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Health informatics - Electronic health record communication - Part 5: Interface specification (ISO/DIS 13606-5:2026)

Medizinische Informatik - Kommunikation von Patientendaten in elektronischer Form - Teil 5: Interface-Spezifikation (ISO/DIS 13606-5:2026)

Informatique de santé - Communication du dossier de santé informatisé - Partie 5: Spécification d'interfaces (ISO/DIS 13606-5:2026)

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

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DRAFT International Standard

ISO/DIS 13606-5

Health informatics — Electronic health record communication —

Part 5: Interface specification

Informatique de santé — Communication du dossier de santé informatisé —

Partie 5: Spécification d'interfaces

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CP 401 • Ch. de Blandonnet 8
CH-1214 Vernier, Geneva
Phone: +41 22 749 01 11
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Foreword

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This document was prepared by Technical Committee ISO/TC 215, *Health Informatics*.

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This third edition cancels and replaces the second edition (ISO 13606-5:2019), which has been technically revised. The main changes compared to the previous edition are as follows:

— lists of applicable web service architecture styles and API schemas have been updated to include REST and FHIR .

— the parameter *structure_only* has been added to the REQUEST_EHR_EXTRACT interface to support incremental retrieval of large records and to better respect data protection principles.

A list of all parts in the ISO 13606 series can be found on the ISO website.

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

0.1 General

This document is part of a five-part standard series, published jointly by CEN and ISO through the Vienna Agreement. In this document, dependency upon any of the other parts of this series is explicitly stated where it applies.

0.2 Preface

This document defines the interfaces by which an EHR_EXTRACT, an ARCHETYPE or an EHR_AUDIT_LOG_EXTRACT may be requested and provided.

The scope of this document has been considered carefully in order to achieve several objectives:

— to specify those interfaces that are unique to the 13606 context, and not to include more generic health information communication interfaces that might be the scope of other standards and specifications;

— to specify the interfaces in ways that are compatible with the the ISO 12967 series ;

— to specify the interfaces as computational viewpoints, in order to support the wide range of engineering viewpoints that might be adopted by individual vendors or eHealth programmes; (it should be noted that ISO/DIS 13606-1 [1] , ISO 13606-2 [2] and ISO 13606-4 [3] define the corresponding information viewpoints, and that ISO/DIS 18308 [4] defines the corresponding enterprise viewpoint);

— to construct these interfaces such that they might easily be implemented as specialisations of standard interfaces within the commonly used engineering languages such as Java, Visual Basic, dotnet, SOAP , ebXML, REST etc.;

— to work through the Joint SDO Initiative and Council on the production of Engineering Viewpoint Implementation Guides, that will define more specifically how to implement these interfaces, for example in HL7 version 3 or FHIR ; these guides will be published separately from this document, to enable them to be maintained and updated more frequently (to reflect implementation experience) than is possible for a standards document;

— to recognize that EHR communication will be implemented within a healthcare communications infrastructure, usually nationally, that will define a generalised approach to many other complementary and necessary services such as patient demographics registries, provider registries, authentication and authorization policies and services etc.; these are therefore not part of the formal scope of this document but are referred to as being assumed and necessary complementary services;

— to require an ISO/TS 22600 series compatible architecture or its equivalent will be used for managing security services, and not to duplicate or conflict with these services in this document;

— to further support the protection of patient privacy by avoiding the need to reveal if any EHR data has been withheld by the provider when responding to a request;

— to enable each interface and term set to be extended locally to cater for specialised circumstances of EHR communication, in which additional requirements constraints might apply.

This document defines a set of interfaces by which the different artefacts defined in ISO/DIS 13606-1 [1] , ISO 13606-2 [2] and ISO 13606-4 [3] may be requested and provided:

a) ISO/DIS 13606-1 [1] defines a reference model for an EHR_EXTRACT: part or all of the EHR of a subject of care;

b) ISO 13606-2 [2] defines an information model for an ARCHETYPE, and optionally a serialised form represented using Archetype Definition Language;

c) ISO 13606-4 [3] defines an EHR_AUDIT_LOG_EXTRACT to communicate the audit log activity history pertaining to part or all of an EHR .

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