National Standards Authority of Ireland

IRISH STANDARD

ENV 1828:1995

ICS 11.060.20

National Standards
Authority of Ireland
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PERIODONTAL CURETTES, DENTAL SCALERS AND EXCAVATORS - PART 1 : GENERAL REQUIREMENTS. (ISO 13397-1 : 1995)

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EUROPEAN PRESTANDARD **ENV 1828**

PRÉNORME EUROPÉENNE

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Descriptors: medicine, data processing, classifications, codification, terminology, basic concepts

English version

Medical informatics - Structure for classification and coding of surgical procedures

Medizinische Informatik - Struktur zur Klassifikation und Kodierung chirurgischer Prozeduren

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CEN

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

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FOREWORD

This European Prestandard has been prepared under mandate BC-IT-207A given to CEN by the European Commission and the European Free Trade Association and is being submitted for approval by CEN/TC251 "Medical Informatics" of which the secretariat is held by IBN.

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

Task description of Work Item 2.4

CEN/TC251 on Medical Informatics advanced Work Item 2.4 has the title:
"Terminology and coding system of medical procedures (PROCTERM)"

The "Directory of the European standardisation requirements for health care informatics and program for the development of standards" describes the task as follows:
"Development of the structure of a classification of medical procedures (surgical, laboratory, radiology and other imaging, etc.) to be used, for example, for communication, reimbursement, scientific work, productivity reviews, and retrieval.

The structure should be formalised into a model in harmony with the results of 2.12, when they become available.
The structure will contain a description of relevant types of characteristics, used as criteria for subdivision. A reference has to be made to descriptions of these types of characteristics (for example: anatomy). If descriptions are not available suggestions should be made.

The structure will refer to:

- general guidelines and directives
- syntax definition (format) of the coding system
- descriptions of all parts of the classification
- rules and notes related to entries
- additional types of characteristics"

It was recommended to start the development of the structure by working on surgical procedures (Work Item 2.4S) and laboratory procedures (Work Item 2.4L). Depending on the results, the work could be extended later into other fields of medical care, such as radiological and other health care procedures.

Membership of PT002S

Following advice from WG2 (Health care Terminology, Semantics and Knowledge Bases) Project Team PT002S (Surgery) was established for Work Item 2.4S with experts on coding systems from five European countries:

F.J. Flier, MD., National Council for Public Health
PO. Box 7100, NL 2701 AC Zoetermeer, The Netherlands

Dr. Ch. Kolodzig, ID Information und Dokumentation im Gesundheitswesen
Am Universitätsklinikum Rudolf Virchow Spandauer Damm 130,14050 Berlin, Germany

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Prof Dr J.M. Rodrigues, Department of Public Health, University of Saint Etienne,
F 42650 St Jean Bonnefonds, France

Prof Dr F.H. Roger France, Centre for Medical Informatics, Université Catholique de Louvain,
Av. Hippocrate 10, B 1200 Brussels, Belgium

Liaison with PT003 (Models for representation of semantics in medicine) was carried out by:

Prof Dr P.F. de Vries Robbé, Department of Medical Informatics and Epidemiology, University of Nijmegen,
PO. Box 9101, NL 6500 HB Nijmegen, The Netherlands

Convenor of WG2 and observer in PT002 was:
Dr H. Olesen, Department of Clinical Chemistry KK 76.4.2, Rigshospitalet,
Tagensvej 20, DK 2200 Copenhagen N, Denmark

Relation to other standardisation activities

Within WG2, PT002S maintained liaison with PT002L on Laboratory Procedures and PT003. The terminology used in this standard was harmonised with the vocabulary of PT003.As the results of PT003 were not available when the final report was produced PT002S created its own definitions which will be updated during the ENV process in line with the consolidated results from PT003.

Outside WG2, PT002S liaised with the medical terminology and coding work done by WG1,WG3 and WG7

Within CEN, under BTS3, several TCs are working on Terminology (mainly TC257) and on medical equipment and instruments (TC285,TC215,TC205).

ISO 1087:1990 definitions were taken into account, as can be seen in the normative definitions section and in the particular definitions of PT002S.

Outside international standard organisations there are several projects under the EEC Research and Development programs that concern semantics and coding systems (ESPRIT, RACE). The most recent developments are within the AIM programme (Advanced Informatics in Medicine). PT002S started by considering the results of the SESAME project in the AIM-Exploratory phase. The task of analysing semantic aspects has been continued by GALEN (General Architecture for Language Encyclopaedias and Nomenclatures in Medicine)the available results were considered. by PT002S.

PT002S took into account the work on the Dutch and German Extensions of ICPM, the work of the NHS-CCC in the UK on the Read Codes and other European activities on classification: CDAM and THESAM (France), HCIMO and ICD-9-CM Volume III (Belgium), SNOMED (Germany), Nordic Short List of Operations (Denmark, Finland, Norway, Sweden) and the development of the Nordic Classification of Surgical Procedures.

The following products and developments outside Europe were taken into account:

- ICD-9-CM for the production of Diagnosis Related Groups (DRG's) in the U.S.A, South Korea and Taiwan.

- CPT-4 for physician fees reimbursement and ambulatory care case mix in the U.S.A.

- ICCS for quality assurance and utilisation review

- Development of a classification of medical procedures by WHO-AMRO (American region).

- Development of a classification of medical procedures by 3M Health Information Systems in the U.S.A.