

SEMINARIO WEB



FHIR Serie Fundacional

CO-ORGANIZADO POR RECAINSA Y DIGITAL
SQUARE



Agenda y estructura

1. Introducción y estructura de la presentación
2. Áreas de normalización
3. Conceptos básicos de FHIR - Recapitulación + inmersión superficial
 1. Por qué FHIR, qué es FHIR, tipos de recursos, tipos de datos, métodos de intercambio, terminologías, búsqueda; preguntas y respuestas
 2. Integración - referencias, contenido, paquetes, documentos
 3. Cómo creamos y ampliamos FHIR; preguntas y respuestas
 4. Comunidad FHIR, herramientas, documentación
4. Preguntas y respuestas, debate, próximas actividades

Observaciones y descargo de responsabilidad

- FHIR® es la marca registrada de Health Level Seven® (HL7®) International.
- El uso de la marca FHIR® no constituye la aprobación de este curso/producto/servicio por parte de HL7®.
- Esta no es una formación oficial de HL7. Para este tipo de oportunidades de formación, le animamos a
 - <http://www.hl7.org/training>

Objetivos

- Esta presentación es una recopilación de materiales de libre acceso.
- Esta presentación se comparte bajo una licencia Creative Commons Attribution 4.0 (CC BY 4.0) - (se puede compartir y adaptar si se dan los créditos)
- Nuestro objetivo es ayudar / refrescar las habilidades de navegación y descubrimiento. El contenido utilizado no es exhaustivo, y pretende ser más amplio que profundo.
- Disponemos de poco tiempo, pero intentaremos atender preguntas - y valoraremos tus aportaciones para próximas sesiones.

Antes de empezar...

- **El resultado más importante de todo esto es que colaboramos, experimentamos y participamos**
 - <https://chat.fhir.org>
- RECAINSA está en el proceso de creación y oficialización de la comunidad FHIR CAM - promoción de eventos regionales y globales, interacción con la comunidad global...
 - Contacto administrativo RECAINSA: Joseline Carias
 - Contacto comunidad RECAINSA: Alejandro Benavides

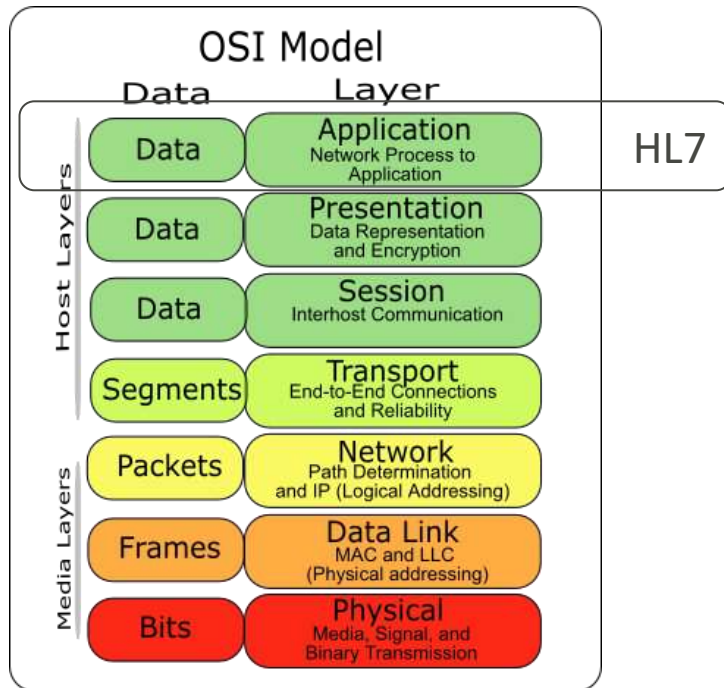
Áreas de normalización



Motivaciones para la normalización

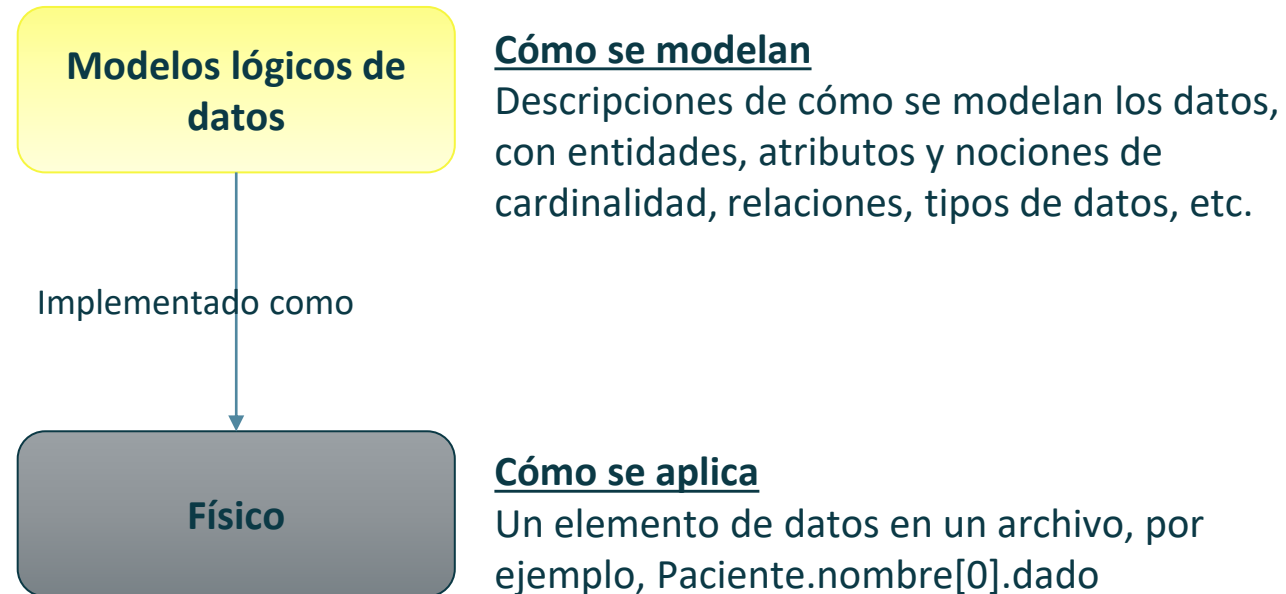
- Ser conforme a la norma X
- Preparar la internacionalización de productos
- Ser compatible con la solución Y
- Normalizar los datos
- Reducir la complejidad al tiempo que se admite la variedad

Situación: Niveles / tipos de normas



| | Why | How | What | Who | Where | When |
|------------|---------------------|--------------------------------|---------------------------|---|-----------------------------|---------------------|
| Contextual | Goal List | Process List | Material List | Organisational Unit & Role List | Geographical Locations List | Event List |
| Conceptual | Goal Relationship | Process Model | Entity Relationship Model | Organisational Unit & Role Relationship Model | Locations Model | Event Model |
| Logical | Rules Diagram | Process Diagram | Data Model Diagram | Role Relationship Diagram | Locations Diagram | Event Diagram |
| Physical | Rules Specification | Process Function Specification | Data Entity Specification | Role Specification | Location Specification | Event Specification |
| Detailed | Rules Details | Process Details | Data Details | Role Details | Location Details | Event Details |

Niveles de información



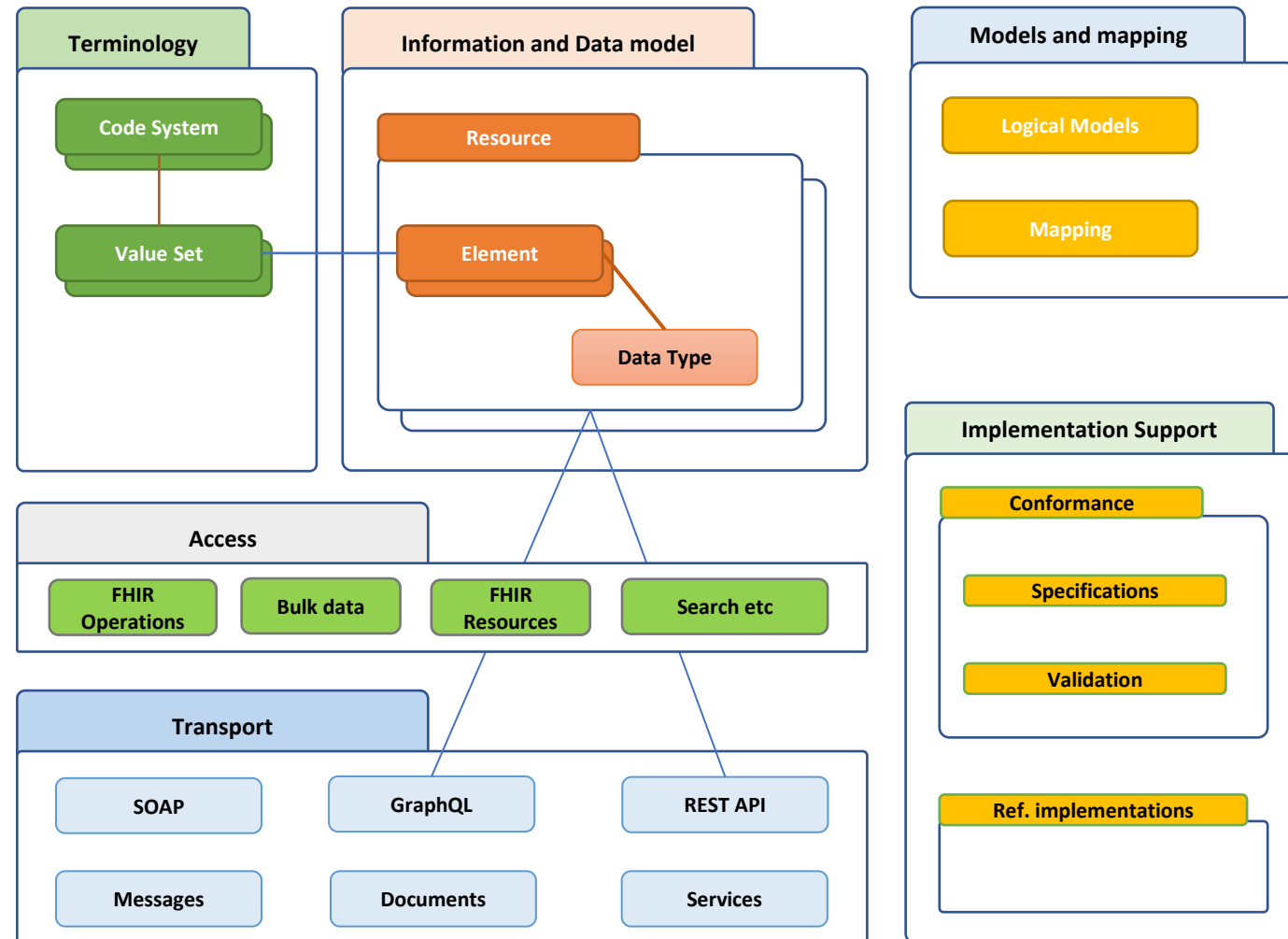
Qué es FHIR?

- Fast Healthcare Interoperability Resources
- Una especificación técnica para el intercambio de datos
- Especificación computable
- Basada en tecnologías y formatos estándar (JSON, XML, REST...)
- Define objetos de datos estándar (recursos) que pueden componerse para formar cualquier tipo de comunicación: desde la notificación de una medición de la tensión arterial hasta la consulta de artículos disponibles en inventario...
- Aborda algunos de los retos de la normalización
- Con el apoyo de una amplia comunidad global

Bigger picture: FHIR → Normas → Salud Digital

- **FHIR es no apenas una norma técnica, pero una comunidad, un ecosistema, y una (nueva) forma de hacer y gerenciar la Salud Digital**
- Otras sesiones
 - FHIR Profiling
 - FHIR y Terminologia
 - FHIR Search
 - FHIR ImplementationGuide
 - Gobernanza de FHIR y normas


La norma HL7® FHIR



Publicación FHIR (siempre) en línea

<http://hl7.org/fhir>

<http://build.fhir.org>

Release 4

HomeGetting StartedDocumentationResourcesProfilesExtensionsOperationsTerminologies

Home

This page is part of the FHIR Specification (v4.0.1: R4 - Mixed Normative and STU). This is the current published version. For a full list of available versions, see the [Directory of published versions](#).

Welcome to FHIR®

FHIR is a standard for health care data exchange, published by HL7®.

First time here?
See the [executive summary](#), the [developer's introduction](#), [clinical introduction](#), or [architect's introduction](#), and then the [FHIR overview / roadmap & timelines](#). See also the [open license](#) (and don't miss the [full Table of Contents](#) and the [Community Credits](#) or you can [search this specification](#)).

Technical Corrections:

- 4.0.1, Oct-30 2019: Corrections to invariants & generated conformance resources, and add [Advisory Normative Status Notes](#)

Level 1 Basic framework on which the specification is built

Foundation

Base Documentation, XML, JSON, Data Types, Extensions

Level 2 Supporting implementation and binding to external specifications

Implementer Support

Downloads, Version Mgmt, Use Cases, Testing

Security & Privacy

Security, Consent, Provenance, AuditEvent

Conformance

StructureDefinition, CapabilityStatement, ImplementationGuide, Profiling

Terminology

CodeSystem, ValueSet, ConceptMap, TerminologySvc

Exchange

REST API + Search, Documents, Messaging, Services, Databases

Level 3 Linking to real world concepts in the healthcare system

Administration

Patient, Practitioner, CareTeam, Device, Organization, Location, Healthcare Service

Level 4 Record-keeping and Data Exchange for the healthcare process

Clinical

Allergy, Problem, Procedure, CarePlan/Goal, ServiceRequest, Family History, RiskAssessment, etc.

