

Awardee of The Office of the National Coordinator for Health Information Technology

Component 6: Health Management Information Systems Instructor Manual

Version 3.0/Spring 2012

Notes to Instructors

This Instructor Manual is a resource for instructors using this component. Each component is broken down into units, which include the following elements:

- Learning objectives
- Suggested student readings, texts, reference links to supplement the narrated PowerPoint slides
- Lectures (voiceover PowerPoint in Flash format); PowerPoint slides (Microsoft PowerPoint format), lecture transcripts (Microsoft Word format); and audio files (MP3 format) for each lecture
- Self-assessment questions reflecting Unit Objectives with answer keys and/or expected outcomes
- Application Activities (e.g., discussion questions, assignments, projects) with instructor guidelines, answer keys and/or expected outcomes

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Component Overview

Each Learning Unit requires 2-3 contact (or instructional) hours and an additional 6-9 hours of independent or team work on the part of the student to be successfully completed. Each unit contains more material than would likely be used in any one teaching/learning experience so that the instructor can pick and choose material most applicable to local workforce needs.

Content covering Hardware and Software Supporting Health Information Systems can be found in Component 4.

Content covering Human-Computer Interaction can be found in Component 15.

Content covering Public Health and Biosurveillance in Health Care Systems can be found in Component 13.

This entire Component is estimated to require 20-30 total contact/instructional hours plus 50-65 additional hours of independent or team work, depending on the learning activities and assessments used within each unit.

Component Objectives

At the completion of this component, the student will be able to:

- Describe general functions, purposes and benefits of health information systems in various health care settings
- Describe the federal initiatives and other significant developments that have influenced the evolution and adoption of health information systems
- Compare/Contrast different types of health information systems in terms of their ability to meet the needs of various types of health care enterprises
- Explain how electronic health records affect patient safety, quality care, efficiency, productivity, and reporting/documentation mechanisms
- Propose strategies to minimize major barriers to the adoption of electronic health records
- Explain how the principles of health care data exchange and health care data standards relate to patient care, productivity and data analysis

Component Authors

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Disclaimer

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Likewise, the above also applies to the Curriculum Development Centers (including Columbia University, Duke University, Johns Hopkins University, Oregon Health & Science University, University of Alabama at Birmingham, and their affiliated entities).

Component 6/Unit 1

Unit Title What is Health Informatics?

Unit Description

Lecture **a** defines information management, information technology, and informatics, describes the fundamental theorem of informatics, explains the meaning of biomedical and health informatics as a field of study, and offers definitions of the major biomedical informatics areas of applications. It also provides an overview of informatics drivers and trends in the health care field. Lecture **b** defines the informatics team, their skills, roles and responsibilities, and identifies how health informaticians process data into information and knowledge for health care tasks with the support of information technology to improve patient care.

Unit Objectives

By the end of this unit the student will be able to:

- 1. Define information management, information system (technology) and informatics
- 2. Explain the basic theoretical concept that underlies informatics practice
- 3. Define the meaning of biomedical and health informatics as a field of study
- 4. Describe the biomedical informatics areas of applications
- 5. Summarize the informatics drivers and trends
- 6. State the professional roles and skills of health informaticians
- Identify how health informaticians process data into information and knowledge for health care tasks with the support of information technology to improve patient care

Unit Topics / Lecture Titles

1a Introduction to Health Informatics1b Roles and Skills of Health Informaticians

Unit References

(All links accessible as of 12/13/2011)

Lecture 1a

- 1. Altman, R. B., & Mooney, S. D. (2001). Bioinformatics. In Shortliffe. E., & Cimino, J.J. (Eds.), *Biomedical informatics: Computer applications in health care and biomedicine* (3rd ed.) (p. 763. New York, NY: Springer Science + Business Media.
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- http://rwjms.umdnj.edu/education/current_students/academics/mdms_biomedicalinformatics.pdf*
- 13. U.S. Department of Health and Human Services, The Office of the National Coordinator for Health Information Technology. (2009, December 4). Health IT terms. Retrieved from http://healthit.hhs.gov/portal/server.pt?open=512&mode=2&cached=true&objID=1256&PageID=15726*
- 14. World Health Organization. (2011). eHealth. Retrieved from http://www.who.int/topics/ehealth/en/

