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IRISH STANDARD

ENV 12538:1997

ICS 35.240.70

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MEDICAL INFORMATICS - MESSAGES FOR PATIENT REFERRAL AND DISCHARGE

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EUROPEAN PRESTANDARD

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Medical informatics - Messages for patient referral and discharge

Informatique de santé - Messages pour l'adresse d'un patient à un professionnel de santé et pour la sortie du patient

Medizinische Informatik - Nachrichten für Zuweisung und Entlassung von Patienten

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European Committee for Standardization
Comité Européen de Normalisation
Europaisches Komitee für Normung

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FOREWORD

This European Prestandard has been prepared by Technical Committee CEN/TC 251 "Medical informatics", the secretariat of which is held by IBN.

According to the CEN/CENELEC Internal Regulations, the national standards organisations of the following countries are bound to announce this European Prestandard: Austria, Belgium, Denmark, Finland, France, Germany, Greece, Iceland, Ireland, Italy, Luxembourg, Netherlands, Norway, Portugal, Spain, Sweden, Switzerland and the United Kingdom.

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INTRODUCTION

The increased use of data processing and telecommunications capabilities has made possible the interchange of information in machine readable and machine processable formats. As automated interchange of information in healthcare increases, it is essential to provide appropriate information interchange standards.

Computer systems are now used by many healthcare professionals for the storage and processing of information. Healthcare professionals request specialist services from one another by a process commonly called "referral". The request for a service is usually accompanied by a relevant subset of the information held by the requesting healthcare professional about the referred patient. The recipient of a referral request usually reports on the progress and outcome of the requested service to the requester and to other healthcare professionals involved in the care of the patient. These reports may be made when the requested service is completed (commonly referred to as "discharge") or at other significant points in the delivery of the requested service. The information that is transferred in the requests and reports passing between healthcare professionals typically forms part of the administrative and clinical record of the patient held by each of the communicating parties. Electronic transfer of these requests and reports reduces the need for manual data entry and the risk of transcription errors. It also results in greater efficiency leading to better healthcare provision. Standards are required to facilitate electronic transfer of requests for and results of the delivery of healthcare services between the many systems currently used.

Implementation of this European Prestandard will therefore :

a) facilitate the electronic transfer of requests for specialist services from requesting healthcare parties, to healthcare parties providing specialist services;

b) facilitate the electronic transfer of reports of specialist services from healthcare parties providing specialist services to requesting healthcare parties and to other healthcare parties involved in the care of a patient;

c) reduce the need for human intervention in information interchange between applications used by specialist service providers and those used by other healthcare parties;

d) minimise the time and effort required for the introduction of information interchange agreements;

e) reduce the development effort required by suppliers to allow communication between a wide range of applications in this field;

f) reduce (in consequence of the foregoing) the cost of information interchange between specialist service providers and parties requesting specialist services.

When implementing information exchange based upon this European Prestandard data protection and secrecy principles must be guaranteed according to the laws actually in force in the different CEN member countries.

The method by which this European Prestandard has been developed is based on the recommendations of the CEN Technical Report "Investigation of Syntaxes for Existing Interchange Formats to be used in Healthcare" (CR 1350:1993), and as extended in the First Working Document produced by PT3-025.

This standard is intended for use by message developers. Its provisions are directly relevant to suppliers of computer systems for use in diagnostic service departments, hospitals, general practices, clinical departments and specialist clinics. Its provisions are also relevant to those planning, specifying, procuring or implementing information systems for use in hospitals, general practices, clinical departments and specialist clinics.

The main normative provisions in this European Prestandard are expressed in clauses 4 and 5 and apply to the General Message Descriptions (GMDs), clause 7.

The symbols used in this Prestandard have the meaning as defined in normative annex A for the purposes of this Prestandard only. Informative annex B provides additional explanation to the General Message Descriptions. Informative annex C gives a number of example scenarios of message use.

A supplementary document to this pr-ENV, called "Generic EDIFACT message implementation guide", provides in its first chapters the method and conformance information on how the EDIFACT messages meet the requirements of the General Message Descriptions of the pr-ENV.

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