Diagnostics

Observation, Report, Specimen, ImagingStudy, Genomics, Specimen, ImagingStudy, etc.

Medications

Medication, Request, Dispense, Administration, Statement, Immunization, etc.

Workflow

Introduction + Task, Appointment, Schedule, Referral, PlanDefinition, etc.

Financial

Claim, Account, Invoice, ChargeItem, Coverage + Eligibility Request + Response, ExplanationOfBenefit, etc.

Level 5 Providing the ability to reason about the healthcare process

Clinical Reasoning

Library, PlanDefinition & GuidanceResponse, Measure/MeasureReport, etc.

External Links:

Implementation Guides

Specifications based on the FHIR standard

- Published by HL7, Affiliates & FHIR Foundation
- Other IGs (FHIR Confluence)

FHIR Foundation

Enabling health interoperability through FHIR

- Community Forum + FHIR Chat
- Public Test Servers & Software
- Blogs that cover FHIR
- FHIR Confluence

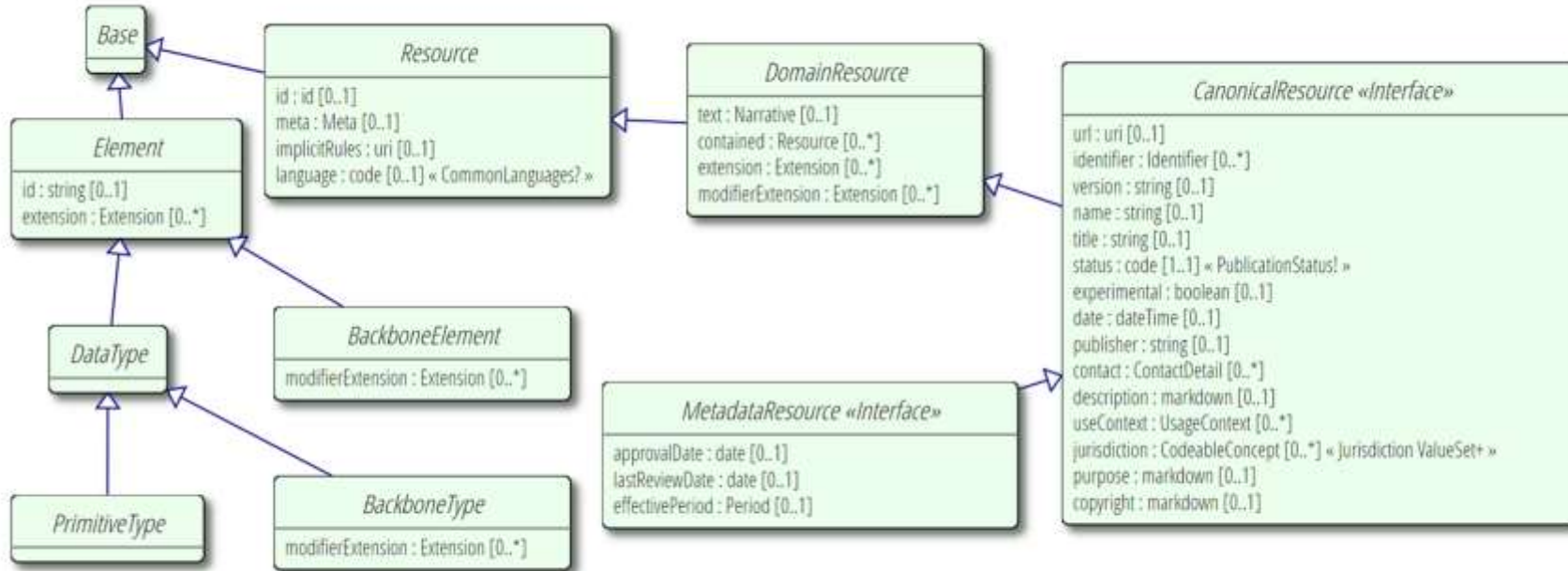
Translations

Note that translations are not always up to date

- Russian
- Chinese
- Japanese

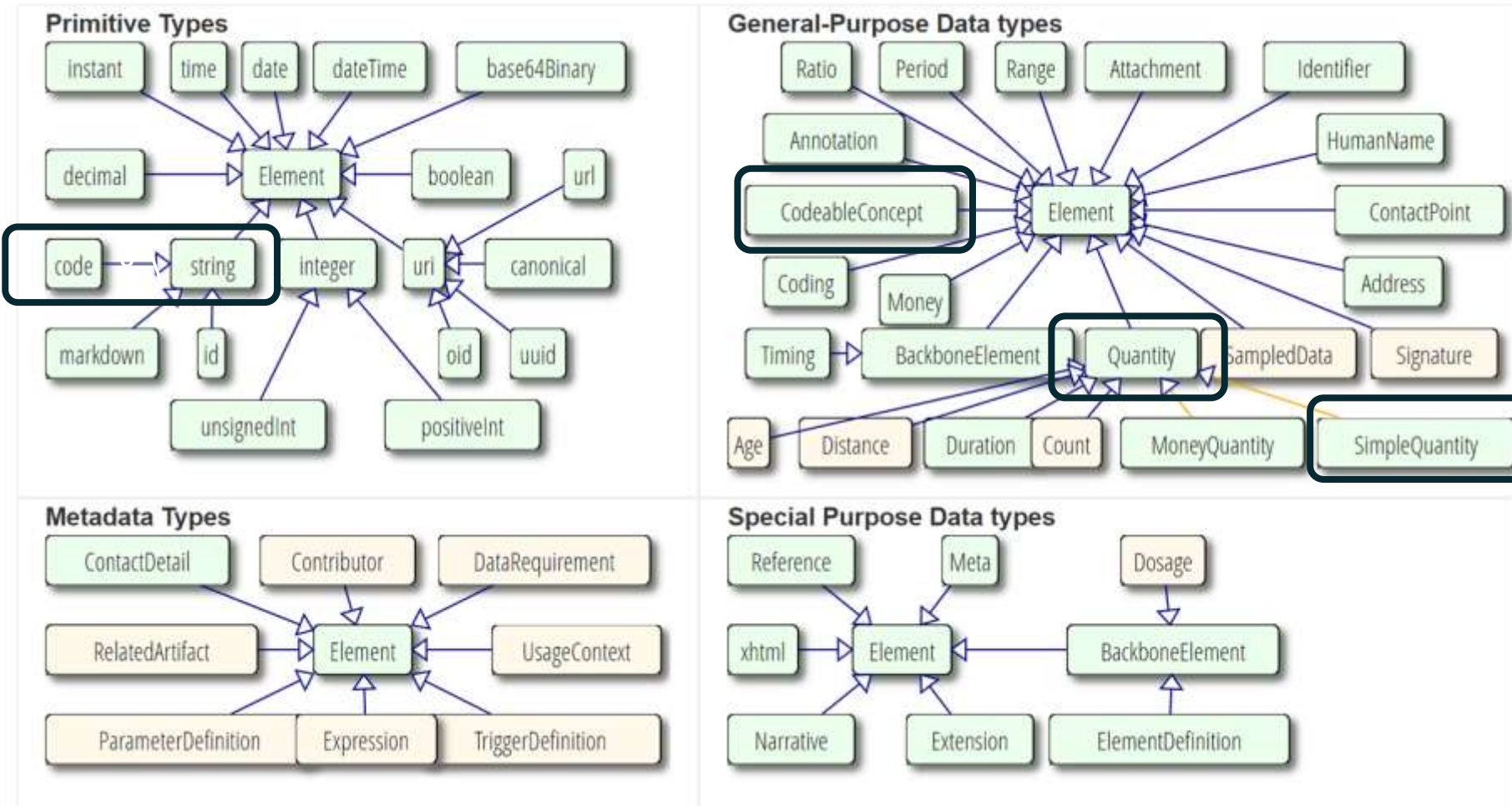


Tipos de estructuras en FHIR



<http://build.fhir.org/types.html>

Tipos de datos



<http://build.fhir.org/datatypes.html>

Tipos de datos vs instancias

```
{
  "resourceType": "Patient",
  "id": "43961584-bf55-4ddf-9462-a37465fe4440",
  "identifier": [
    {
      "type": {
        "coding": [
          {
            "system": "http://terminology.hl7.org/CodeSystem/v2-0203/",
            "code": "MR",
            "display": "Medical record number"
          }
        ]
      },
      "system": "http://myhospital.org/identifiers/patients",
      "value": "P0000001"
    }
  ],
  "name": [
    {
      "family": "Doe",
      "given": [
        "John"
      ]
    }
  ],
  "gender": "male",
  "birthDate": "1971-04-28T00:20:00Z"
}
```

| Name | Flags | Card. | Type | Description & Constraints |
|------------|-------------------|-------|-------------------------|---|
| Identifier | I N | | Element | An identifier intended for computation Elements defined in Ancestors: id , extension usual official temp secondary old (If known) IdentifierUse (Required) |
| use | ? I | 0..1 | code | Description of Identifier IdentifierType (Extensible) |
| type | I | 0..1 | CodeableConcept | The namespace for the identifier value |
| system | I | 0..1 | uri | The value that is unique |
| value | I | 0..1 | string | Time period when id is/was valid for use |
| period | I | 0..1 | Period | Organization that issued id (may be just text) |
| assigner | I | 0..1 | Reference(Organization) | |

Documentation for this format

| Name | Flags | Card. | Type | Description & Constraints |
|-----------------|-------------------|-------|---------|--|
| CodeableConcept | I N | | Element | Concept - reference to a terminology or just text Elements defined in Ancestors: id , extension Code defined by a terminology system |
| coding | I | 0..* | Coding | Plain text representation of the concept |
| text | I | 0..1 | string | |

| Name | Flags | Card. | Type | Description & Constraints |
|--------------|-------------------|-------|---------|--|
| Coding | I N | | Element | A reference to a code defined by a terminology system Elements defined in Ancestors: id , extension |
| system | I | 0..1 | uri | Identity of the terminology system |
| version | I | 0..1 | string | Version of the system - if relevant |
| code | I | 0..1 | code | Symbol in syntax defined by the system |
| display | I | 0..1 | string | Representation defined by the system |
| userSelected | I | 0..1 | boolean | If this coding was chosen directly by the user |

| Name | Flags | Card. | Type | Description & Constraints |
|-----------|-------------------|-------|---------|---|
| HumanName | I N | | Element | Name of a human - parts and usage Elements defined in Ancestors: id , extension usual official temp nickname anonymous old maiden NameUse (Required) |
| use | ? I | 0..1 | code | Text representation of the full name |
| text | I | 0..1 | string | Family name (often called 'Surname') |
| family | I | 0..1 | string | Given names (not always 'first'). Includes middle names |
| given | I | 0..* | string | This repeating element order: Given Names appear in the correct order for presenting the name |
| prefix | I | 0..* | string | Parts that come before the name |
| suffix | I | 0..* | string | This repeating element order: Prefixes appear in the correct order for presenting the name |
| period | I | 0..1 | Period | Parts that come after the name |
| | I | 0..1 | Period | This repeating element order: Suffixes appear in the correct order for presenting the name |
| | I | 0..1 | Period | Time period when name was/is in use |

Tipos de recursos FHIR

- Se definen computacionalmente
- Pueden extenderse (como la mayoría de los tipos)

<http://hl7.org/fhir/resourcelist.html>

HL7 FHIR Release 4

Home Getting Started Documentation Resources Profiles Extensions Operations Terminologies

Table of Contents > Resources

This page is part of the FHIR Specification (v4.0.1: R4 - Mixed format and STU). This is the current published version. For a full list of available versions, see the Directory of published versions.

1.2 Resource Index

| | | |
|------------------------------------|---------------------|-------------------------------|
| FHIR Infrastructure (F Work Group) | Maturity Level: N/A | Standards Status: Informative |
|------------------------------------|---------------------|-------------------------------|

This page is provided to help find resources quickly. There is also a more detailed classification, ontology, and description. For background to the layout on the layers in this page, see the Architect's Overview. See also the abstract Base Resources Resource and DomainResource.

