooperation on Patient Summary



The IPS data set (prEN 12679)





Social History

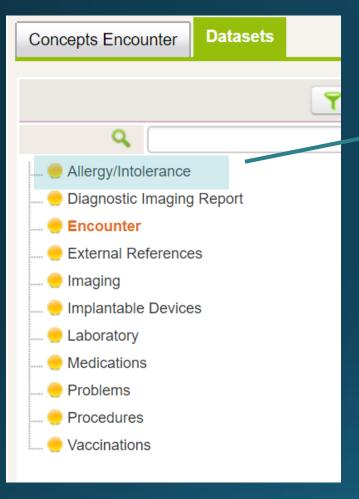
https://art-decor.org/art-decor/decor-datasets--hl7ips-

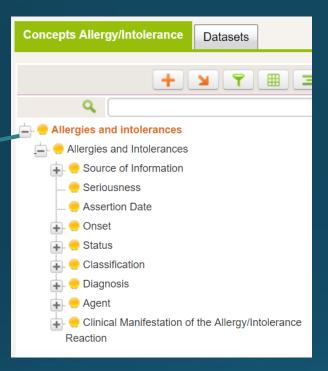


The Trillium II data set (based on prEN 12679)



Trillium II



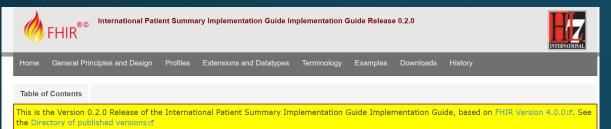


https://art-decor.org/art-decor/decor-datasets--trilm2-



The FHIR IPS IG (STU)





International Patient Summary Implementation Guide &

This is the September 2018 Ballot Version of the International Patient Summary Implementation Guide, based on FHIR Version 4.0.0 E. See the Directory of published versions: This specification is currently undergoing ballot and connectation testing. It is subject to change, which may be significant, as part of that process.

Feedback is welcome and may be submitted through the FHIR gForge tracker & indicating "International Patient Summary" as the specification. If balloting on this IG, please, if possible, submit your comments via the tracker and then reference the tracker ids in your ballot submission spreadsheet.

Introduction

An International Patient Summary (IPS) document is an electronic health record extract containing essential healthcare information intended for use in the unscheduled, cross-border care scenario, comprising at least the required elements of the IPS dataset. The IPS dataset is a minimal and nonexhaustive patient summary dataset, specialty-agnostic, condition-independent, but readily usable by clinicians for the cross-border unscheduled care of a patient.

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Purpose

The goal of this Implementation Guide is to identify the required clinical data, vocabulary and value sets for an international patient summary. The international patient summary is specified either as a templated document using HL7 CDA R2 (see the IPS Wiki here or as an HL7 FHIR Composition (as described in this implementation guide). The primary use case is to provide support for cross-border or cross-jurisdictional emergency and unplanned care.

This specification aims to support:

- · Cross-jurisdictional patient summaries (through adaptation/extension for multi-language and realm scenarios, including translation).
- Emergency and unplanned care in any country, regardless of language.
- Value sets based on international vocabularies that are usable and understandable in any country.

https://build.fhir.org/ig/HL7/fhir-ips/

Based on FHIR R4 (Published on January 2019)

It describes the "IPS document" and the data blocks (FHIR profiles) used to build it



The Trillium II IPS FHIR Profiles



gcangioli First Import of the IG publisher environment	
□ IG	First Import of the IG publisher environment
examples	eumfh-70-281:
profiles	First Import of the IG publisher environment
aluesets valuesets	Added valuesets folder
README.md	Initial commit

https://github.com/gcangioli/trilliumII

gcangioli eumfh-70-281:	
■ EUMFH	eumfh-70-281:
EncountersSection	Updated organization-encounters-example-1.xml
Imaging Examples	No commit message
MIE2018_DanyBoy	soem fixes for the mie2018_DanyBoy observation examples
Misuriamo	First commit for the "Misuriamo" samples
TicSalut-AllergyIntolerance	Fixed the issues with the clincalStatus (added <clinicalstatus value="</td"></clinicalstatus>
Observation-example-2.xml	Added most of the lab examples
Observation-example-3.xml	Added most of the lab examples

