C-CDA-on-FHIR Webinar Q&A

Question	Answer
Is the XML sample you are showing available online?	The exact file I showed is not, but there is a very similar CDA XML file in the Pharmacist Care Plan Sept 2017 ballot package that can be converted to FHIR using the PhCP Transforms: <u>http://www.hl7.org/documentcenter/public/ballot</u> <u>s/2017SEP/downloads/CDAR2_IG_CCDA_MTM</u> <u>CAREPLAN_R1_O1_2017SEP.zip</u>
Can the FHIR C-CDA document be extended for use as other regulatory documents; e.g., product labeling as a replacement for SPL?	Currently no, but the FDA has recently issued an RFP for assistance with various FHIR initiatives, so it is possible that a FHIR version of SPL may appear in the future.
Are the US Core profiles what came out of the Argonaut Project? Or is that something different?	Yes - The US Core Implementation Guide is based on FHIR Version 3.0.1 and defines the minimum conformance requirements for accessing patient data as defined by the Argonaut pilot implementations and the ONC 2015 Edition Common Clinical Data Set (CCDS).
Is the current build STU4?	Yes, the current build is R4. R4 is not released yet, and it is expected to be released late this year. This would not be an STU4; FHIR R4 is the first release where some resources are normative.
Will US Core be normative?	I have not heard of any plans to take US Core to normative status at this time.
Is there a website for the C-CDA to FHIR mapping project so that I can follow along with the progress?	Not yet

In a clinical document, as an example, medications or problems are in a list. The list is ordered to convey clinical meaning. I noticed the Medication section does not use the FHIR list resource. It references the medication resource directly. Why was the List resource not used?	Because Composition.section itself is based on the properties of the List resource (in FHIR DSTU1 it actually was intended to point to a List resource), there is no need to add a List since it would be largely redundant.
Are there available open source tools to transform from C-CDA to FHIR?	Yes: <u>https://github.com/lantanagroup/PhCP-</u> <u>Public-Transforms</u>
Where is information about the C-CDA to FHIR mapping project located?	Currently, there is no website for the project.
Im unclear on how CDA XML is human readable. Can you further explain?	CDA has a required narrative portion which is to be reviewed by providers. This information is stored in the <text> tag of a section within the CDA body. Typically, this is rendered through an XSLT transformation - a reference transformation can be provided.</text>
US Core profiles cover C-CDA section templates to FHIR resources mapping in theory, but in practice some sections are not covered at all, e.g. Immunization Activities in "INT" mood. Are there any plans to update US Core or FHIR own mappings at least for core MU section templates?	You will have to ask members of the US Core project, such as Brett Marquard, about future US Core work. However, Core FHIR addresses INT mood with various resources that follow the Request pattern: <u>http://hl7.org/fhir/request.html</u>
Is there way to ask specific mapping questions?	If you have more specific questions you would like to ask, you can reach out to <u>info@lantanagroup.com</u> , and we can direct them to Rick.



Can you explain FHIR servers a little bit?	At its core, FHIR contains two primary components:
	Resources - a collection of information models that define the data elements, constraints and relationships for the "business objects" most relevant to healthcare. From a model-driven architecture perspective, FHIR resources are notionally equivalent to a physical model implemented in XML or JSON. See the formal definition.
	APIs – a collection of well-defined interfaces for interoperating between two applications. Although not required, the FHIR specification targets RESTful interfaces for API implementation.
	A FHIR server acts as the system which processes the API calls and either consumes FHIR resources or responds with FHIR resources.