Categorized Alphabetical R2 Layout By Maturity Security Category By Standards Status By Committee

| | | | | | |
|-------------------|---|---|--|---|---|
| Foundation | Conformance <ul style="list-style-type: none">CapabilityStatement NStructureDefinition N 1ImplementationGuide 1SearchParameter 3MessageDefinition 1OperationDefinition NCompartmentDefinition 1StructureMap 2GraphDefinition 1ExampleScenario 0 | Terminology <ul style="list-style-type: none">CodeSystem NValueSet NConceptMap 3NamingSystem 1TerminologyCapabilities 0 | Security <ul style="list-style-type: none">Provenance 3AuditEvent 3Consent 2 | Documents <ul style="list-style-type: none">Composition 2DocumentManifest 2DocumentReference 3CatalogEntry 0 | Other <ul style="list-style-type: none">Basic 1Binary NBundle NLinkage 0MessageHeader 4OperationOutcome NParameters NSubscription 3 |
| Base | Individuals <ul style="list-style-type: none">Patient NPractitioner 3PractitionerRole 2RelatedPerson 2Person 2Group 1 | Entities #1 <ul style="list-style-type: none">Organization 3OrganizationAffiliation 0HealthcareService 2Endpoint 2Location 3 | Entities #2 <ul style="list-style-type: none">Substance 2BiologicallyDerivedProduct 0Device 2DeviceMetric 1 | Workflow <ul style="list-style-type: none">Task 2Appointment 3AppointmentResponse 3Schedule 3Slot 3VerificationResult 0 | Management <ul style="list-style-type: none">Encounter 2EpisodeOfCare 2Flag 1List 1Library 2 |
| Clinical | Summary <ul style="list-style-type: none">AllergyIntolerance 3AdverseEvent 0Condition (Problem) 3Procedure 3FamilyMemberHistory 2ClinicalImpression 0DetectedIssue 1 | Diagnostics <ul style="list-style-type: none">Observation NMedia 1DiagnosticReport 3Specimen 2BodyStructure 1ImagingStudy 3QuestionnaireResponse 3MolecularSequence 1 | Medications <ul style="list-style-type: none">MedicationRequest 3MedicationAdministration 2MedicationDispense 2MedicationStatement 3Medication 3MedicationKnowledge 0Immunization 3ImmunizationEvaluation 0ImmunizationRecommendation 1 | Care Provision <ul style="list-style-type: none">CarePlan 2CareTeam 2Goal 2ServiceRequest 2NutritionOrder 2VisionPrescription 2RiskAssessment 1RequestGroup 2 | Request & Response <ul style="list-style-type: none">Communication 2CommunicationRequest 2DeviceRequest 1DeviceUseStatement 0GuidanceResponse 2SupplyRequest 1SupplyDelivery 1 |
| Financial | Support <ul style="list-style-type: none">Coverage 2CoverageEligibilityRequest 2CoverageEligibilityResponse 2EnrollmentRequest 0EnrollmentResponse 0 | Billing <ul style="list-style-type: none">Claim 2ClaimResponse 2Invoice 0 | Payment <ul style="list-style-type: none">PaymentNotice 2PaymentReconciliation 2 | General <ul style="list-style-type: none">Account 2ChargeItem 0ChargeItemDefinition 0Contract 1ExplanationOfBenefit 2InsurancePlan 0 | |
| | Public Health & Research <ul style="list-style-type: none">ResearchStudy 1ResearchSubject 1 | Definitional Artifacts <ul style="list-style-type: none">ActivityDefinition 2DeviceDefinition 0 | Evidence-Based Medicine <ul style="list-style-type: none">ResearchDefinition 0ResearchElementDefinition 0 | Quality Reporting & Testing <ul style="list-style-type: none">Measure 2MeasureReport 2 | Medication Definition <ul style="list-style-type: none">MedicinalProduct 0MedicinalProductAuthorization 0 |

Tipos de recursos "especiales" de FHIR

- Recursos fundacionales: se utilizan para definir aspectos fundamentales de FHIR (recursos, mapas, operaciones, capacidades)

| Foundation | Conformance | Terminology | Security | Documents | Other |
|------------|---|---|---|---|--|
| | <ul style="list-style-type: none">• CapabilityStatement N• StructureDefinition N• ImplementationGuide 1• SearchParameter 3• MessageDefinition 1• OperationDefinition N• CompartmentDefinition 1• StructureMap 2• GraphDefinition 1• ExampleScenario 0 | <ul style="list-style-type: none">• CodeSystem N• ValueSet N• ConceptMap 3• NamingSystem 1• TerminologyCapabilities 0 | <ul style="list-style-type: none">• Provenance 3• AuditEvent 3• Consent 2 | <ul style="list-style-type: none">• Composition 2• DocumentManifest 2• DocumentReference 3• CatalogEntry 0 | <ul style="list-style-type: none">• Basic 1• Binary N• Bundle N• Linkage 0• MessageHeader 4• OperationOutcome N• Parameters N• Subscription 3 |

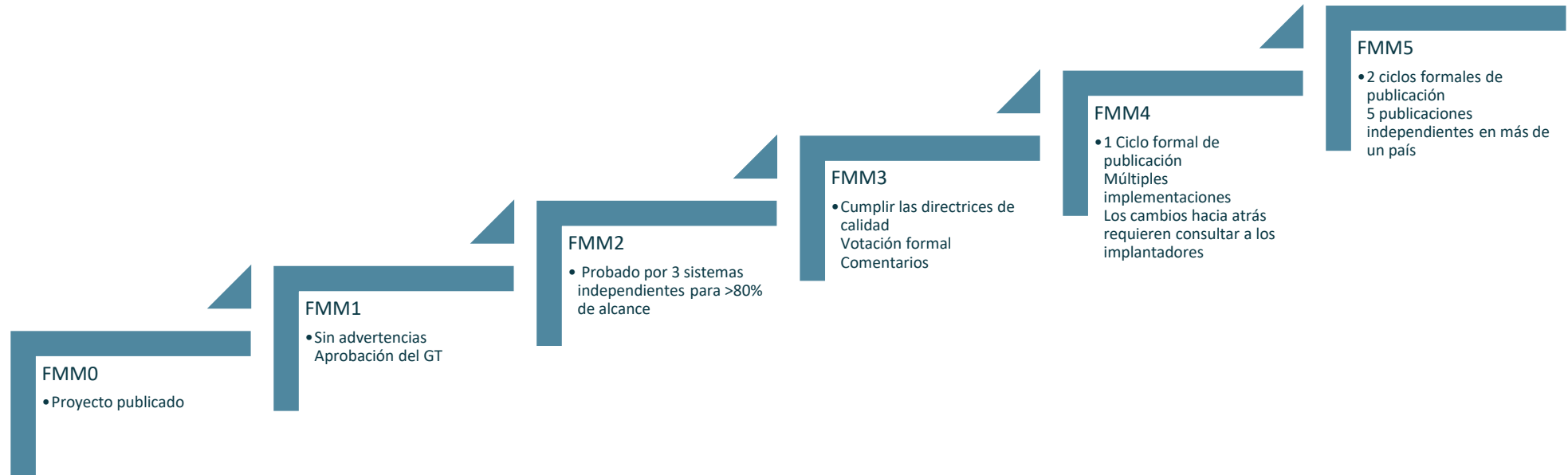
<http://hl7.org/fhir/resourcelist.html>

Proceso de desarrollo de FHIR

- Los grupos de trabajo de HL7 analizan continuamente las necesidades y mejoran el contenido estándar: recursos, orientación, etc.
- La comunidad HL7 y FHIR mejora continuamente el ecosistema y apoya la adopción.
- Los grupos de trabajo internacionales y nacionales pueden hacer lo mismo.

Niveles de madurez de FHIR

- Los recursos FHIR (es decir, todos los artefactos de conformidad) tienen un nivel de modelo de madurez FHIR (FMM)

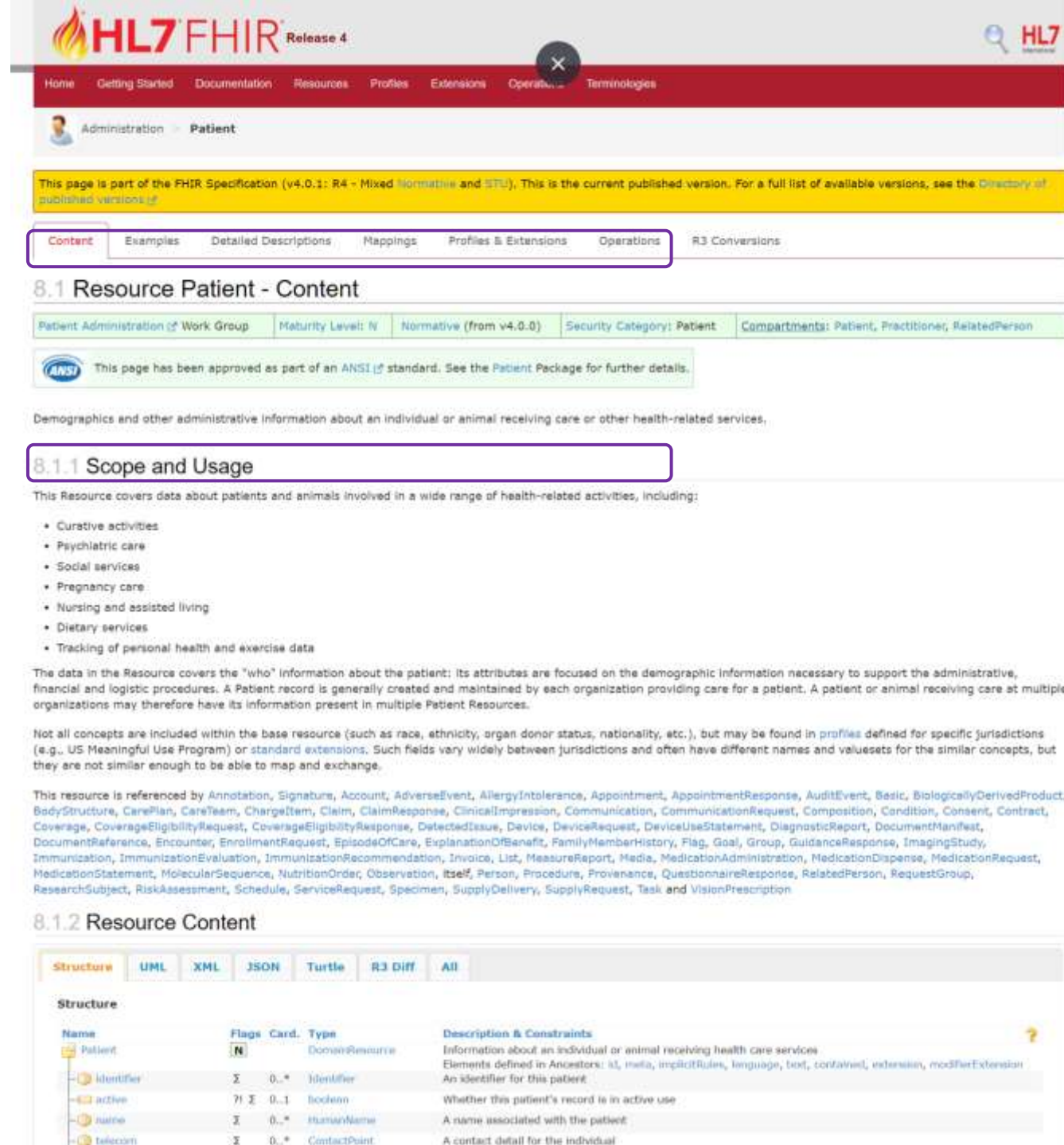


- Los comentarios de los responsables de la aplicación son bienvenidos y forman parte del proceso

Recurso Patient

- Ámbito de aplicación y utilización

<http://hl7.org/fhir/patient.html>



The screenshot displays the HL7 FHIR Patient resource page. At the top, the HL7 FHIR logo and 'Release 4' are visible. A navigation bar includes links for Home, Getting Started, Documentation, Resources, Profiles, Extensions, Operations, and Terminologies. Below this, a breadcrumb trail shows 'Administration' and 'Patient'. A yellow banner states: 'This page is part of the FHIR Specification (v4.0.1: R4 - Mixed Normative and STL). This is the current published version. For a full list of available versions, see the Directory of published versions of'. A tabbed interface shows 'Content' as the active tab, with other tabs for Examples, Detailed Descriptions, Mappings, Profiles & Extensions, Operations, and R3 Conversions. The main heading is '8.1 Resource Patient - Content'. Below it, a table lists attributes: Patient Administration (with a Work Group link), Maturity Level (N), Normative (from v4.0.0), Security Category (Patient), and Compartments (Patient, Practitioner, RelatedPerson). An ANSI logo and text indicate approval as part of an ANSI standard, with a link to the Patient Package. A paragraph describes the resource as 'Demographics and other administrative information about an individual or animal receiving care or other health-related services.' Section '8.1.1 Scope and Usage' is highlighted with a purple box. It states the resource covers data about patients and animals involved in a wide range of health-related activities, including: Curative activities, Psychiatric care, Social services, Pregnancy care, Nursing and assisted living, Dietary services, and Tracking of personal health and exercise data. A paragraph explains that the data covers the 'who' information about the patient, focusing on demographic information necessary to support administrative, financial, and logistic procedures. Another paragraph notes that not all concepts are included within the base resource (such as race, ethnicity, organ donor status, nationality, etc.), but may be found in profiles defined for specific jurisdictions (e.g., US Meaningful Use Program) or standard extensions. A long list of resources referenced by the Patient resource is provided. Section '8.1.2 Resource Content' is also visible, with tabs for Structure, UML, XML, JSON, Turtle, R3 Diff, and All. The 'Structure' tab is active, showing a tree view of the Patient resource with fields like Identifier, active, name, and telecom, each with its cardinality, flags, and type.

HL7 FHIR Release 4

Home Getting Started Documentation Resources Profiles Extensions Operations Terminologies

Administration Patient

This page is part of the FHIR Specification (v4.0.1: R4 - Mixed Normative and STL). This is the current published version. For a full list of available versions, see the Directory of published versions of.