Lecture 1a Charts, Tables and Figures

- 1.1 Figure: Friedman, C. (2009). A "fundamental theorem" of biomedical informatics. *Journal of the American Medical Informatics Association*, 16(2), 169-170. doi: 10.1197/jamia.M3092
- 1.2 Figure: Biomedical Informatics: Modified by Dr. Jiajie Zhang, The University of Texas at Houston, School of Biomedical Informatics from Shortliffe, E., & Blois, M. (2006). The computer meets medicine and biology: Emergence of a discipline. In Shortliffe, E., & Cimino, J.J. (Eds.), *Biomedical informatics: Computer applications in health care and biomedicine* (3rd ed.) (pp. 3-45). New York, NY: Springer Science + Business Media.

Lecture 1b

- 1. AMIA. (2011). The clinical informatics subspecialty. Retrieved from http://www.amia.org/clinical-informatics-medical-subspecialty
- 2. Department of Health and Human Services, National Library of Medicine. (2011). Institutional grants for research training in biomedical informatics (T15). Retrieved from http://grants.nih.gov/grants/guide/rfa-files/RFA-LM-06-001.html
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Unit Required Readings

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- Hersh. W. (2008). Health and biomedical informatics: opportunities and challenges for a twenty-first century profession and its education. Yearbook of Medical Informatics. Retrieved from http://www.schattauer.de/en/magazine/subject-areas/journals-a-z/imia-yearbook/imia-yearbook-2008/issue/840/manuscript/9833.html
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Unit Suggested Readings

- Al-Shorbaji, N. (2001, May). Health and medical informatics: Technical paper. Retrieve from http://www.emro.who.int/his/ehealth/ MedicalInformatics.pdf
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Student Application Activities

comp6_unit1_discuss.doc comp6_unit1_discuss_key.doc comp6_unit1_activity.doc comp6_unit1_activity_key.doc comp6_unit1_self_assess.doc comp6_unit1_self_assess key.doc

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Component 6/Unit 2

Unit Title

Health Information Systems Overview

NOTE: This Unit was previously titled Hardware and Software Supporting Health Information Systems. It is now Health Information Systems Overview

Unit Description

Lecture **a** defines the concept of an information system and its characteristics, describes the different types of information systems, and describe various types of technologies that support health care information systems. Lecture **b** examines the challenges presented by emerging trends in information technology (e.g., mobility, web services, the Internet, Intranet, and wireless computing), social media, and global communications and discusses the advantages and disadvantages of using the Internet as a platform for health care applications.

Unit Objectives

By the end of this unit the student will be able to:

- Define the concept of an information system and its characteristics
- 2. Describe the different types of information systems
- 3. Describe various types of technologies that support health care information systems
- 4. Examine the challenges presented by emerging trends in information technology, social media, and global communications
- 5. Discuss the advantages and disadvantages of using the Internet as a platform for health care applications

Unit Topics / Lecture Titles

2a Introduction to Health Information Systems2b Emerging Trends in Health Information Technology

Unit References

(All links accessible as of 2/10/2012)

^{*}Indicates this link is no longer functional.

Lecture 2a

- AHIMA e-HIM Work Group on Electronic Document Management as a Component of EHR. (2003). Retrieved from http://library.ahima.org/xpedio/groups/public/documents/ahima/bok1_022141. hcsp?dDocName=bok1 022141*
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Lecture 2b

- American Health Information Management Association. (2012). Pocket glossary for health information management and technology (3rd ed.). Chicago, IL: Author.
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- Mell, P., & Grance, T. (2009, October). The NIST definition of cloud computing. Retrieved from http://www.nist.gov/itl/cloud/upload/cloud-def-v15.pdf
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Unit Required Readings

