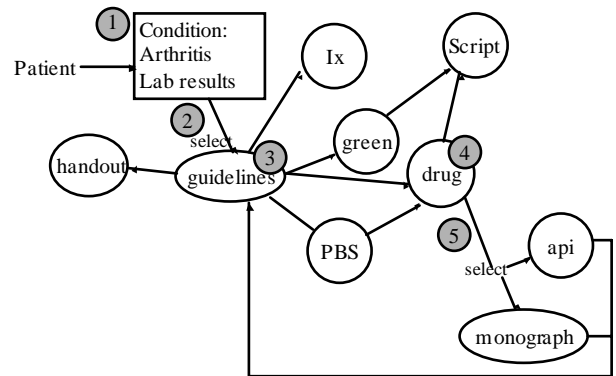


# DSS Standards Development requirement analysis

Group 2

## Use case



## Requirements

- Selecting the right guideline
- Getting to the guideline
  - Input (data source) to inference engine
    - Relevant clinical information for decision (EHR extract)
    - (HealthConnect / openEHR / CDA / HL7 V3 referral)
- ??? Need for a guideline query language

## Requirements

- Terminology
  - Disease / signs / symptoms / disease class / condition / problem (??? SNOMED)
  - Drug / generic / active substance / package / class (International work)
- Structure of guideline (GEM / DSML)
  - Input (data source) to inference engine
    - Relevant clinical information for decision (EHR extract)
    - (HealthConnect / openEHR / CDA / HL7 V3 referral)
  - Output / what are/whatmore are required
    - Rules / text
    - actions

## Requirements

- The inference engine

## Issues

- Where are the rules?
- Where are they run?
- QA?
  - Validation/evaluation process

## Jobs

- Prerequisites
  - SNOMED; Drug classification
- Three standards (SC; DG; CL-M; PF; CM; CL; LP)
  - Guideline selection / query language standard
  - Guideline structure (GEM / DSML)
  - Inputs to guideline/inference engine
    - EHR extract
- One demonstration project (AM; GE)
  - Scope: e.g. Stroke (guideline available from NZGG)
  - RACP/RCPA: stroke diagnostics (CS)
  - SNOMED evaluation (CS)
  - AusDI/MIMS: stroke medication

## Business case / Budget

- Project management: 35K
- HDF development: 35K
- Meetings: 2 x F2F + conf call: 10K
- eEditor: 40K
- Web host: ???
- Interoperability demo: 20K
- Vendor: 40K
- Evaluation: 20K