Content Examples Detailed Descriptions Mappings Profiles & Extensions Operations R3 Conversions

8.1 Resource Patient - Content

| | | | | |
|---|-----------------------------------|-------------------------|--|--|
| Patient Administration Work Group | Maturity Level: N | Normative (from v4.0.0) | Security Category: Patient | Compartments: Patient , Practitioner , RelatedPerson |
|---|-----------------------------------|-------------------------|--|--|

This page has been approved as part of an [ANSI](#) standard. See the [Patient Package](#) for further details.

Demographics and other administrative information about an individual or animal receiving care or other health-related services.

8.1.1 Scope and Usage

This Resource covers data about patients and animals involved in a wide range of health-related activities, including:

- Curative activities
- Psychiatric care
- Social services
- Pregnancy care
- Nursing and assisted living
- Dietary services
- Tracking of personal health and exercise data

The data in the Resource covers the "who" information about the patient: its attributes are focused on the demographic information necessary to support the administrative, financial and logistic procedures. A Patient record is generally created and maintained by each organization providing care for a patient. A patient or animal receiving care at multiple organizations may therefore have its information present in multiple Patient Resources.

Not all concepts are included within the base resource (such as race, ethnicity, organ donor status, nationality, etc.), but may be found in profiles defined for specific jurisdictions (e.g., US Meaningful Use Program) or standard extensions. Such fields vary widely between jurisdictions and often have different names and valuesets for the similar concepts, but they are not similar enough to be able to map and exchange.

This resource is referenced by Annotation, Signature, Account, AdverseEvent, AllergyIntolerance, Appointment, AppointmentResponse, AuditEvent, Basic, BiologicallyDerivedProduct, BodyStructure, CarePlan, CareTeam, ChargeItem, Claim, ClaimResponse, ClinicalImpression, Communication, CommunicationRequest, Composition, Condition, Consent, Contract, Coverage, CoverageEligibilityRequest, CoverageEligibilityResponse, DetectedIssue, Device, DeviceRequest, DeviceUseStatement, DiagnosticReport, DocumentManifest, DocumentReference, Encounter, EnrollmentRequest, EpisodeOfCare, ExplanationOfBenefit, FamilyMemberHistory, Flag, Goal, Group, GuidanceResponse, ImagingStudy, Immunization, ImmunizationEvaluation, ImmunizationRecommendation, Invoice, List, MeasureReport, Media, MedicationAdministration, MedicationDispense, MedicationRequest, MedicationStatement, MolecularSequence, NutritionOrder, Observation, **Itself**, Person, Procedure, Provenance, QuestionnaireResponse, RelatedPerson, RequestGroup, ResearchSubject, RiskAssessment, Schedule, ServiceRequest, Specimen, SupplyDelivery, SupplyRequest, Task and VisionPrescription.

8.1.2 Resource Content

Structure UML XML JSON Turtle R3 Diff All

Structure

| Name | Flags | Card. | Type | Description & Constraints |
|------------|-------|-------|----------------|--|
| Patient | | | DomainResource | Information about an individual or animal receiving health care services Elements defined in Ancestors: id , meta , implicitRules , language , text , contained , extension , modifierExtension |
| Identifier | | 0..* | Identifier | An identifier for this patient |
| active | | 0..1 | boolean | Whether this patient's record is in active use |
| name | | 0..* | HumanName | A name associated with the patient |
| telecom | | 0..* | ContactPoint | A contact detail for the individual |

Contenido de los recursos

8.1.2 Resource Content

Structure

UML

XML

JSON

Turtle

R3 Diff

All

Structure

| Name | Flags | Card. | Type | Description & Constraints |
|----------------------|-------|-------|---|---|
| Patient | | | DomainResource | Information about an individual or animal receiving health care services Elements defined in Ancestors: id, meta, implicitRules, language, text, contained, extension, modifierExtension |
| identifier | | 0..* | Identifier | An identifier for this patient |
| active | | 0..1 | boolean | Whether this patient's record is in active use |
| name | | 0..* | HumanName | A name associated with the patient |
| telecom | | 0..* | ContactPoint | A contact detail for the individual |
| gender | | 0..1 | code | male female other unknown AdministrativeGender (Required) |
| birthDate | | 0..1 | date | The date of birth for the individual |
| deceased[x] | | 0..1 | | Indicates if the individual is deceased or not |
| deceasedBoolean | | | boolean | |
| deceasedDateTime | | | dateTime | |
| address | | 0..* | Address | An address for the individual |
| maritalStatus | | 0..1 | CodeableConcept | Marital (civil) status of a patient MaritalStatus (Extensible) |
| multipleBirth[x] | | 0..1 | | Whether patient is part of a multiple birth |
| multipleBirthBoolean | | | boolean | |
| multipleBirthInteger | | | integer | |
| photo | | 0..* | Attachment | Image of the patient |
| contact | | 0..* | BackboneElement | A contact party (e.g. guardian, partner, friend) for the patient + Rule: SHALL at least contain a contact's details or a reference to an organization |
| relationship | | 0..* | CodeableConcept | The kind of relationship Patient Contact Relationship (Extensible) |
| name | | 0..1 | HumanName | A name associated with the contact person |
| telecom | | 0..* | ContactPoint | A contact detail for the person |
| address | | 0..1 | Address | Address for the contact person |
| gender | | 0..1 | code | male female other unknown AdministrativeGender (Required) |
| organization | | 0..1 | Reference(Organization) | Organization that is associated with the contact |
| period | | 0..1 | Period | The period during which this contact person or organization is valid to be contacted relating to this patient |
| communication | | 0..* | BackboneElement | A language which may be used to communicate with the patient about his or her health |
| language | | 1..1 | CodeableConcept | The language which can be used to communicate with the patient about his or her health Common Languages (Preferred but limited to AllLanguages) |
| preferred | | 0..1 | boolean | Language preference indicator |
| generalPractitioner | | 0..* | Reference(Organization Practitioner PractitionerRole) | Patient's nominated primary care provider |
| managingOrganization | | 0..1 | Reference(Organization) | Organization that is the custodian of the patient record |
| link | | 0..* | BackboneElement | Link to another patient resource that concerns the same actual person |
| other | | 1..1 | Reference(Patient RelatedPerson) | The other patient or related person resource that the link refers to |
| type | | 1..1 | code | replaced-by replaces refer seealso LinkType (Required) |

Documentation for this format

Enlaces o vínculos terminológicos

- Algunos tipos de datos pueden tener vínculos terminológicos (con obligatoriedad variable)
- Todos los elementos pueden tener vínculos (computables).
 - Los vínculos también se heredan

See the Profiles & Extensions and the alternate definitions: Master Definition XML + JSON, XML Schema/Schematron + JSON Schema, ShEx (for Turtle) + see the extensions & the dependency analysis

8.1.2.1 Terminology Bindings

| Path | Definition | Type | Reference |
|--------------------------------|---|--|--|
| Patient.gender | The gender of a person used for administrative purposes. | Required | AdministrativeGender |
| Patient.contact.gender | | | |
| Patient.maritalStatus | The domestic partnership status of a person. | Extensible | Marital Status Codes |
| Patient.contact.relationship | The nature of the relationship between a patient and a contact person for that patient. | Extensible | PatientContactRelationship |
| Patient.communication.language | A human language. | Preferred, but limited to AllLanguages | CommonLanguages |
| Patient.link.type | The type of link between this patient resource and another patient resource. | Required | LinkType |

8.1.2.2 Constraints

| id | Level | Location | Description | Expression |
|-------|-------|-----------------|--|---|
| pat-1 | Rule | Patient.contact | SHALL at least contain a contact's details or a reference to an organization | <code>name.exists() or telecom.exists() or address.exists() or organization.exists()</code> |

Notes:

- multipleBirth can be either expressed as a Boolean (just indicating whether the patient is part of a multiple birth) or as an integer, indicating the actual birth order.
- Patient records may only be in one of two statuses: in use (active=true) and not in use (active=false). A normal record is active, i.e. it is in use. Active is set to 'false' when a record is created as a duplicate or in error. A record does not need to be linked to be inactivated.
- The link element is used to assert that two or more Patient resources are both about the same actual patient. See below for further discussion.
- There should be only one preferred language (Language.preference = true) per mode of expression.
- The Contact for a Patient has an element organization, this is for use with guardians or business related contacts where just the organization is relevant.

8.1.3 Patient ids and Patient resource ids

A Patient record's **Resource Id** can never change. For this reason, the identifiers with which humans are concerned (often called MRN - Medical Record Number, or UR - Unit Record) should not be used for the resource's id, since MRN's may change, i.e. as a result of having duplicate records of the same patient. Instead they should be represented in the **Patient.identifier** list where they can be managed. This is also useful for the case of institutions that have acquired multiple numbers because of mergers of patient record systems over time.

Where there is a need to implement an automated MRN Identifier created for a patient record, this could be achieved by providing an identifier in the patient with an appropriate assigner, MRN Type and/or system but with no value assigned. Internal business rules can then detect this and replace/populate this identifier with 1 or more identifiers (as required).

8.1.4 Linking Patients

The link element is used to assert that patient resources refer to the same patient. This element is used to support the following scenarios where multiple patient records exist:

8.1.4.1 Duplicate Patient records

Managing Patient registration is a well-known difficult problem. Around 2% of registrations are in error, mostly duplicate records. Sometimes the duplicate record is caught fairly quickly and retired before much data is accumulated. In other cases, substantial amounts of data may accumulate. By using a link of type 'replaced-by', the record containing such a link is marked as a duplicate and the link points forward to a record that should be used instead. Note that the record pointed to may in its turn have been identified as created in error and forward to yet another Patient resource. Records that replace another record may use a link type of 'replaces' pointing to the old record.

8.1.4.2 Patient record in a Patient index

A Patient record may be present in a system that acts as a Patient Index: it maintains a (summary of) patient data and a list of one or more servers that are known to hold a more comprehensive and/or authoritative record of the same patient. The link type 'refer' is used to denote such a link. Note that linked records may contain contradictory information. The record referred to does not point back to the referring record.

8.1.4.3 Distributed Patient record

In a distributed architecture, multiple systems keep separate patient records concerning the same patient. These records are not considered duplicates, but contain a distributed, potentially overlapping view of the patient's data. Each such record may have its own focus or maintaining organization and there need not be a sense of one record being more complete or more authoritative than another. In such cases, links of type 'see also' can be used to point to other patient records. It is not a requirement that such links are bilateral.

8.1.5 Patient vs. Person vs. Patient.Link vs. Linkage

The Person resource on the surface appears to be very similar to the Patient resource, and the usage for it is very similar to using the Patient.Link capability.

The intention of the Person resource is to be able to link instances of resources together that are believed to be the same individual. This includes across resource types, such as RelatedPerson, Practitioner, Patient and even other Person resources.

The Patient Link however is only intended to be used for Patient resources.

Structure

Element

Flags: **id**

Card: 0..1

Type: string

Description & Constraints

Base for all elements

+ Axiom: All FHIR elements must have a @value or children

Elements defined in Ancestors:

Unique id for inter-element referencing

Additional content defined by implementations

Documentation for this format

As the base type for all elements included in a resource, Element is an important structural element of FHIR. Even the primitive types inherit the base features and representation rules that apply to the Element type.

Constraints

| id | Level | Location | Description | Expression |
|-------|-------|----------|---|---|
| ele-1 | Rule | (base) | All FHIR elements must have a @value or children: <code>hasValue() or (children().length() > 0)</code> | <code>hasValue() or (children().length() > 0)</code> |

Parámetros de búsqueda

8.1.12 Search Parameters

Search parameters for this resource. The [common parameters](#) also apply. See [Searching](#) for more information about searching in REST, messaging, and services.

| Name | Type | Description | Expression | In Common |
|---|---------------------------|---|--|-----------------------------|
| active TU | token | Whether the patient record is active | Patient.active | |
| address TU | string | A server defined search that may match any of the string fields in the Address, including line, city, district, state, country, postalCode, and/or text | Patient.address | 3 Resources |
| address-city TU | string | A city specified in an address | Patient.address.city | 3 Resources |
| address-country TU | string | A country specified in an address | Patient.address.country | 3 Resources |
| address-postalcode TU | string | A postalCode specified in an address | Patient.address.postalCode | 3 Resources |
| address-state TU | string | A state specified in an address | Patient.address.state | 3 Resources |
| address-use TU | token | A use code specified in an address | Patient.address.use | 3 Resources |
| birthdate TU | date | The patient's date of birth | Patient.birthDate | 2 Resources |
| death-date TU | date | The date of death has been provided and satisfies this search value | (Patient.deceased as dateTime) | |
| deceased TU | token | This patient has been marked as deceased, or as a death date entered | Patient.deceased.exists() and Patient.deceased != false | |
| email TU | token | A value in an email contact | Patient.telecom.where(system='email') | 4 Resources |
| family TU | string | A portion of the family name of the patient | Patient.name.family | 1 Resources |
| gender TU | token | Gender of the patient | Patient.gender | 3 Resources |
| general-practitioner TU | reference | Patient's nominated general practitioner, not the organization that manages the record | Patient.generalPractitioner (Practitioner, Organization, PractitionerRole) | |
| given TU | string | A portion of the given name of the patient | Patient.name.given | 1 Resources |
| identifier TU | token | A patient identifier | Patient.identifier | |
| language TU | token | Language code (irrespective of use value) | Patient.communication.language | |
| link TU | reference | All patients linked to the given patient | Patient.link.other (Patient, RelatedPerson) | |
| name TU | string | A server defined search that may match any of the string fields in the HumanName, including family, give, prefix, suffix, suffix, and/or text | Patient.name | |
| organization TU | reference | The organization that is the custodian of the patient record | Patient.managingOrganization (Organization) | |
| phone TU | token | A value in a phone contact | Patient.telecom.where(system='phone') | 4 Resources |
| phonetic TU | string | A portion of either family or given name using some kind of phonetic matching algorithm | Patient.name | 3 Resources |
| telecom TU | token | The value in any kind of telecom details of the patient | Patient.telecom | 4 Resources |

