MIMS Coding Requirements

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CATEGORY	NEHTA Products				
AFFECTS	All Sites				
TOPIC	**MIMS Coding Requirements**				
DETAIL					

Introduction

This document describes requirements for how to represent MIMS codes in CDA documents. They are derived from the rules in the CDA standard, the NEHTA CDA implementation guides, and further clarified in the coding advice already issued. All these sources provide general standards, requirements and advice, but are not specific about how to handle medications codes when coded using MIMs. This clarification is issued to ensure that there is no confusion around the important subject of how to correctly encode medications in CDA documents, and to prevent operational confusion around representation of medications.

Conformance

This document contains requirements for systems producing CDA documents, to ensure that they are constructed correctly.

This document also contains requirements for systems processing and displaying CDA documents, whether received directly or via the pcEHR.

Note that the requirements expressed in this document are not ones that can be tested by inspection of a CDA instance, NEHTA will be checking on conformance to these requirements as much as possible.

Scenario

Many of the existing general practice and specialist solutions use the MIMS medication list for coding medications, and for providing decision support with regard to drug-drug interaction checking for example. On the other hand, the CDA documents specify that the correct coding for the medications is the AMT, as this is the long term policy direction for medications in Australia. To assist in this transition, MIMs is providing the vendors with translations between the MIMS codes and the AMT.

These translations are actually provided in the form of a CD fragment, ready to insert into the CDA document:

```
<code code="83510101" codeSystem="1.2.36.1.2001.1005.11.1"
 codeSystemName="MIMS Standard Code set"
codeSystemVersion="20110900"
   displayName="Ganfort 0.3/5 Eye drops 3 mL [1] (Restricted -
PBS/RPBS) rpt: 5">
  <originalText><!--insert originalText here--></originalText>
 <translation code="78835011000036104"
codeSystem="1.2.36.1.2001.1004.100"
codeSystemName="Australian Medicines Terminology (AMT)"
codeSystemVersion="2.25"
displayName="GANFORT 0.03% / 0.5% eye drops: solution, 3 mL"/>
```

</code>

Requirements for Document Authors

Rule #1: The document author SHALL populate the original text with the text description of the medication that the user selected or saw on the screen.

This rule is a restatement of the requirements specified in CDA itself, and the CDA Implementation guide: The originalText is the piece that carries the original intent of the author. Usually, the user sees some kind of list of possible concepts, where what is shown is the "displayName" of the concept, often with the assistance of a context or a filter, and then picks the concept they wish from the list. In this case, the originalText is the displayName.

In some other contexts, users often pick a code directly based on their familiarity with the code system (i.e. MBS codes for common consultations). However this is not appropriate practice for MIMS codes. For MIMS codes, the displayName should always be used rather than allowing the user to pick a MIMs code directly.

Rule #2: The document author SHOULD populate the original text with the MIMS Display Name

This rule is a "should", not a "shall", because NEHTA is not seeking to make rules about the user interaction process here, only about the way it is represented in CDA. However we are not aware of any user practice where the displayName is not the appropriate originalText.

Rule #3: When the medication is represented in the narrative, the originalText SHALL be used

Since the originalText carries the human relevant meaning, the originalText is the way to represent the medication in the human relevant narrative.

Requirements for Document Processors

Given the rules above for the author, when the document processor displays the document, it is the originalText – usually the MIMS displayName – that is shown to the user. However if the system makes use of the structured data, it has multiple fields to choose from.

Rule #4: When displaying medications extracted from the structured document to the user, the originalText SHALL be displayed.

Since the originalText contains the human-relevant description of the medication, this is what must be shown to the user. Note that other information, such as the MIMS code, or the AMT description, may also be shown in addition to the originalText to assist the user to work with the medication.

Rule #5: If the medications are processed automatically into some other form or document, the originalText SHALL be maintained

Whether the processing involves automatic processing in dispensing system, or

collation of medications in a pcEHR indexing system, the originalText must be maintained so that it can be used when there is human interaction about the medication – either final review of the dispense, or reading the pcEHR index, for example. If the target system cannot store and/or process the originalText (i.e. some messaging format or database that has no data element for the originalText), then it cannot be a target of the processing.