

Interoperability Changes Everything

Computable and interoperable clinical information will impact every aspect of care in the US, leading to a revolution in decision support, research and payment models. To change outcomes, change the incentives.

Like the proverbial dog that caught the car, it is understood that the exchange of vast number of narrative and computer-generated documents produces a needle in the haystack nightmare that impacts patient safety and exposes clinicians to the legal risks of possessing patient information of which they are unaware and provides no basis for decision support and quality metrics.

The solution is the exchange of interoperable structured data using precise specifications provided through the emerging family of standards from HL7; Fast Healthcare Interoperability Resources (FHIR), Clinical Information Modeling Initiative Models (CIMI) and Clinical Quality Language (CQL).

These three sister standards deliver consistent and reliable exchange **and processing** of complex medical records. CIMI provides a powerful schema language capable of describing the underlying meaning of data, FHIR provides the means to exchange information using lightweight, but secure, transactions without the high cost and overhead of classic HL7 v2. And CQL provides a standardized language for clinical decision support rules, medical reporting and application development - this represents clinical knowledge that is **portable across systems and durable over time**.

Cancer-Interoperability (CI) is dedicated to making this magic real in the treatment of cancer

Eight medical societies, five US regulatory agencies, a dozen software vendors and dozens of elite cancer specialists - have come together to synthesize the clinical knowledge necessary to capture, exchange and perform the advanced computations needed to turn the tide on this devastating and costly disease.

CI has partnered with HL7 and IHE, and has the enthusiast support of the Healthcare Services Platform Consortium (HSPC), Clinical Information Interoperability Council (CiiC) and the Physicians Consortium for Performance Improvement (PCPI). These organizations and individuals have dedicated themselves to the mission of improving the outlook and experience of the cancer patient and the effectiveness of clinical teams that fight for them.

In 2018, PenRad has successfully completed two cycles of HL7 balloting (May & September), and are shooting for Standard for Trial Use (STU) status with the next and final cycle.

For more information on Cancer Interoperability, please visit booth #3904 at the 2018 RSNA or call **PenRad** at (763) 478-3388.