Instancia de recursos

```
{
  "resourceType" : "Patient",
  "id" : "43961584",
  "meta" : {
    "versionId" : "1",
    "lastUpdated" : "2020-09-11T13:48:11.266Z"
  },
  "text" : {
    "status" : "generated",
    "div" : "<div xmlns=\"http://www.w3.org/1999/xhtml\"><p><b>Generated Narrative with Details</b></p><p><b>id</b>: 1</p><p><b>identifier</b>: Medical record number = P0000001</p><p><b>name</b>: John Doe </p><p><b>gender</b>: other</p><p><b>birthDate</b>: 28/04/1971 0:20:00 AM</p></div>"
  },
  "identifier" : [
    {
      "type" : {
        "coding" : [
          {
            "system" : "http://terminology.hl7.org/CodeSystem/v2-0203/",
            "code" : "MR",
            "display" : "Medical record number"
          }
        ]
      },
      "system" : "http://myhospital.org/identifiers/patients",
      "value" : "P0000001"
    }
  ],
  "name" : [
    {
      "family" : "Doe",
      "given" : [
        "John"
      ]
    }
  ],
  "gender" : "male",
  "birthDate" : "1971-04-28T00:20:00Z"
}
```

Búsqueda FHIR

- Los servidores FHIR pueden admitir búsquedas mediante GET o POST
- Las posibilidades de búsqueda pueden configurarse para sistemas individuales.
- La búsqueda puede incluir recursos adicionales o limitar los datos...

Búsqueda FHIR

- La búsqueda funciona como un filtro:
 - GET /Patient - todos los pacientes
 - GET /Patient?_id=180252 - sólo el paciente con ese ID
 - GET /Paciente?identificador=http://hl7.org/fhir/sid/us-mbi|0000-000-0000
 - GET/Patient?birthdate=lt2010-10-01
- **Un recurso puede buscarse por sus parámetros de búsqueda**
- **Se puede buscar en un servidor a través de los recursos**

<https://www.hl7.org/fhir/search.html>

Parámetros de búsqueda

In the simplest case, a search is executed by performing a `GET` operation in the RESTful framework:

```
GET [base]/[type]?name=value&...(&_format=[mime-type])
```

For this RESTful search (see [definition in RESTful API](#)), the parameters are a series of `name=[value]` pairs encoded in the URL or as an application/x-www-form-urlencoded submission for a POST:

```
POST [base]/[type]/_search(?[parameters](&_format=[mime-type]))
```

| Search Parameter Types | Parameters for all resources | Search result parameters |
|------------------------|------------------------------|-----------------------------|
| Number | <code>_id</code> | <code>_sort</code> |
| Date/DateTime | <code>_lastUpdated</code> | <code>_count</code> |
| String | <code>_tag</code> | <code>_include</code> |
| Token | <code>_profile</code> | <code>_revinclude</code> |
| Reference | <code>_security</code> | <code>_summary</code> |
| Composite | <code>_text</code> | <code>_total</code> |
| Quantity | <code>_content</code> | <code>_elements</code> |
| URI | <code>_list</code> | <code>_contained</code> |
| Special | <code>_has</code> | <code>_containedType</code> |
| | <code>_type</code> | |

In addition, there is a special search parameters `_query` and `_filter` that allow for an alternative method of searching, and the parameters `_format` and `_pretty` defined for all interactions.

| Structure | | | | |
|---------------|-----------|-------|-------------------------|---|
| Name | Flags | Card. | Type | Description & Constraints |
| Practitioner | TU | | DomainResource | A person with a formal responsibility in the provisioning of healthcare or related services. Elements defined in Ancestors: id, meta, implicitRules, language, text, contained, extension, modifierExtension An identifier for the person as this agent |
| identifier | Σ | 0..* | Identifier | |
| active | Σ | 0..1 | boolean | Whether this practitioner's record is in active use |
| name | Σ | 0..* | HumanName | The name(s) associated with the practitioner |
| telecom | Σ | 0..* | ContactPoint | A contact detail for the practitioner (that apply to all roles) |
| address | Σ | 0..* | Address | Address(es) of the practitioner that are not role specific (typically home address) |
| gender | Σ | 0..1 | code | male female other unknown <i>AdministrativeGender (Required)</i> |
| birthDate | Σ | 0..1 | date | The date on which the practitioner was born |
| photo | | 0..* | Attachment | Image of the person |
| qualification | | 0..* | BackboneElement | Certification, licenses, or training pertaining to the provision of care |
| identifier | | 0..* | Identifier | An identifier for this qualification for the practitioner |
| code | | 1..1 | CodeableConcept | Coded representation of the qualification v2 table 0360, Version 2.7 [Example] |
| period | | 0..1 | Period | Period during which the qualification is valid |
| issuer | | 0..1 | Reference[Organization] | Organization that regulates and issues the qualification |
| communication | | 0..* | CodeableConcept | A language the practitioner can use in patient communication Common Languages (Preferred but limited to AllLanguages) |

Documentation for this format

See the [Profiles & Extensions](#) and the alternate definitions: Master Definition XML + JSON, XML Schema/Schematron + JSON Schema, SHEx (for Turtle) + see the extensions & the dependency analysis

8.4.4.1 Terminology Bindings

| Path | Definition | Type | Reference |
|---------------------------------|---|--|--------------------------------------|
| Practitioner.gender | The gender of a person used for administrative purposes. | Required | AdministrativeGender |
| Practitioner.qualification.code | Specific qualification the practitioner has to provide a service. | Example | v2.0360.2.7 |
| Practitioner.communication | A human language. | Preferred, but limited to AllLanguages | CommonLanguages |

8.4.5 Notes:

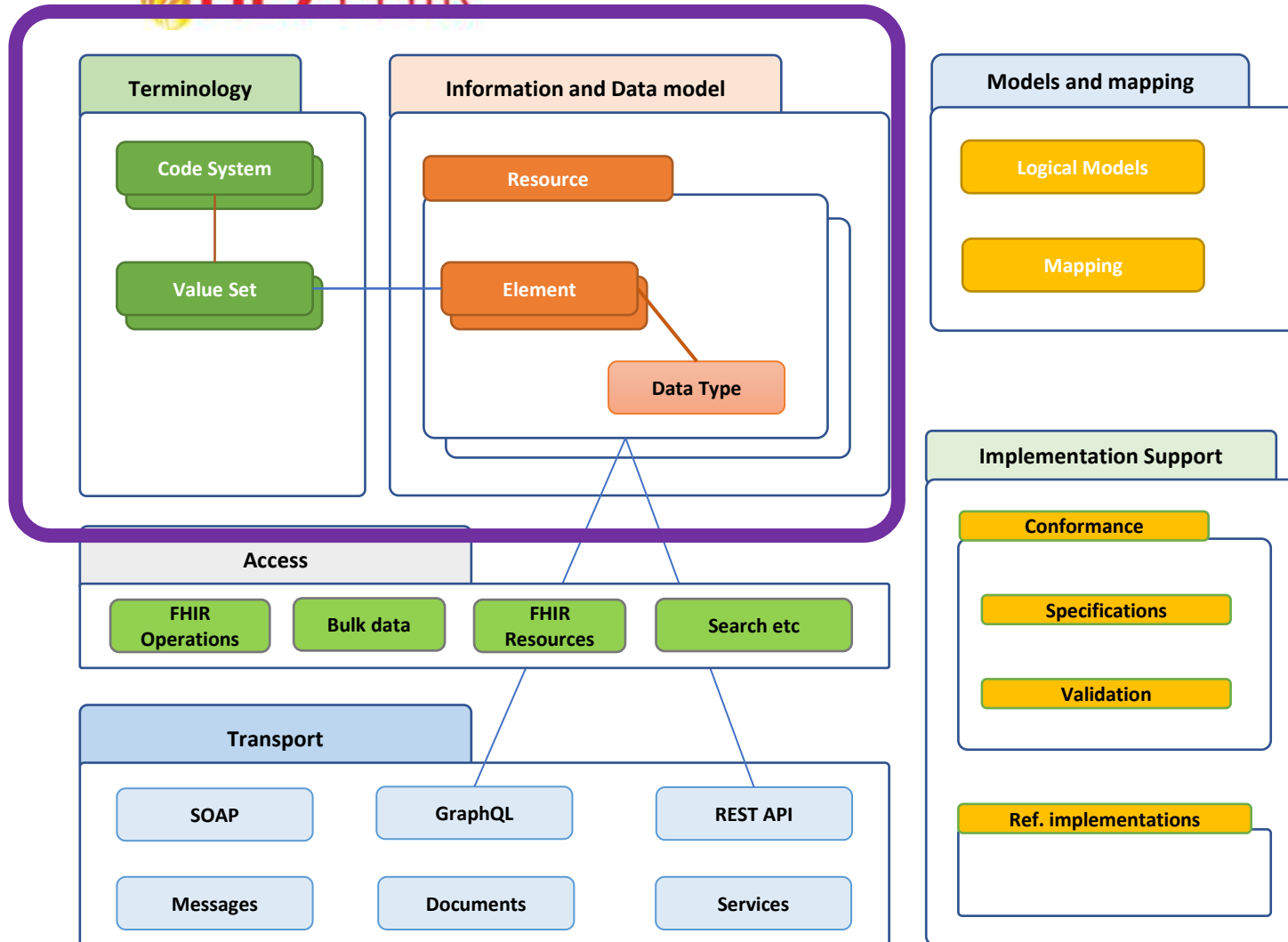
- The practitioner's Qualifications are acquired by the practitioner independent of any organization or role, and do not imply that they are allowed/authorized to perform roles relevant to the qualification at any specific Organization/Location.

8.4.6 Search Parameters

Search parameters for this resource. The [common parameters](#) also apply. See [Searching](#) for more information about searching in REST, messaging, and services.

| Name | Type | Description | Expression | In Common |
|--------------------|--------|---|--|-------------|
| active | token | Whether the practitioner record is active | <code>Practitioner.active</code> | |
| address | string | A server defined search that may match any of the string fields in the Address, including line, city, district, state, country, postalCode, and/or text | <code>Practitioner.address</code> | 3 Resources |
| address-city | string | A city specified in an address | <code>Practitioner.address.city</code> | 3 Resources |
| address-country | string | A country specified in an address | <code>Practitioner.address.country</code> | 3 Resources |
| address-postalCode | string | A postalCode specified in an address | <code>Practitioner.address.postalCode</code> | 3 Resources |

FHIR y terminologías



Uso de la terminología FHIR

- Algunos elementos de datos tienen un enlace terminológico (de una fuerza determinada)
 - A un ValueSet, que (normalmente) tiene valores de un CodeSystem

| | | | | |
|--------------|---|------|-------------------------|--|
| contact | I | 0..* | BackboneElement | A contact party (e.g. guardian, partner, friend) for the patient + Rule: SHALL at least contain a contact's details or a reference to an organization |
| relationship | | 0..* | CodeableConcept | The kind of relationship Patient Contact Relationship (Extensible) |
| name | | 0..1 | HumanName | A name associated with the contact person |
| telecom | | 0..* | ContactPoint | A contact detail for the person |
| address | | 0..1 | Address | Address for the contact person |
| gender | | 0..1 | code | male female other unknown AdministrativeGender (Required) |
| organization | I | 0..1 | Reference(Organization) | Organization that is associated with the contact |

4.4.1.388 Value Set <http://hl7.org/fhir/ValueSet/administrative-gender>

Patient Administration Work Group | Maturity Level: N | Normative (from v4.0.0) | Use Context: Any

This page has been approved as part of an FHIR® standard. See the Patient Package for further details.

This is a value set defined by the FHIR project.

4.4.1.388.1 Content Logical Definition

- Include all codes defined in: <http://hl7.org/fhir/administrative-gender>

4.4.1.388.2 Expansion

This expansion generated 14 Apr 2021

This value set contains 4 concepts

Expansion based on AdministrativeGender v4.0.0 (CodeSystem)

All codes from system: <http://hl7.org/fhir/administrative-gender>

| Code | Display | Definition |
|---------|---------|------------|
| male | Male | Male |
| female | Female | Female |
| other | Other | Other |
| unknown | Unknown | Unknown |

4.4.1.001 Value Set <http://hl7.org/fhir/ValueSet/patient-contactrelationship>

Patient Administration Work Group | Maturity Level: N | Normative (from v4.0.0) | Use Context: Any

This page has been approved as part of an FHIR® standard. See the Patient Package for further details.

This is a value set defined by the FHIR project.

