

SLOVENSKI STANDARD SIST EN 12264:2005

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Zdravstvena informatika – Kategorijske strukture sistemov konceptov

Health informatics - Categorial structures for systems of concepts

Medizinische Informatik eKategoriale Struktur für Begriffssysteme/

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Informatique de santé - Structures catégorielles des systemes de concepts <u>SIST EN 12264:2005</u> https://standards.iteh.ai/catalog/standards/sist/3eacaf07-15ea-493a-a25f-**Ta slovenski standard je istoveten4z:**6d2/sis**EN 12264:2005**

ICS:

35.240.80 Uporabniške rešitve IT v zdravstveni tehniki IT applications in health care technology

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en



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Health informatics - Categorial structures for systems of concepts

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EUROPEAN COMMITTEE FOR STANDARDIZATION COMITÉ EUROPÉEN DE NORMALISATION EUROPÄISCHES KOMITEE FÜR NORMUNG

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SIST EN 12264:2005

EN 12264:2005 (E)

Contents

| | | Page |
|---------|---|------|
| Forewo | ord | 3 |
| 1 | Scope | 5 |
| 2 | Normative references | 6 |
| 3 | Terms and Definitions | 6 |
| 4 | Categorial structure description | 13 |
| 5 | Conformance of a categorial structure to the document | 13 |
| Bibliog | graphy | 14 |

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Foreword

This European Standard (EN 12264:2005) has been prepared by Technical Committee CEN/TC 251, "Health informatics", the secretariat of which is held by NEN.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by December 2005, and conflicting national standards shall be withdrawn at the latest by December 2005.

According to the CEN/CENELEC Internal Regulations, the national standards organizations of the following countries are bound to implement this European Standard : Austria, Belgium, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden, Switzerland and United Kingdom.

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Introduction

Computer-based processing and interchange of medical or clinical information require various kinds of terminological systems of concepts to represent that information, such as controlled vocabularies. classifications, nomenclatures, terminologies and thesauri, with or without coding schemes.

The specific terminological issues in the field of health informatics are:

- large number of different terminological systems are available in different clinical specialties;

large overlap among the subject fields involved;

-large number of codes and rubrics, typically in the order of magnitude of 10,000 to 100,000 entries, in commonly used terminological systems;

- increasing need for re-use of coded data in different health-care contexts;

- polysemy across different clinical specialties and sometimes within them CVFCW

The integration of computer-based medical records and administrative information systems in Electronic Health Records (EHR) requires rationalisation in the field, and a uniform way to represent the meaning of medical concepts to ensure that the receiver EHR of a message will catch the meaning introduced by the sender EHR and not only the string of characters embedded initiation of bossible to impose a rigid uniform standardised natural language clinical terminology on healthcare providers.

Instead a domain specific semantic model has been envisioned and applied in a series of specific European standards (EN) and international standards (ISO) on various subject fields to describe a set of categorial structures in partially overlapping subject fields: a European standard for surgical procedures (EN 1828), an ISO standard on integration of a reference model for nursing (EN ISO 18104) and an ISO technical specification on medical devices. There are also several European Pre standards (ENV) for: clinical laboratory measurements (ENV 1614), medical devices (ENV 12611), vital signs (EN ISO:IEEE 11073-10101 - Part 10101: Nomenclature), point-of-care medical device communication (EN ISO:IEEE 11073-10101 - Part 10101: Nomenclature), medicinal products (ENV 12610), nursing (ENV 14032) and continuity of care (ENV 13940).

This European Standard specifies the terminology and categorical structure description to be used for systems of concepts. Field testing in several countries, revision and integration have provided the comprehensive basis for this document.

1 Scope

1.1 Main purpose

The purpose of this European Standard is to establish the characteristics and the conformance rules required to synthetically describe the organisation and content of a terminological system in health. This European Standard has been developed to allow the production of specific standards on categorial structures for particular healthcare subject fields with the minimum requirements to support meaningful exchange of information.