- AHIMA e-HIM Work Group on Electronic Document Management as a Component of EHR. (2003). Retrieved from http://library.ahima.org/xpedio/groups/public/documents/ahima/bok1_022141. hcsp?dDocName=bok1 022141*
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 (2012). e-Health. Retrieved from http://www.health.gov/communication/ehealth/Default.asp

Unit Suggested Readings

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 private, public, or somewhere in between. Retrieved from http://blogs.technet.com/b/microsoft_blog/archive/2010/06/28/cloud-computing-in-healthcare-private-public-or-somewhere-in-between.aspx
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Student Application Activity

comp6_unit2_activity.doc comp6_unit2_activity_key.doc comp6_unit2_self_assess.doc comp6_unit2_self_assess_key.doc

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Component 6/Unit 3

Unit Title Electronic Health Records

Unit Description

Lecture a defines an electronic medical record (EMR) and electronic health record (EHR) and explains their similarities and differences, identifies attributes and functions of an EHR, discusses the issues surrounding EHR adoption and implementation, and describes the impact of EHRs on patient care. Lecture **b** links EHRs to the Health Information Exchange (HIE) and the Nationwide Health Information Network (NHIN) initiatives, discusses how HIE and NHIN impact health care delivery and the practice of health care providers, summarizes the governmental efforts related to EHR systems including meaningful use of interoperable health information technology and a qualified EHR, describes the Institute of Medicine's vision of a health care system and its possible impact on health management information systems, and lists examples of the effects of developments in bioinformatics on health information systems.

Unit Objectives

By the end of this unit the student will be able to:

- 1. State the similarities and differences between an electronic medical record (EMR) and electronic health record (EHR)
- 2. Identify attributes and functions of an EHR
- 3. Describe the perspectives of health care providers and the public regarding acceptance of or issues with an EHR, which can serve as facilitators of or major barriers to its adoption
- 4. Explain how the use of an EHR can affect patient care safety, efficiency of care practices, and patient outcomes
- 5. Discuss how Health Information Exchange (HIE) and Nationwide Health Information Network (NHIN) impact health care delivery and the practice of health care providers
- 6. Outline issues regarding governmental regulation of EHR systems, such as meaningful use of interoperable health information technology and a qualified EHR
- Summarize how the Institute of Medicine's Vision for 21st Century Health Care and Wellness may impact health management information systems

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8. Identify how ongoing developments in biomedical informatics can affect future uses and challenges related to health information systems

Unit Topics / Lecture Titles

3a Introduction to Electronic Health Records 3b External Influences

Unit References

(All links accessible as of 12/13/2011)

Lecture 3a

- AHIMA e-HIM Work Group on Maintaining the Legal EHR. (2005). Update: Maintaining a legally sound health record—paper and electronic. *Journal of AHIMA 76*(10), 64A-L. Retrieved from http://library.ahima.org/xpedio/groups/public/documents/ahima/bok1_028509.hcsp?dDocName=bok1_028509
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- 10. The National Alliance for Health Information Technology. (2008, April 28). Defining key health information technology terms. Retrieved from http://healthit.hhs.gov/portal/server.pt/gateway/PTARGS 0 10741 848133 0 0 18/10 2 hit terms.pdf
- U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. (2010, July13). *Electronic* health records at a glance. Retrieved from http://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-Sheets/2010-Fact-Sheets-ltems/2010-07-132.html

Lecture 3a Charts, Tables and Figures

- 3.1 Table: EMR and EHR Comparison
- 3.2 Table: HL7 2007 EHR-S Functional Model Direct Care Functions Subsets with Examples