Summary

| | |
|------------------|---|
| Defining URL: | http://hl7.org/fhir/ValueSet/patient-contactrelationship |
| Version: | 4.0.0 |
| Name: | PatientContactRelationship |
| Title: | Patient Contact Relationship |
| Definition: | The nature of the relationship between the patient and the contact person. |
| Concepts: | Patient Administration Work Group |
| OID: | 2.16.840.1.113883.4.642.3.1130 (for OID-based terminology systems) |
| Source Resource: | URL / XML |

This value set is used in the following project:

- Resource: PatientContactRelationship (CodeableConcept / Extensible)

4.4.1.001.1 Content Logical Definition

- Include codes from: <http://hl7.org/fhir/ValueSet/patient-contactrelationship> if where concept is not 4.0.0

4.4.1.001.2 Expansion

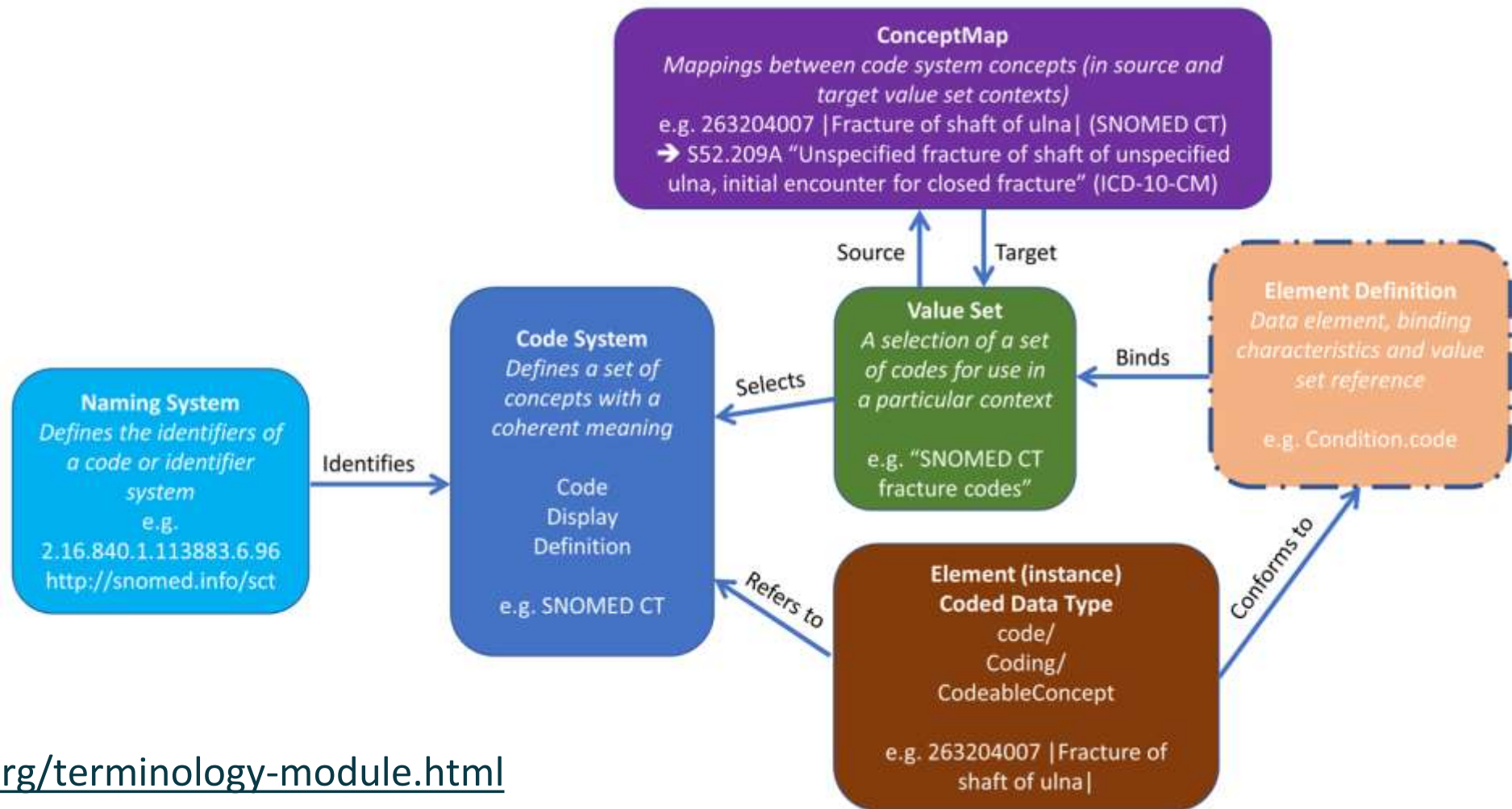
This expansion generated 14 Apr 2021

This value set contains 11 concepts

Expansion based on patient-contactrelationship v4.0.0 (CodeSystem)

All codes from system: <http://hl7.org/fhir/ValueSet/patient-contactrelationship>

| Code Display | Definition |
|---------------------------------|---------------------------|
| BP of Billing contact person | Billing contact person |
| CP of Contact person | Contact person |
| EP of Emergency contact person | Emergency contact person |
| PR of Person preparing referral | Person preparing referral |
| SP of Employer | Employer |
| SC of Emergency Contact | Emergency Contact |
| FA of Federal Agency | Federal Agency |
| IC of Insurance Company | Insurance Company |
| AG of Agent of Agent | Agent of Agent |
| SA of State Agency | State Agency |
| U of Unknown | Unknown |

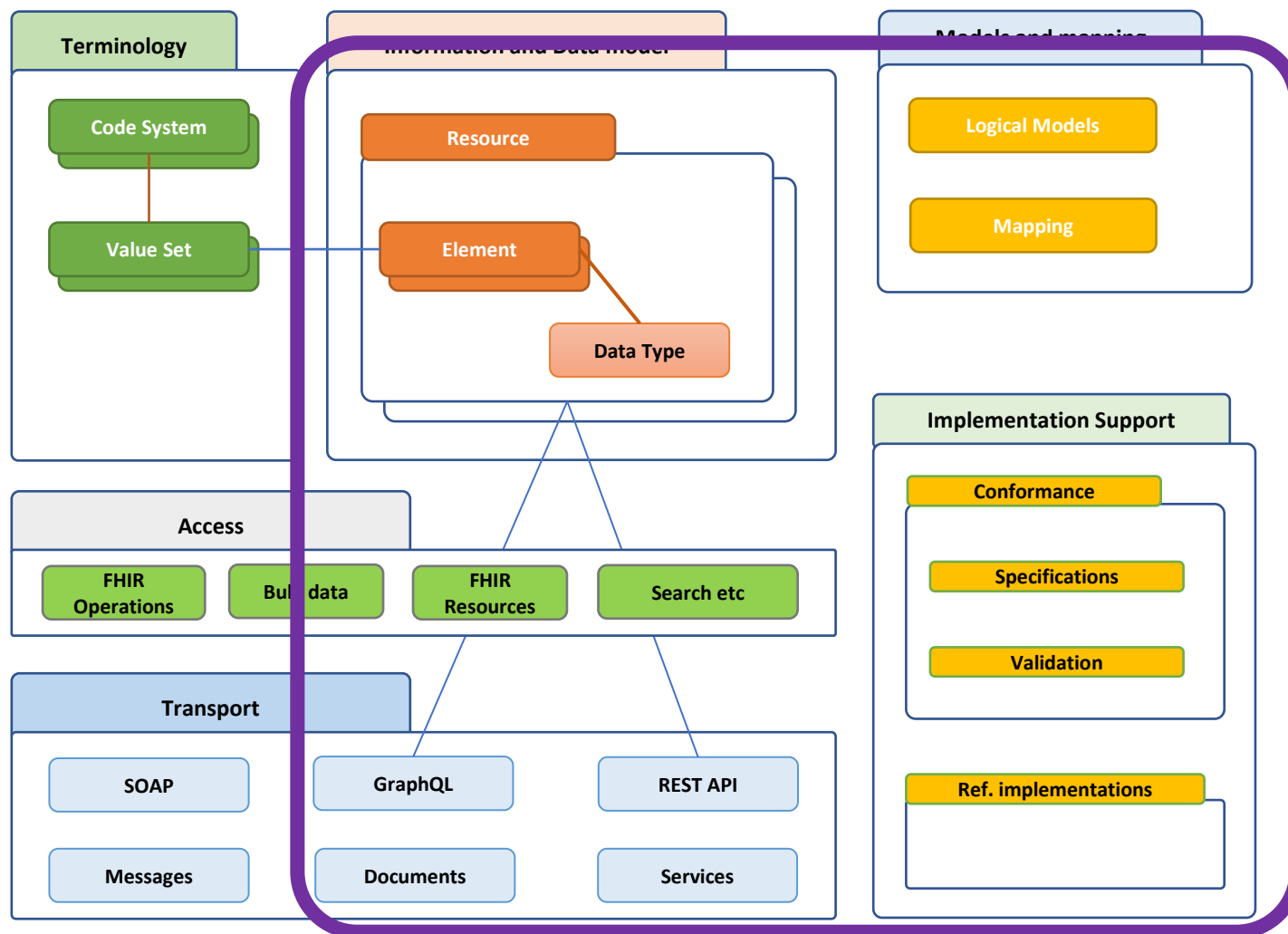


<http://build.fhir.org/terminology-module.html>

PREGUNTAS Y RESPUESTAS



Integración y relacionamiento de recursos FHIR



Referencias entre recursos

Un Recurso es normalmente la unidad atómica de intercambio. Los recursos se relacionan entre sí.

| | | | |
|-----------------------|---|------|---|
| subject | Σ | 1..1 | Reference(Patient Group) |
| encounter | | 0..1 | Reference(Encounter) |
| supportingInformation | | 0..* | Reference(Any) |
| authoredOn | Σ | 0..1 | dateTime |
| requester | Σ | 0..1 | Reference(Practitioner PractitionerRole Organization Patient RelatedPerson Device) |
| performer | | 0..1 | Reference(Practitioner PractitionerRole Organization Patient Device RelatedPerson CareTeam HealthcareService) |

| Name | Flags | Card. | Type | Description & Constraints |
|------------|-------|-------|------------|--|
| Reference | Σ N | | Element | A reference from one resource to another + Rule: SHALL have a contained resource if a local reference is provided Elements defined in Ancestors: id, extension |
| reference | Σ I | 0..1 | string | Literal reference, Relative, internal or absolute URL |
| type | Σ | 0..1 | uri | Type the reference refers to (e.g. "Patient") ResourceType (Extensible) |
| Identifier | Σ | 0..1 | Identifier | Logical reference, when literal reference is not known |
| display | Σ | 0..1 | string | Text alternative for the resource |

2.3.0.2 Literal References

The **reference** is the key element - resources are identified and addressed by their URL. It contains a URL that is either

- an absolute URL
- a relative URL, which is relative to the **Service Base URL**, or, if processing a resource from a bundle, which is relative to the base URL implied by the **Bundle.entry.fullUrl** (see **Resolving References in Bundles**)
- an internal fragment reference (see "Contained Resources" below)

A relative reference to the **Patient** "034AB16" in an element named **subject** on a FHIR RESTful server:

```
<subject>
  <reference value="Patient/034AB16" />
</subject>
```

An absolute reference to a **Structure Definition** in an element named **profile** :

```
{
  "profile" : {
    "reference" : "http://fhir.hl7.org/svc/StructureDefinition/c8973a22-2b5b-4e76-9c66-00639c99e61b"
  }
}
```

2.3.0.3 Logical References

In many contexts where FHIR is used, applications building a resource may know an identifier for the target of the reference, but there is no way for the application to convert this to a literal reference that directly references an actual resource. This situation may arise for several reasons:

- There is no server exposing any such resource. This is often the case with national identifiers (e.g. US SSN or NPI), and such identifiers are widely used
- The server that exposes the resource is not available to the source application, so it has no way to resolve an identifier to a reference
- The application is not in a RESTful environment - it is creating a message or a document

For further discussion of the use of identifiers on resources, see **Consistent Resource Identification**. In these cases, the source application may provide the identifier as a logical reference to the entity that the target resource would describe.