All the source files for

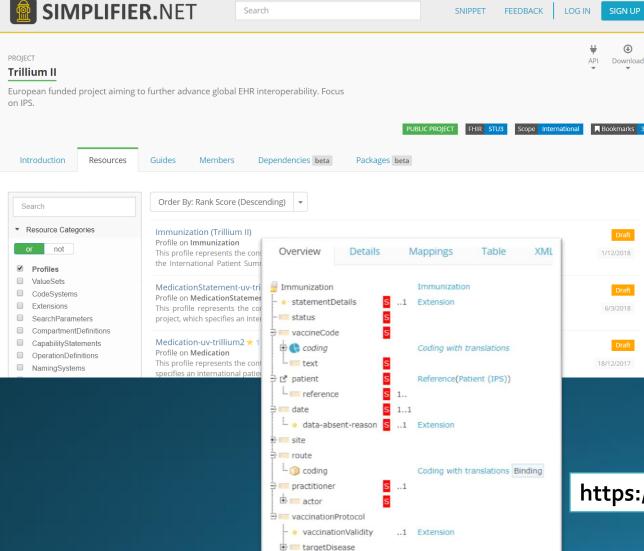
- 1. HL7 FHIR Profiles
- 2. specified HL7 FHIR Value Set
- 3. examples



The Trillium II IPS FHIR Profiles

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doseStatus

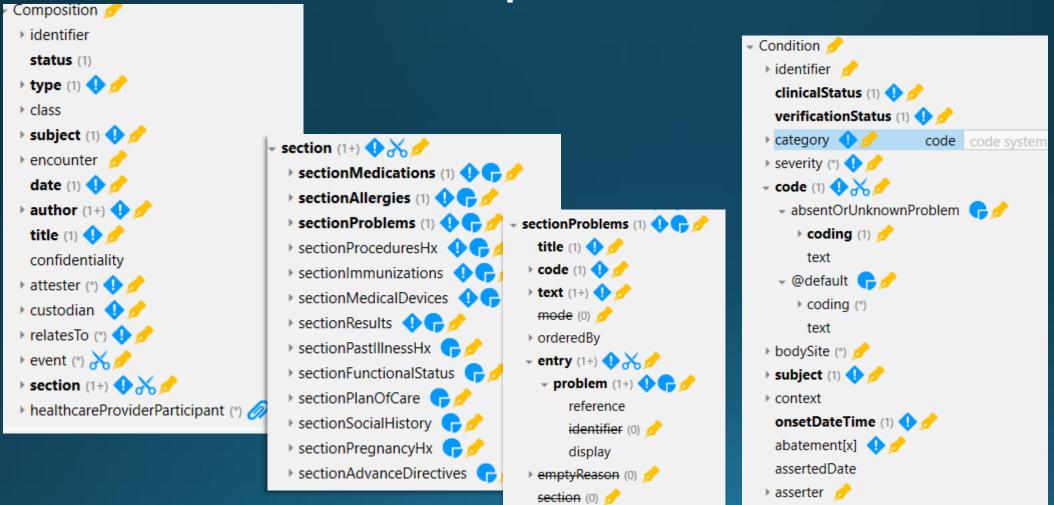
Based on FHIR STU₃

It describes the "IPS document" and the data blocks (FHIR profiles) used to build it

https://simplifier.net/TrilliumII/~resources?category=Profile



The IPS Composition





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GA 727745

The IPS Composition

```
<?xml version="1.0" encoding="UTF-8"?>
                                                                  <section>
Composition xmlns="http://hl7.org/fhir" xmlns:xsi="http://www.w;
                                                                    <title value="Active Problems"/>
   <id value="demo-ips-dany-boy-1"/>
                                                                    <code>
   <meta>
                                                                    <text>
     cprofile value="http://hl7.org/fhir/uv/ips/StructureDefinition/cc/"
                                                                    <entry>
   </meta>
                                                                      <reference value="Condition/demo-cond-asthma-1"/>
   <status value="final"/>
                                                                    </entry>
   <type>
                                                                  </section>
   <subject>
                                                                  <section>
     <reference value="Patient/demo-patient-1"/>
                                                                    <title value="Medication"/>
                                                                    <code>
   <date value="2018-04-12T15:19:00+02:00"/>
                                                                    <text>
   <author>
                                                                    <entrv>
     <reference value="Practitioner/demo-practitioner-1"/>
                                                                      <reference value="MedicationStatement/demo-medstat-1-1"/>
   </author>
                                                                    </entry>
   <title value="Patient Summary - Boy with Asthma "/>
                                                                    <entry>
   <confidentiality value="N"/>
                                                                      <reference value="MedicationStatement/demo-medstat-1-2"/>
   <attester>
                                                                    </entry>
     <mode value="legal"/>
                                                                    <entry>
     <time value="2017-07-20T14:30:00+01:00"/>
                                                                      <reference value="MedicationStatement/demo-medstat-1-3"/>
     <party>
                                                                    </entry>
       <reference value="Practitioner/demo-practitioner-1"/>
                                                                  </section>
     </party>
                                                                  <section>
   </attester>
                                                                    <title value="Allergies and Intolerances"/>
   <event>
                                                                    <code>
   <section>
                                                                    <text>
     <title value="Active Problems"/>
     <code>
                    GET http://app.srdc.com.tr/fhir/stu3/Composition/demo-ips-dany-boy-1
                                                                    <entrv>
                                                                      <reference value="AllergyIntolerance/demo-aoi-2"/>
```