Lecture 3b

- 1. Department of Health and Human Services. (n.d.). *Nationwide health information network: Background and scope*. Retrieved from http://www.hhs.gov/healthit/healthnetwork/background/*
- 2. Department of Health and Human Services. (2011, November 7). *EHR incentive programs overview.* Retrieved from https://www.cms.gov/ehrincentiveprograms/#BOOKMARK1
- Healthcare Information and Management Systems Society. (2009, March). Health information exchanges: Similarities and differences. Retrieved from http://www.himss.org/content/files/RHIO/HIE CommonPracticesWhitePaper20090330.pdf*
- 4. Health Information Technology for Economic and Clinical Health Act of 2009. Public Law 111-5, Section 3000(13) (2009a).
- Health Information Technology for Economic and Clinical Health Act of 2009. Public Law 111-5, Section 3001(b) (2009b).
- Health Information Technology: Initial Set of Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology; Final Rule, 45 CFR Part 170 (July 28, 2010). Retrieved from http://edocket.access.gpo.gov/2010/pdf/2010-17210.pdf

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Lecture 3b Images

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Unit Required Readings

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Component 6/Unit 4

Unit Title

Computerized Provider Order Entry (CPOE)

Unit Description

Lecture **a** defines CPOE, states the purpose of CPOE, lists attributes and functions of CPOE, and explains how CPOE is currently being used in health care. Lecture **b** describes the major value to adopting CPOE applications, identifies the common barriers to adoption, and summarizes the potential impact CPOE has on patient care safety, quality and efficiency, and patient outcomes.

Unit Objectives

By the end of this unit the student will be able to:

- 1. Describe the purpose, attributes and functions of CPOE
- 2. Explain ways in which CPOE is currently being used in health care
- 3. Discuss the major value to CPOE adoption
- 4. Identify common barriers to CPOE adoption
- 5. Identify how CPOE can affect patient care safety, quality and efficiency, as well as patient outcomes

Unit Topics / Lecture Titles

- 4a. Introduction to CPOE
- 4b. Aspects of CPOE

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Student Application Activities

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Component 6/Unit 5

Unit Title Clinical Decision Support Systems

Unit Description

Lecture **a** will offer a definition of clinical decision support, provide some historical context surrounding clinical decision support, describe the requirements of a clinical decision support system, and discuss the relationship of clinical practice guidelines and evidence-based practice to clinical decision support systems. Lecture **b** will identify the challenges and barriers in building and using clinical decision support systems, explain how legal and regulatory technologies may affect their use, and introduce the future directions for clinical decision support systems.

Unit Objectives

By the end of this unit the student will be able to:

- 1. Describe the history and evolution of clinical decision support
- 2. Describe the fundamental requirements of effective clinical decision support systems
- 3. Discuss how clinical practice guidelines and evidence-based practice affect clinical decision support systems
- Identify the challenges and barriers to building and using clinical decision support systems
- 5. Discuss legal and regulatory considerations related to the distribution of clinical decision support systems
- 6. Describe current initiatives that will impact the future and effectiveness of clinical decision support systems

Unit Topics / Lecture Titles

5a Introduction to Clinical Decision Support 5b Perspectives on Clinical Decision Support

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(All links accessible as of 2/10/2012)

Lecture 5a

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Lecture 5a Images

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Component 6/Unit 6

Unit Title Patient Monitoring Systems

Unit Description

Lecture **a** offers a definition of patient monitoring systems, describes the purpose, attributes, and functions of patient monitoring systems, discusses the primary applications and how automation can improve quality of care, and analyzes how the integration of data from many sources assists in medical decision making. Lecture **b** discusses how telehealth communication technologies support clinical care, explains the effectiveness and economic benefit of telehealth, and examines the role smart technology in the home and remote links to health information systems play in enhancing the quality of patient care.

Unit Objectives

By the end of this unit the student will be able to:

- 1. Describe the purpose, attributes, and functions of patient monitoring systems
- Discuss ways in which automation can improve the quality of patient care
- 3. Analyze how the integration of data from many sources assists in making clinical decisions
- 4. Discuss how telehealth communication technologies support clinical care
- 5. Discuss the effectiveness and economic benefit of telehealth
- 6. Examine how smart technology in the home and remote links to health information systems can enhance the quality of patient care

Unit Topics / Lecture Titles

- 6a. Introduction to Patient Monitoring Systems
- 6b. Telehealth and Other Remote Patient Monitoring Technology

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Component 6/Unit 7

Unit Title Medical Imaging Systems

Unit Description

The lecture offers a definition of medical imaging, describes the purpose, processes, and management issues of medical imaging systems, analyzes the economic and technological factors that must be considered in the adoption of digital displays in radiology departments, looks at the major challenges with imaging systems faced by health care institutions and informaticians, and examines the future directions for imaging systems.