A logical reference to the **Patient** with an SSN of 000111111:

```
<patient>
  <identifier>
    <system value="http://hl7.org/fhir/sid/us-ssn" />
    <value value="000111111" />
  </identifier>
</patient>
```

Bundle

- Se utiliza para contener y agrupar recursos
- Diferentes tipos de paquetes
- Otros recursos sólo para agrupar:
 - Lista
 - Composición
 - (Grupo)

| Name | Flags | Card. | Type | Description & Constraints |
|-----------------|-------|-------|-----------------|---|
| Bundle | Σ I N | | Resource | Contains a collection of resources + Rule: total only when a search or history + Rule: entry.search only when a search + Rule: entry.request mandatory for batch/transaction/history, otherwise prohibited + Rule: entry.response mandatory for batch-response/transaction-response/history, otherwise prohibited + Rule: fullUri must be unique in a bundle, or else entries with the same fullUri must have different meta.versionId (except in history bundles) + Rule: A document must have an identifier with a system and a value + Rule: A document must have a date + Rule: A document must have a Composition as the first resource + Rule: A message must have a MessageHeader as the first resource Elements defined in Ancestors: id, meta, implicitRules, language Persistent identifier for the bundle |
| identifier | Σ | 0..1 | Identifier | document message transaction transaction-response batch batch-response history searchset collection BundleType (Required) |
| type | Σ | 1..1 | code | |
| timestamp | Σ | 0..1 | instant | When the bundle was assembled |
| total | Σ I | 0..1 | unsignedInt | If search, the total number of matches |
| link | Σ | 0..* | BackboneElement | Links related to this Bundle See http://www.iana.org/assignments/link-relations/link-relations.xhtml#link-relations-1 |
| relation | Σ | 1..1 | string | |
| url | Σ | 1..1 | uri | Reference details for the link |
| entry | Σ I | 0..* | BackboneElement | Entry in the bundle - will have a resource or information + Rule: must be a resource unless there's a request or response + Rule: fullUri cannot be a version specific reference This repeating element order: For bundles of type 'document' and 'message', the first resource is special (must be Composition or MessageHeader respectively). For all bundles, the meaning of the order of entries depends on the bundle type |
| link | Σ | 0..* | see link | Links related to this entry |
| fullUri | Σ | 0..1 | uri | URI for resource (Absolute URL server address or URI for UUID/OID) |
| resource | Σ | 0..1 | Resource | A resource in the bundle |
| search | Σ I | 0..1 | BackboneElement | Search related information |
| mode | Σ | 0..1 | code | match include outcome - why this is in the result set SearchEntryMode (Required) |
| score | Σ | 0..1 | decimal | Search ranking (between 0 and 1) |
| request | Σ I | 0..1 | BackboneElement | Additional execution information (transaction/batch/history) |
| method | Σ | 1..1 | code | GET HEAD POST PUT DELETE PATCH HTTPVerb (Required) |
| url | Σ | 1..1 | uri | URL for HTTP equivalent of this entry |
| ifNoneMatch | Σ | 0..1 | string | For managing cache currency |
| ifModifiedSince | Σ | 0..1 | instant | For managing cache currency |
| ifMatch | Σ | 0..1 | string | For managing update contention |
| ifNoneExist | Σ | 0..1 | string | For conditional creates |
| response | Σ I | 0..1 | BackboneElement | Results of execution (transaction/batch/history) |
| status | Σ | 1..1 | string | Status response code (text optional) |
| location | Σ | 0..1 | uri | The location (if the operation returns a location) |
| etag | Σ | 0..1 | string | The Etag for the resource (if relevant) |
| lastModified | Σ | 0..1 | instant | Server's date time modified |
| outcome | Σ | 0..1 | Resource | OperationOutcome with hints and warnings (for batch/transaction) |
| signature | Σ TU | 0..1 | Signature | Digital Signature |

Extensiones de FHIR

- La forma de añadir elementos a una estructura manteniendo la conformidad.
- Las extensiones también se definen mediante FHIR.
- FHIR proporciona algunas extensiones estándar: donde el elemento de datos no es muy común, pero donde hay utilidad en tener una forma común de expresarlo.

The screenshot shows the FHIR Extension Registry page for the 'Translation' extension. The page is titled 'Extension: Translation' and includes a table with the following information:

| Name | Stage | Conf. | Type | Description & Constraints |
|-------------|-------|-------------------|------|---|
| Translation | 0..* | Extension | | Description & Constraints URL = http://hl7.org/fhir/StructureDefinition/translation Translation: Language translation from base language of resource to another language. |
| lang | 1..1 | code | | Use as Element ID string, Element ID code or Element ID markdown Code for language. |
| content | 1..1 | string (markdown) | | Content in other language. |

Below the table, there is a 'Summary' section with a 'Documentation for this format' link.

The screenshot shows the HL7 FHIR Release 4 Extensions page. The page is titled 'HL7 FHIR Release 4' and includes a navigation bar with links to Home, Getting Started, Documentation, Resources, Profiles, Extensions, Operations, and Terminologies. The 'Extensions' link is highlighted.

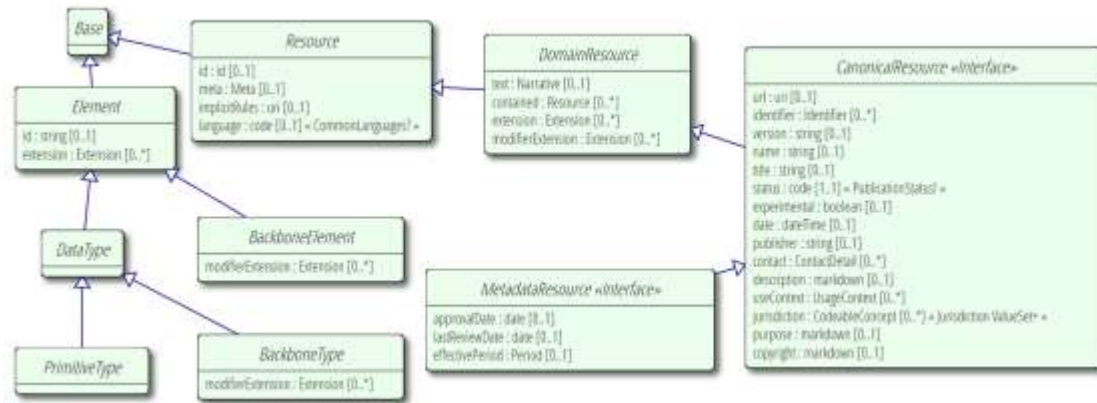
Below the navigation bar, there is a 'Table of Contents' section with a link to 'Extensions'.

The main content area is titled '1.4 FHIR Core-defined Extension Registry' and includes a table with the following information:

| Identity | Conf. | Type | Context | FMM |
|----------------------------------|-------|-----------|---|-----|
| capabilities | 0..* | code | CapabilityStatement.rest.security | 1 |
| auth-url | 0..1 | (complex) | CapabilityStatement.rest.security | 1 |
| 11179-objectClass | 0..1 | Coding | ElementDefinition.mapping | 1 |
| 11179-objectClassProperty | 0..1 | Coding | ElementDefinition.mapping | 1 |
| 11179-permitted-value-conceptmap | 0..1 | canonical | StructureDefinition.snapshot.element.binding.valueSet, StructureDefinition.differential.element.binding.valueSet, Questionnaire.item.answerValueSet | 1 |
| 11179-permitted-value-valueset | 0..1 | canonical | StructureDefinition.snapshot.element.binding.valueSet, StructureDefinition.differential.element.binding.valueSet, | 1 |

Recursos contenidos, extensiones

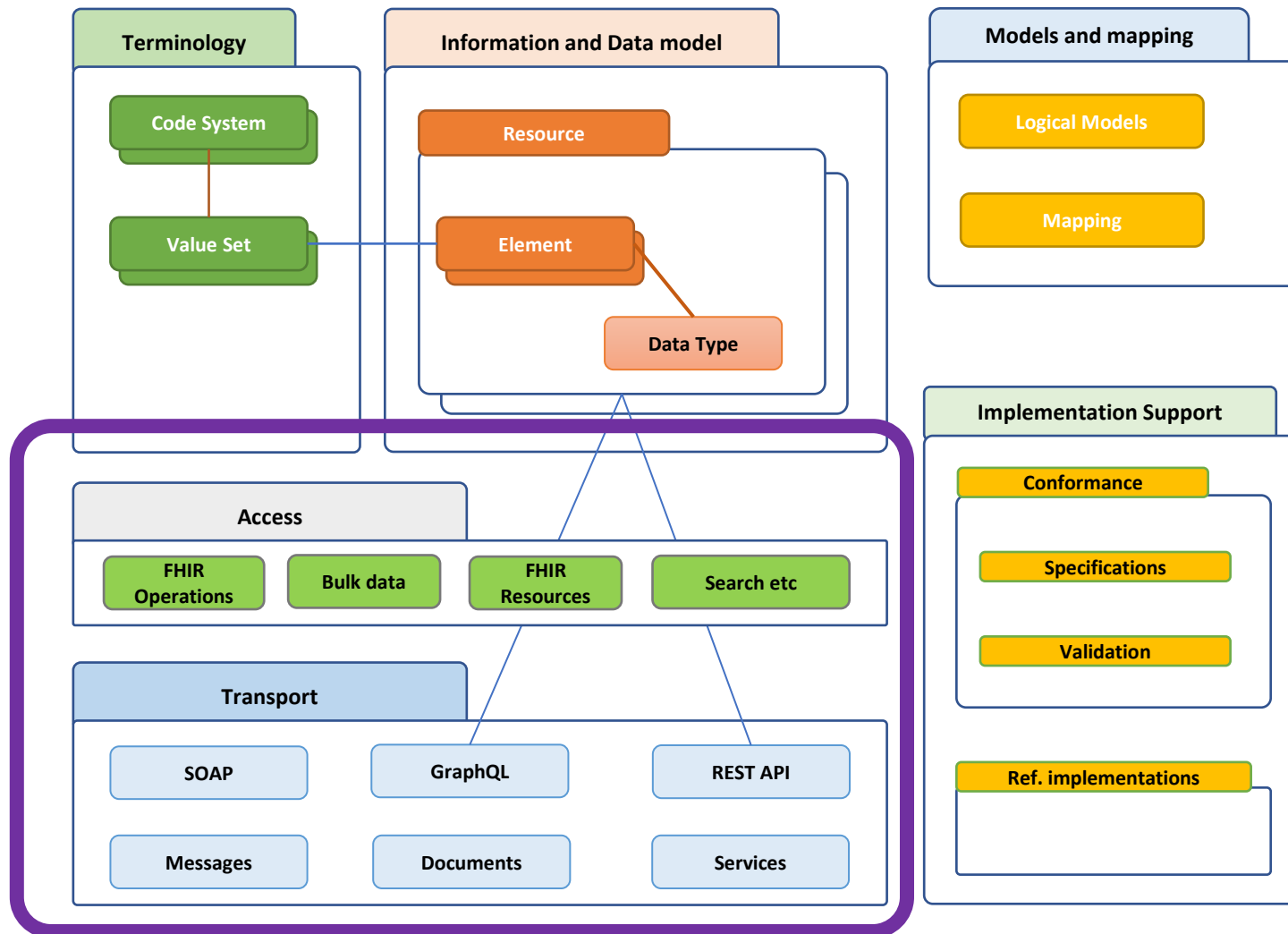
- Los recursos pueden contener otros recursos



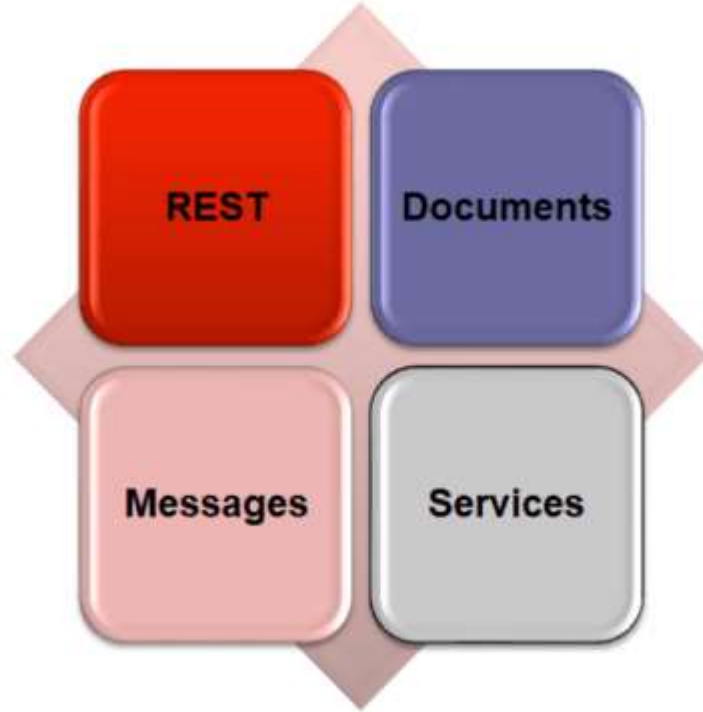
Casi todo en FHIR se puede ampliar

```
{
  "resourceType" : "Patient",
  "id" : "43961584-bf55-4ddf-9462-a37465fe4440",
  "contained" : [
    {
      "resourceType": "Organization",
      "id": "123",
      "identifier": [
        {
          "system": "urn:ietf:rfc:3986",
          "value": "urn:oid:2.16.840.1.113883.19.5"
        }
      ],
      "name": "Good Health Clinic"
    }
  ],
  "extension" : [
    {
      "url" : "http://hl7.org/fhir/StructureDefinition/patient-birthPlace",
      "valueAddress" : {
        "city" : "Muenchen",
        "country" : "Germany"
      }
    }
  ],
  "identifier" : [
    {
      "type" : {
        "coding" : [
          {
            "system" : "http://terminology.hl7.org/CodeSystem/v2-0203/",
            "code" : "MR",
            "display" : "Medical record number"
          }
        ]
      },
      "system" : "http://myhospital.org/identifiers/patients",
      "value" : "P0000001"
    }
  ],
  "name" : [
    {
      "family" : "Doe",
      "given" : [ "John" ]
    }
  ],
  "gender" : "male",
  "birthDate" : "1971-04-28T00:20:00Z"
}
```

Intercambio de datos FHIR



Paradigmas de intercambio



FHIR admite 4 paradigmas

- RESTful API hl7.org/fhir/http.html
- Documentos (como CDA) hl7.org/fhir/documents.html
- Servicios (técnicas SOA) hl7.org/fhir/services.html
- Mensajes hl7.org/fhir/messaging.html

