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# Health informatics — International patient summary

*Informatique de santé — Résumé international du dossier médical du patient*



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# Foreword

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The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

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This document was prepared by European Committee for Standardization (CEN) (as EN 17269:2019) and was adopted, with the following modifications by Technical Committee ISO/TC 215, *Health informatics*.

— changed "this European Standard" to "this document";



— changed any "EN ISO xxxx" references to "ISO xxxx" references;

— changed "section" to "Clause", if appropriate;

— definitions of IPS terms in body of text were moved to Clause 3;

— Clause 3 was reorganized based upon existing ContSys hierarchy;

— more description on conformance, data blocks, more examples in concept values and updated definition citations given in response.

— on implementation evidence from HL7 FHIR ®[1)], the requirement to require/enable the expression of the name data element as a single string as well as the structured representation to permit the natural way of expression in some eastern countries and facilitate cross-border use;

— 'Healthcare Provider' became an Attribute Collection data block, defined and positioned in Clause 3 rather than be treated as a data type.

— complete editorial revision.

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at www.iso.org/members.html.

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# Introduction

The goal of this document is to deliver a single, common International Patient Summary (IPS), comprising core content.

This document achieves that goal by defining a minimal yet non-exhaustive data set and its associated business rules. This document is implementation independent yet still supportive of any implementation by providing formal definition and clear description of a small data set. The primary input to the data set is the second revision of the European eHealth Network's (eHN) data set[1], which, in turn, builds upon significant clinical input from the European Patients-Smart Open Services (epSOS) pilot project[2].

This document defines the IPS, with the initial focus upon unplanned care across national borders. Starting from this focus, and building upon it, the specification is intended to be used and be useful in national and local applications and also to be supportive of both planned and unplanned care. The IPS is designed to provide clinical information to assist care across any jurisdictional border (e.g. local, regional, state/provincial, national). It emphasizes the data required and the associated business rules to support use and the necessary conformance of the use case for an international patient summary. Even though the data set is relatively small, there is no expectation that the full data set has to be realized for a conformant implementation or conformant specification to be produced. Such artefacts need not specify all the optional IPS elements, given that they should assure the openness and extensibility of the derived model.

The data set described is intended for global use beginning with a shared vision[1] from a collaboration between CEN /TC 251 and HL7®[2)], but now involving five Standard Development Organizations each contributing artefacts to support the single solution IPS going forward. From the IPS reference model it is possible to derive a number of compliant logical models that constrain it, and these lead to implementable specifications, such as the IPS CDA and FHIR Implementation Guides. These guides are formalized in the HL7 CDA IG®[2)] and HL7 IG®[2)] and in the IHE IPS®[2)] profile. The IPS Dataset is not bound by any terminology, although it does anticipate the use of the IDMP standard for medication. SNOMED®[3)] International has provided a Global Patient Set for the IPS implementations. CEN has produced a separate Technical Specification[3], that provides a European-specific guideline for IPS implementation, which can also be used as an example for other jurisdictions.



The 'International' element of the IPS emphasizes the need to provide generic solutions for global application moving beyond a particular region or country; consequently, wherever possible, reference is made to international standards, rather than local ones. However, different international contexts will offer a variety of requirements that need to be considered to ensure that patient safety is not compromised. The IPS is underpinned by ISO 13940, which is a system of concepts to support continuity of care[4] and uses those concepts in the initial IPS scenario, which is fully described in Annex A.

This document focuses upon the overall structure of the patient summary as well as the individual data elements that comprise it. The layout of this document (see Table 1) uses a hierarchy of levels (H0 to H7) to facilitate more detailed description with the purpose of supporting consistent implementation of the data set. The level 'H0' describes the IPS Document as a whole, whilst levels H1-H7 describe the IPS Data Blocks with attributes. Descriptors are added to each data element to better define the characteristics. The 'H0' level document structure and constraints will be described first, the components start with H1 (e.g. IPS Sections, IPS Attribute Collections).

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