

The recent announcement by the Department of Health and Human Services (HHS) to underwrite the license of SNOMED CT® establishes a new technology standard for clinical information. SNOMED CT is an acronym for Systematized Nomenclature of Medicine Clinical Terms a comprehensive “dictionary” of healthcare terminology that will allow health care organizations, clinical content developers, and information technology vendors to develop and deploy applications rich in clinical content. Use of a standard vocabulary enables research databases to be more easily combined, allowing for more efficient study of diseases and therapies. SNOMED CT also facilitates the integration of patient information with medical knowledge, which leads to better custom care for each patient and aids significantly in the development of a truly portable electronic health record.



Barry P. Chaiken, MD, MPH

Standards: Facilitating Communication Through a Common Language

The establishment of a new technology standard often sparks the development of innovative, useful products that garner widespread acceptance. In many instances, competitive organizations, with input from research and consumer groups, put aside their immediate, individual interests and work together to establish a standard on which they then can then develop future products. The potential lost opportunity associated with giving up an assumed competitive advantage associated with one or more technical specifications is more than offset by the product clarity presented to consumers. While it took several years for a standard for videotape recorders to evolve (e.g., VHS vs. Beta), significantly delaying the acceptance of such recorders, the early establishment of DVD-ROM standards allowed for the broad availability of DVD movies and their players much more quickly.

In the same way, standards have proven their worth in facilitating the spread of useful technology in healthcare. To that end, the recent announcement by the Department of Health and Human Services (HHS) to underwrite the license of SNOMED CT® offers a wonderful opportunity for clinical information technology vendors, and, in turn, their clients. HHS agreed to fund the licensing of SNOMED CT for five years for all organizations in the

United States. This demonstrates the government’s commitment to facilitating the adoption and use of clinical information technology tools. With the government choice of this clinical language standard, healthcare organizations, clinical content developers and information technology vendors can now more effectively work toward the development and deployment of applications rich in clinical content. In addition, this content-related patient information will now be more readily exchanged among software technologies. Developers of clinical knowledge (rules, guidelines, etc.) can use SNOMED CT instead of relying upon multiple proprietary terminologies. This should reduce the cost of developing clinical content and may spark further growth in this marketplace.

Some Background

SNOMED CT is an acronym for Systematized Nomenclature of Medicine Clinical Terms, a fundamentally comprehensive, coherent “dictionary” of healthcare terminology. Each of the over 344,000 concepts are related to each other, and some of these relationships are the “definitions” with which a computer works. The uniquely identified concepts are associated

with names that humans and computers can read and manage, such as asthma or adult-onset diabetes. SNOMED CT was developed by the College of American Pathologists (CAP) and is currently distributed by SNOMED International, a division of CAP.

The effort to promote standards grew out of the National Health Information Infrastructure (NHII) initiative set forth by the federal government to improve the effectiveness, efficiency and overall quality of health care in the United States. NHII covers three overlapping circles of influence: personal health, health care delivery, and public health. NHII identified the current lack of standards as one of several barriers to making the initiative successful.

In March 2003, supporting NHII and as part of the Consolidated Health Informatics initiative (CHI), HHS, the Department of Defense, and the Department of Veteran Affairs announced the first set of uniform standards for the exchange of clinical health information to be adopted across the federal government. CHI is the health care part of a federal effort to make it easier for citizens and businesses to interact with the government, save taxpayer dollars and streamline citizen-to-government transactions. In June 2002, NHII held its first conference bringing together representatives from all stakeholders in health care to discuss issues and make recommendations on future NHII direction.

Standards Enhance Quality and Patient Safety

The movement toward standards in clinical vocabulary will have a strong positive impact on quality of care and patient safety by facilitating the adop-

tion and interoperability of clinical information technology. Use of a standard vocabulary facilitates the integration of patient information with medical knowledge, which leads to better custom care for each patient. A standard vocabulary will also enable research

databases to be more easily combined, allowing for more efficient study of diseases and therapies.

For years, software vendors struggled to develop and deploy clinical applications that included comprehensive clinical vocabularies. Most vendors

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rightfully focused on processes, workflow and application functionality, leaving few resources for costly investment in vocabularies. Instead, vocabulary richness reflected the immediate requirements of the various applications rather than the considerably broader need of patient care and electronic health records. These customized vocabularies encountered great difficulty when trying to exchange information

among applications and lacked the ongoing support necessary to make them truly longitudinal, comprehensive and "alive" (through continuous updating and expansion).

With the acceptance of SNOMED CT by HHS, a comprehensive, robust and fully supported clinical vocabulary standard now exists in the United States. In addition, the five-year funding of the