</entry> </section>



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EU Horizon 2020 GA 727745

The IPS "document"

```
Sundle xmlns="http://hl7.org/fhir" xmlns:xhtml="http://www.w3.org/1999/xhtml" xmlns:xsi="
   <id value="demo-ipsbdl-dany-boy-1"/>
   <a href="cidentifier><system value="http://trilliumbridge.eu/fhir/demos/mie2018/bundleids"></a>
   <type value="document"/>
      <fullUrl value="Composition/demo-ips-dany-boy-1"/>
      <resource>
        <Composition>
      </resource>
   </entry>
   <entry>
      <fullUrl value="http://app.srdc.com.tr/fhir/stu3/Patient/demo-patient-1"/>
      <resource>
         <Patient>
      </resource>
   </entry>
      <fullUrl value="http://app.srdc.com.tr/fhir/stu3/Practitioner/demo-practitioner-1"/>
      <resource>
        <Practitioner>
      </resource>
   </entry>
      <fullUrl value="http://app.srdc.com.tr/fhir/stu3/AllergyIntolerance/demo-aoi-1"/>
        <AllergyIntolerance>
      </resource>
   </entry>
      <fullUrl value="http://app.srdc.com.tr/fhir/stu3/AllergyIntolerance/demo-aoi-2"/>
        <AllergyIntolerance>
      </resource>
   </entry>
```

Resources that have to be included (STU₃)

- Composition.subject
- Composition.encounter
- Composition.author
- Composition.attester.party
- Composition.custodian
- Composition.event.detail
- Composition.section.entry
- All referred resources for the IPS Profile



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The IPS "document"

```
Sundle xmlns="http://hl7.org/fhir" xmlns:xhtml="http://www.w3.org/1999/xhtml" xmlns:xsi="
  <id value="demo-ipsbdl-dany-boy-1"/>
  <id>dentifier><system value="http://trilliumbridge.eu/fhir/demos/mie2018/bundleids"/><value</td>
  <type value="document"/>
   <entry>
     <fullUrl value="Composition/demo-ips-dany-boy-1"/>
                   GET http://app.srdc.com.tr/fhir/stu3/Bundle/demo-ipsbdl-dany-boy-1
     </resource>
   </entry>
   <entry>
     <fullUrl value="http://app.srdc.com.tr/fhir/stu3/Patient/demo-patient-1"/>
     <resource>
        <Patient>
     </resource>
   </entry>
     <fullUrl value="http://app.srdc.com.tr/fhir/stu3/Practitioner/demo-practitioner-1"/>
     <resource>
        <Practitioner>
     </resource>
   </entry>
     <fullUrl value="http://app.srdc.com.tr/fhir/stu3/AllergyIntolerance/demo-aoi-1"/>
     <resource>
        <AllergyIntolerance>
     </resource>
   </entry>
   <entry>
     <fullUrl value="http://app.srdc.com.tr/fhir/stu3/AllergyIntolerance/demo-aoi-2"/>
        <AllergyIntolerance>
     </resource>
   </entry>
```



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FHIR Servers



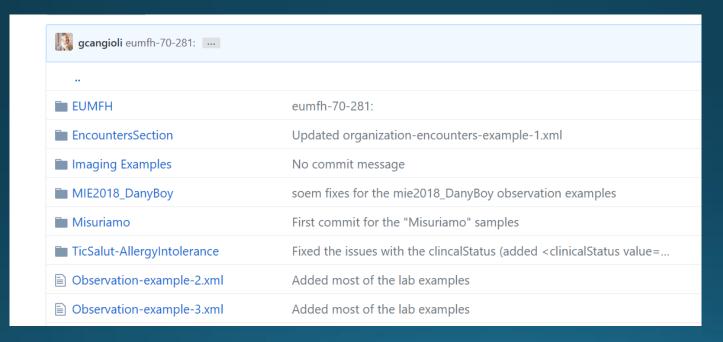
- Trillium II test servers (FHIR STU₃)
 - http://ehealthpass.gnomon.com.gr/hapi-fhir-jpaserver4/baseDstu3
 - http://app.srdc.com.tr/fhir/stu3
- Other FHIR Test Server
 - http://wiki.hl7.org/index.php?title=Publicly_Available_FHIR_Servers_for_tes ting
 - http://test.fhir.org/r4 (http://test.fhir.org/r3)



Trillium II examples

www.trillium2.eu Trillium II Reinforcing the Bridges and Scaling up

https://github.com/gcangioli/trilliumII/tree/master/examples



...ready to include also yours....