Unit Objectives

By the end of this unit the student will be able to:

- 1. Examine the purposes, processes, and management issues
- 2. Understand the economic and technological factors associated with digital displays
- 3. Describe the major challenges
- Describe the future directions

Unit Topics / Lecture Titles

7 Medical Imaging Systems

Unit References

(All links accessible as of 2/10/2012)

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Student Application Activities

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Component 6/Unit 8

Unit Title

Consumer Health Informatics

Unit Description

Lecture a provides a definitions of health communication, e-Health, consumer health informatics, and interactive health communication, identifies how the Internet has impacted consumer health informatics, explains how current and emerging technologies may affect consumer health informatics, and introduces the role of genomics in consumer health informatics. Lecture b offers definitions of personal health records or PHRs, describes the role of PHRs and their implications within health care, and discusses the challenges of consumerism in health information systems.

Unit Objectives

By the end of this unit the student will be able to:

- Explain how current and emerging technologies have impacted and may continue to affect consumer health informatics
- 2. Describe the role of genomics in consumer health informatics
- 3. Describe the emergence of personal health records and their implications
- 4. Discuss how consumerism influences the ongoing development and use of health information systems

Unit Topics / Lecture Titles

8a Introduction to Consumer Health Informatics 8b Personal Health Records and Consumerism

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(All links accessible as of 2/10/2012)

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Component 6/Unit 9

Unit Title

Administrative, Billing, and Financial Systems

Unit Description

Lecture a examines the relationship of administrative, billing, and financial systems to the health care information system, explains applications that need to be integrated in health care information systems, explores health care organizations' integration strategies, identifies the critical elements for integration of these systems with clinical information systems, and discusses how health care organizations may gain valuable insights from integrated data through data analytics and trending. Lecture b defines a master patient index or MPI and describes its core elements and discusses current trends to establish a unique patient identifier.

Unit Objectives

By the end of this unit the student will be able to:

- Explain applications that need to be integrated in health care information systems
- 2. Describe the strategies used by health care organizations to ensure integration of functions
- 3. Discuss the critical elements needed to integrate billing, financial, and clinical systems
- 4. Discuss the core elements of a Master Patient Index (MPI)
- 5. Describe current trends to establish a Unique Patient Identifier (UPI)

Unit Topics / Lecture Titles

9a Introduction Administrative, Billing, and Financial Systems and Health Care Information Systems Integration
9b Master Patient Index and the Unique Patient Identifier

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Component Acronym Glossary

	Acronym	n Name
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AAFP American Academy of Family Physicians
ABIM American Board of Internal Medicine
ACK Acknowledgment (Data networks)

ACLs Access Control Lists

ACM Association for Computing Machinery
ACMI American College of Medical Informatics

ACR American College of Radiology
ADaM Analysis Data Model (ADaM)
ADA American Dental Association

ADEs Adverse Drug Events
ADR Adverse Drug Reaction

ADT Admissions, Discharge, Transfer

AHIC American Health Information Community

AHIMA American Health Information Management Associa-

tion

AHIP America's Health Insurance Plans

AHRQ Agency for Healthcare Research and Quality

AM Amplitude Modulation

AMA American Medical Association

AMIA American Medical Informatics Association
ANSI American National Standards Institute
API Application Programming Interfaces