<http://www.healthintersections.com.au>

REST

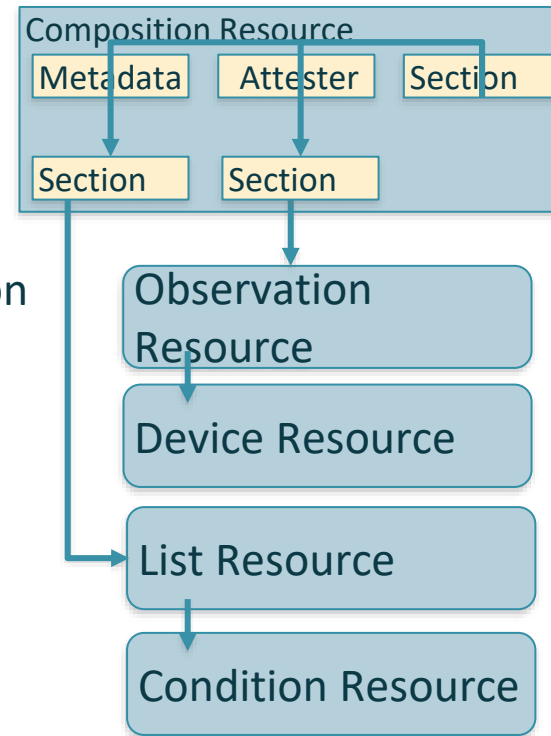
- Enfoque más común
- GET (el verbo "leer")
 - GET un único recurso: GET Paciente/43961584
 - GET un conjunto de recursos GET Paciente (?...)
 - La respuesta es un recurso (un paciente, un paquete o un resultado de operación)
- POST (crear)
- PUT (actualizar)
- DELETE (eliminar)

Ejemplo

(GET) `http://test.fhir.org/r4/Patient/43961584/_history/4?_format=json`

Documentos

- Un Bundle con
 - Tipo = documento
 - La primera entrada es una composición
 - N entradas referenciadas por Composición
 - Firma y procedencia
- Utilizado para
 - Persistencia
 - Administración
 - Autenticación
 - Contexto
 - Integridad
 - Legibilidad humana



© 2019 Health Level Seven® International. Licensed under Creative Commons Attribution 4.0 International
HL7, Health Level Seven, FHIR and the FHIR flame logo are registered trademarks of Health Level Seven International.
Reg. U.S. TM Office.

<Bundle>

ion />

on />

<entry>
<resource>

<Composit

</resource>
</entry>
<entry>
<resource>

<Observati

</resource>
</entry>
<entry>
<resource>

<Device />

</resource>
</entry>
<entry>
<resource>

<List/>

<http://build.fhir.org/documents>

Suscripciones FHIR

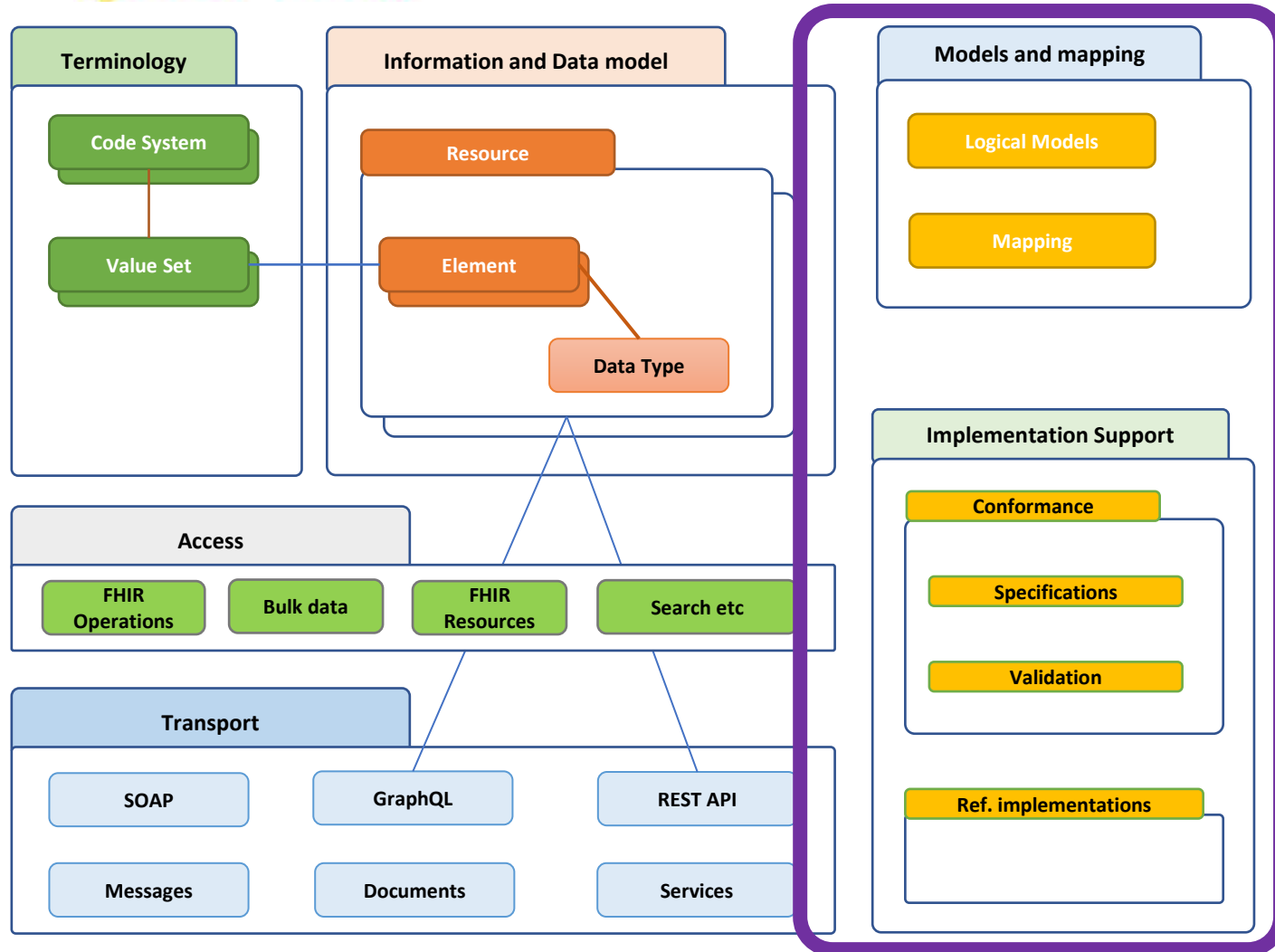
- Potencialmente interesante para "escuchar" los acontecimientos
 - `SubscriptionTopic` resources
 - Define the **data** and **change** used to trigger notifications
 - Define the filters allowed to clients
 - `Subscription` resources
 - Describe a client's request to be notified about events defined in a `SubscriptionTopic`
 - Set filters on events (as defined in the referenced `SubscriptionTopic`)
 - Describe the `channel` and endpoint used to send notifications
 - Describe the payload included in notifications (MIME type, content level, etc.)
 - `subscription-notification Bundles`
 - Describe a notification (using a `SubscriptionStatus`)
 - Contain zero or more notification payloads

<http://build.fhir.org/subscriptions>

PREGUNTAS Y RESPUESTAS

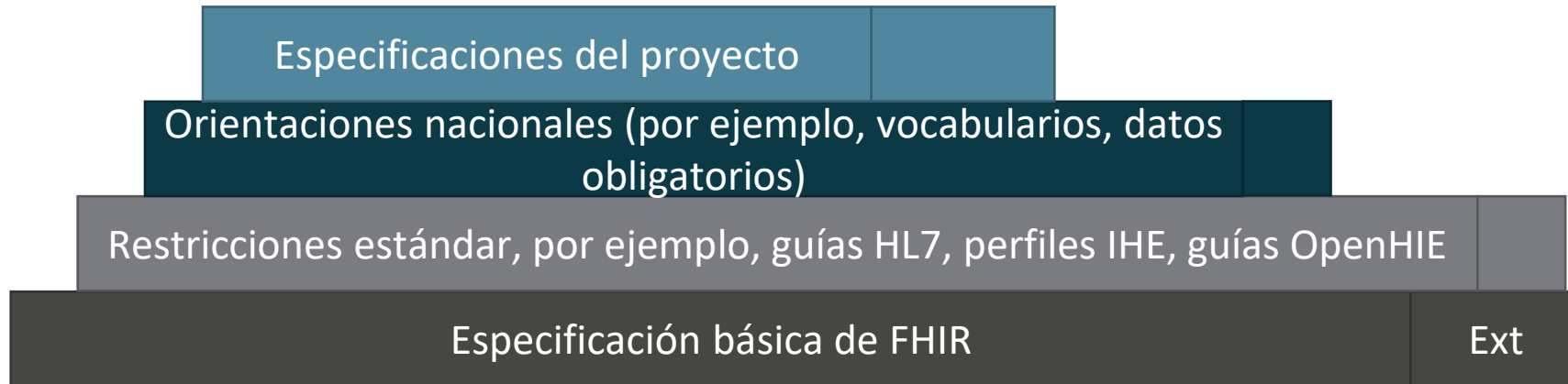


Implementación de FHIR



Uso de FHIR en una implementación

- Será objeto de una sesión introductoria específica.
- Puede haber diferentes niveles: busque orientaciones ya existentes (o ayude a crearlas).
- Una especificación FHIR puede añadir restricciones y extensiones a la especificación de la que depende.



Aplicando restricciones en FHIR

- Las cardinalidades pueden reducirse - no aumentarse
- Se pueden reducir los enlaces de vocabulario - no aumentar o flexibilizar.
- Para elementos que son multiplos (0..*), podemos “reservar” secciones (“slicing”)
 - por ejemplo, reservar 1 ocurrencia de patient.identifier para “ID nacional”)

Herramientas de FHIR

- Servidores FHIR
 - De fácil acceso:
 - <http://test.fhir.org/r4>
 - <http://hapi.fhir.org/>
- Implementaciones de referencia (servidores y clientes en varias plataformas tecnológicas)

<https://confluence.hl7.org/display/FHIR/Open+Source+Implementations>

Ponte en contacto, sé activo

- Consultar con otras personas (en chat.fhir.org o community.fhir.org)
 - <https://foro.recainsa.org/>
- Cree (o pida a alguien que cree) una solicitud de cambio a la norma
- Participar en un evento FHIR como DevDays (devdays.com), o un evento local
- Participar en un Connectathon de FHIR, testar un sistema, traer comentarios y conclusiones

Comentarios, preguntas y respuestas, debate Próximas sesiones



Próximas sesiones

- **Perfiles y documentación FHIR**

- En este seminario web exploraremos los aspectos básicos para crear y documentar una especificación FHIR® para un proyecto, un país o una aplicación individual. Veremos cómo la especificación FHIR® puede ampliarse y restringirse para dar soporte a necesidades específicas. Después de identificar lo que contiene una especificación FHIR®, veremos cómo se documentan dichas especificaciones, y cómo se hace de una buena manera para acelerar la entrega a través de la validación, las pruebas y la automatización. Recordaremos algunas de las características básicas de FHIR® en torno a la localización y el multilinguaje, que adquieren mayor importancia cuando se implementan perfiles FHIR®.

- **FHIR y Terminología**

- En esta sesión se presentará la compatibilidad de FHIR® con las terminologías: Terminologías estándar (globales) como SNOMED CT, LOINC, o terminologías locales (por ejemplo códigos nacionales) frente a terminologías específicas del proyecto. Veremos los recursos FHIR® para terminologías, cómo se utilizan en otros recursos FHIR® y cómo definir nuevos recursos terminológicos, así como cómo localizar los conjuntos de valores. También echaremos un vistazo rápido a las operaciones básicas de terminología FHIR® y proporcionaremos algunos indicadores a recursos adicionales y servidores de terminología.

- **Guía de implementación de FHIR / Uso avanzado**

- La culminación de esta serie fundacional será una sesión práctica tipo taller, con un ejemplo para cualquiera que desee crear su primera publicación de la especificación FHIR®. Utilizaremos las herramientas de código abierto (proporcionaremos instrucciones de instalación de antemano) y le guiaremos a través de la creación de una publicación de una Guía de Implementación en los aspectos más fundamentales: Configuración de un repositorio (compartido), adición de recursos de conformidad FHIR® (por ejemplo, perfiles, extensiones, conjuntos de valores), importación de dependencias de otras especificaciones, adición de texto narrativo y diagramas, y uso de un lenguaje abreviado para acelerar el trabajo. Al final, podrá encontrar el contenido publicado en su máquina, listo para compartir - o puede utilizar las herramientas de entrega continua de la comunidad para compartir el resultado en línea directamente desde su repositorio.

Digital Square cuenta con el apoyo de:



USAID
FROM THE AMERICAN PEOPLE

BILL & MELINDA
GATES *foundation*



Digital Square es una iniciativa de PATH financiada y diseñada por la Agencia de los Estados Unidos para el Desarrollo Internacional, la Fundación Bill y Melinda Gates y un consorcio de otros donantes.

Esta presentación ha sido posible gracias al generoso apoyo del pueblo estadounidense a través de la Agencia de los Estados Unidos para el Desarrollo Internacional. Los contenidos son responsabilidad de PATH y no reflejan necesariamente las opiniones de USAID o del Gobierno de los Estados Unidos.