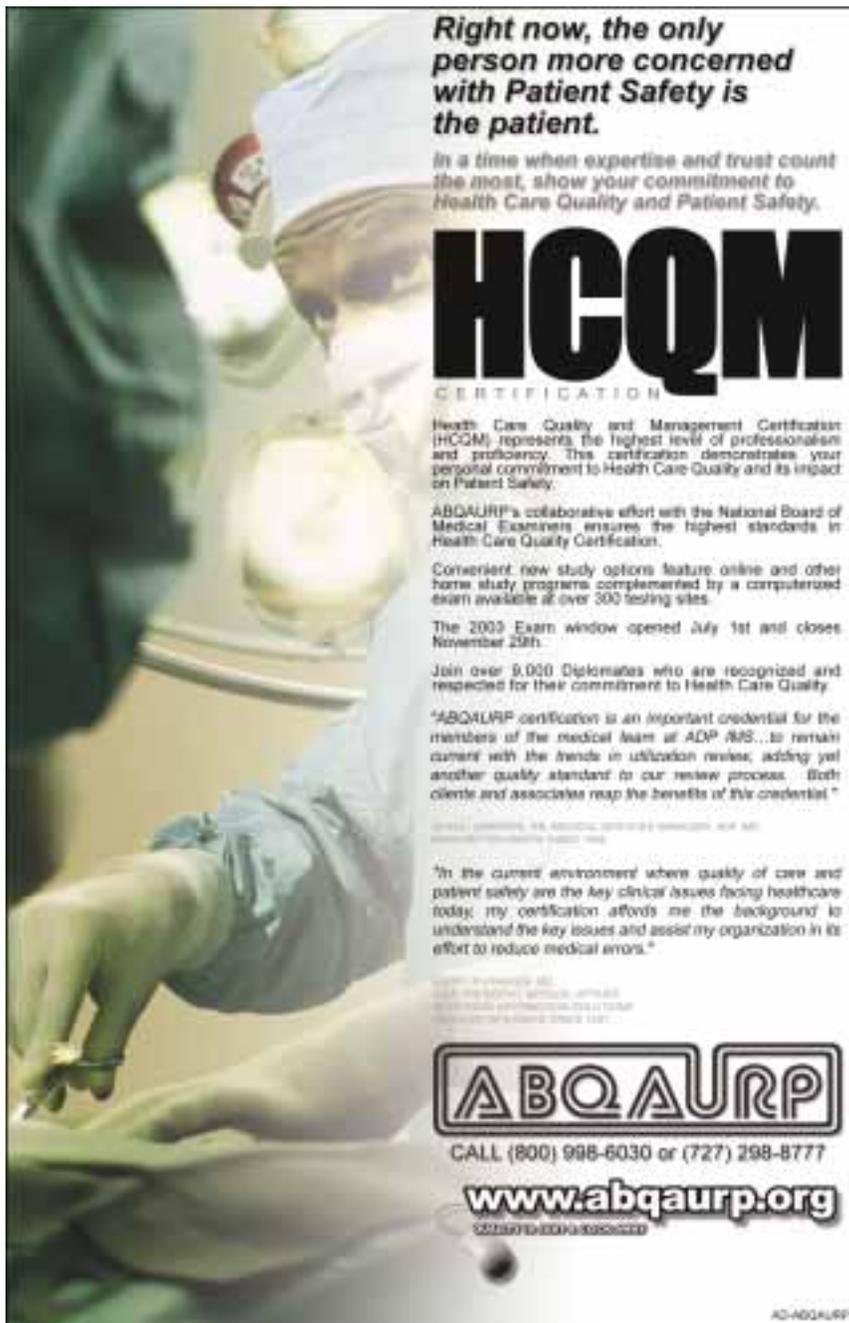
licensing fees by the federal government removes any financial barriers to acceptance of the vocabulary by health care organizations and information technology vendors. Now, vendors can solely focus on the further development of their technologies to better take advantage of these standards. Similarly, provider organizations can apply their efforts to the deployment of these more clinically rich solutions.

Overall, solutions will emerge that help providers reduce time documenting care and increase time with patients. In addition, clinical decision support systems will become more affordable and maintainable, which will improve their ability to help clinicians enhance quality as well as reduce variability and error rates.

Use of robust clinical information technology that can retrieve and populate data sets across disparate vendor applications also provides healthcare organizations with the opportunity to leverage existing technology, add additional functionality through the rollout of more sophisticated applications, and enhance the detail and accuracy of clinical information provided to physicians and nurses for the care of their patients.

Standardization of clinical descriptions within applications now allows the interchange of this information among solutions with the assurance that a clinical description in one database is the same as that in another. Once existing applications have their clinical vocabulary updated, newly added solutions that use SNOMED CT can be mapped to the existing application, preserving that initial investment while expanding overall clinical functionality.

With the introduction of this vocabulary standard, the environment currently exists for the first real steps in the development of a truly portable electronic health record. Developers can now build robust applications to this standard, and healthcare organizations can combine applications to build that



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electronic health record. Since the vocabularies match, the task of figuring out how to store and exchange patient information is much more straightforward.

For example, a patient with adult onset diabetes is defined and described in the same manner irrespective of the clinical system used in each care setting. In a clinic, the terms used to define the diagnosis and describe the extent of any skin lesions or vision loss will be the same as those used in the emergency department or the hospital. All the clinical descriptions of the patient become interchangeable among systems, delivering a common foundation for communication.

Over the next few years, patients and the healthcare industry itself will benefit from the newly accelerated advancement of clinical information technology solutions facilitated by the adoption of a clinical vocabulary standard. ☞

Barry P. Chaiken, MD, MPH, vice president of medical affairs, McKesson Corporation, has more than 17 years of experience in medical research, epidemiology, continuous quality improvement, utilization management, risk management, healthcare consulting and public health. Dr. Chaiken is currently on the Board of Directors of ABQAURP

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