This European Standard is applicable to:

- facilitate the construction of new terminological systems in a regular form which will increase their coherence and expressiveness;

- facilitate maintenance of terminological systems;
- increase consistency and coherence of existing terminological systems;
- allow systematic cross-references between items of different types of terminological systems;
- facilitate convergence among terminological systems;) PREVIEW
- make explicit the overlap between different health care domains terminological systems;

- provide elements for negotiation about integration of different terminological systems into information systems between the respective developers T EN 12264:2005

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- enable the systematic evaluation of terminological systems 4-2005

1.2 Target groups

The target groups for this European Standard are:

- designers of specialised standard healthcare terminological categorial structures;
- developers of healthcare terminological systems including classifications and coding systems;

- producers of services for terminological systems and designers of software including applications for natural language processing;

- information modellers, knowledge engineers, and standards developers building models for health information management systems;

- developers of information systems that require an explicit system of concepts;
- developers of mark-up standards for representation of healthcare documents.

1.3 Topics outside the scope

This European Standard has been developed for use as an integrated part of computer-based applications and for the electronic healthcare record. It would be of limited value for manual use.

This European Standard itself is not suitable for or intended for use by individual clinicians or hospital administrators.

It is not the purpose of this European Standard to standardise the end user classification or to conflict with the concept systems embedded in national practice and languages.

This European Standard is applicable to any healthcare terminology in any healthcare terminological system.

2 Normative references

Not applicable.

3 Terms and Definitions

For the purposes of this document, the following terms and definitions apply.

3.1

concept

unit of knowledge created by a unique combination of characteristics (3.2)

NOTE Concepts are not necessarily bound to particular languages. They are, however, influenced by the social or cultural background often leading to different categorisations.[ISO 1087-1:2000]

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3.2 characteristic

characteristic abstraction of a property of an object (3.3) or of a set of objects (3.3)

[ISO 1087-1:2000]

SIST EN 12264:2005

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NOTE Characteristics are used for describing concepts (3.1) or of members of a set of objects (3.3) which form the extension (3.27) of a concept (3.1)

3.3

object

anything perceivable or conceivable

NOTE Objects may be material (e.g. an engine, a sheet of paper, a diamond), immaterial (e.g. conversion ratio, a project plan) or imagined (e.g. a unicorn).

[ISO 1087-1:2000]

3.4

concept system

system of concepts

set of concepts (3.1) structured according to the relations among them

[ISO 1087-1:2000]

3.5

formal representation

system of symbols which stand for **concepts** (3.1) and/or the relations between them and which is governed by explicit rules

3.6

concept representation

formal representation (3.5) of a concept (3.1)

NOTE Informally, we often talk of 'concepts' when we mean 'concept representations'. However, this leads to confusion when precise meanings are required. Concepts arise out of human individual and social conceptualisation

of the world around them. Concept representations are artefacts constructed of symbols and often manifest in computer programs. Because they are artefacts, we can be precise about the functioning and capabilities of concept representations. It is more difficult to be clear about the yet poorly understood function of human conceptualisation.

3.7

concept system representation

formal representation (3.5) of a system of concepts (3.4)

NOTE Informally, we often talk of 'concept systems' when we mean 'concept system representations'. However, this leads to confusion when precise meanings are required. Concepts arise out of human individual and social conceptualisation of the world around them. Concept system representations are artefacts constructed of symbols and often manifest in computer programs. Because they are artefacts, we can be precise about the functioning and capabilities of concept systems representation. It is more difficult to be clear about the yet poorly understood function of human conceptualisation.

3.8

concept name

term (3.36) which uniquely designates a concept (3.1) within a concept system (3.4)

3.9

concept representation name

term (3.36) which uniquely designates a concept representation (3.7)

3.10

hierarchical relation

(3.7) relation between two concepts (3.1) which may be either a generic relation (3.11) or a partitive relation (3.7)

[ISO 1087-1:2000]

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3.11

generic relation <u>SIST EN 12264:2005</u>

genus / species relationstandards.iteh.ai/catalog/standards/sist/3eacaf07-15ea-493a-a25f-

subtype relation 399dd845c6d2/sist-en-12264-2005 relation between two concepts (3.1) where the intention (3.26) of one of the concepts (3.1) includes that of the other concept (3.1) and at least one additional delimiting characteristic (3.25)

[ISO 1087-1:2000]

NOTE 1 A generic relation exists between the concepts (3.1) 'word' and 'pronoun', 'vehicle' and 'car', 'person' and 'child'.

NOTE 2 All instances of a concept in the extension (3.27) of the second are included in the extension of the first.

3.12

individuation relation

relation between a concept (3.1) and the members of its extension (3.27)

NOTE It is a relation between **concept** (3.1) and **object** (3.3)