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HEALTH INFORMATICS - TIME STANDARDS

FOR HEALTHCARE SPECIFIC PROBLEMS

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Foreword

This document (EN 12381:2005) has been prepared by Technical Committee CEN/TC 251 “Health informatics”, the secretariat of which is held by SIS.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by August 2005, and conflicting national standards shall be withdrawn at the latest by August 2005.

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Introduction

Time is an important variable in healthcare, and standards are needed about how to represent information with explicit references to time. This document is a first contribution to this harmonization process, focusing on “representation” and “explicit reference”.

Indeed, a system for Time-Standards must have as a minimum requirement the capacity to order temporal facts (*situations, events, episodes*) in three major ways, independent of any specific ontology of time itself:

- by relating situations to a calendar;
- by relating situations to “reference” situations;
- by relating events together in “before- and after-” chains.

The main reason for this threefold organization is that our everyday temporal discourse contains a variety of expressions that only with a certain artificiality can be regimented into a uniform style of analysis.

The purpose of this document is to enhance, in a perspective of machine-machine and man-machine communication, the generation of statements that are guaranteed to be understood unambiguously with respect to the time-related expressions that are embedded within them.

The purpose of this document is not to develop a full-blown temporal logic, but a standardized way of representing time-related expressions, such that all kinds of questions about the temporal organization of *situations* can be answered on the basis of the information available. Nor is it the intention of the framework presented here to provide a means to interpret the information in its original format. Interpretation of the source information is the task of the provider of information itself. The framework presented in this document allows information providers to express their time-related information in such a way that the intended meaning can be unambiguously understood by a receiver.

This of course requires the use of a “restricted”, regimented model or language, allowing the disambiguation of many time-related expressions uttered in natural language. The model (language) presented in this document is restricted enough to allow such disambiguation for time-related expressions in “traditional” medical language, but is not expressive enough to account for all time-related linguistic phenomena that can be encountered in natural language.

This document provides representational tools for “explicit” time-related information. It does not allow (nor encourage) the ad hoc interpretation of implicit temporal information. In an expression such as “diabetes since childhood”, “since childhood” is an explicit temporal reference for the diabetes, but the implicit information what “childhood” might mean (e.g. starting at the age of 2 years ?), is not addressed. However, the framework presented in this document has enough expressive power to allow a specific provider of information to state explicitly what his understanding is of “childhood”.

This document describes some conformance characteristics by means of which developers of health care information systems can label specific modules of their systems as to the degree they are compliant with the document. Although the framework itself does not deal with temporal reasoning, the conformance characteristics can be used to evaluate to what level temporal reasoning is possible with the information collected in a given system.

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