ARRA American Recovery and Reinvestment Act

ASC X12 Accredited Standards Committee

ASTM American Society for Testing And Materials

ASQ American Society for Quality

ATA American Telemedicine Association

ATCB Authorized Testing and Certification Bodies

ATM Asynchronous Transfer Mode

AUP Acceptable Use Policy

BCMA Bar Code Medication Administration

BCP Business Continuity Planning

BIS Bispectral Index
BMI Body Mass Index
bps Bits Per Second

BRIDG Biomedical Research Integrated Domain Group

BSA Body Surface Area

Health IT Workforce Curriculum

BSLM Bioinformatic Sequence Markup Language

CA Certificate Authority

CaDSR Cancer Data Standard Repository
CAP College of American Pathologists

CBA Cabarrus Health Alliance
CCD Continuity of Care Document

CCHIT Certification Commission for Healthcare Information

Technology

CCOW Clinical Context Object Workgroup (HL7)

CCR Continuity of Care Record
CDA Clinical Document Architecture

CDASH Clinical Data Acquisition Standards Harmonization

CDC Centers for Disease Control and Prevention

CDE Common Data Elements

CDISC Clinical Data Interchange Standards Consortium

CDM Chronic Disease Management CDS Clinical Decision Support

CDSR Cochrane Database of Systematic Reviews

CDSS Clinical Decision Support System

CEN European Committee for Standardization

CG Clinical Genomics

CHF Congestive Heart Failure
CHI Consumer Health Informatics

CICA Context Inspired Component Architecture

CIS Clinical Information System

CMET Common Message Element Type

CMM Capability Maturity Model

CMMI Capability Maturity Model Integration

CMS Centers for Medicare and Medicaid Services
COPD Chronic Obstructive Pulmonary Disease

COTS Commercial Off-the-Shelf CPM Common Product Model

CPOE Computerized Provider Order Entry
CPT Current Procedural Terminology
CQI Consumer Quality Initiatives
CRL Certificate Revocation List

CRT Cathode Ray Tube

CSI Computable Semantic Interoperability

CSMA/CA Carrier Sense Multiple Access/Collision Avoidance CSMA/CD Carrier Sense Multiple Access / Collision Detection

Health IT Workforce Curriculum

CT Computed Tomography

CTA Center for Technology and Aging
CTSA Clinical Translational Science Act
CWM Common Warehouse Model
DAC Discretionary Access Control
DAM Domain Analysis Model

DFDs Data Flow Diagrams

DHCP Dynamic Host Configuration Protocol

DHHS Department of Health and Human Services
DICOM Digital Imaging and Communications in Medicine
DMAIC Define, Measure, Analyze, Improve, Control

DMIM Domain Message Information Model

DNS Domain Name Service
DoD Department of Defense

DoS Denial of Service

DRG Diagnosis-related Group
DSL Digital Subscriber Line
DSS Decision Support System
DSTU Draft Standard for Trial Use
DTD Document Type Definition

DURSA Data Use and Reciprocal Support Agreement

EA Enterprise Architecture
EBM Evidence Based Medicine
ECG Electrocardiography
ED Emergency Department
EDI Electronic Data Interchange

EDMS Electronic Document Management System

EEG Electroencephalogram
EHR Electronic Health Records

EHR-FM Electronic Health Record-Systems Functional Model

EHR-S Electronic Health Record-Systems

EHRVA Electronic Health Record Vendors Association

eMAR Medication Administration Records

EMEA European Medicines Agency
EMI Electromagnetic Interference
eMR Electronic Medical Records

EMR Electronic Medical Records/ Patient Management

EMR/PM Electronic Protected Health Information

ePHI Enterprise Master Patient Index

EPMI Electronic Prescribing

Health IT Workforce Curriculum

E-R Entity-Relationship

ERDs Entity-Relationship Diagrams

eRX Electronic Prescribing

EVS Enterprise Vocabulary Service
FACA Federal Advisory Committee Act
FDA Food and Drug Administration
FDDI Fiber Data Distributed Interface

FERPA Family Educational Rights and Privacy Act

FM Frequency Modulation

FMEA Failure Mode and Effects Analysis

FTP File Transfer Protocol

FQHC Federally Qualified Health Center
GDSN Global Data Synchronisation Network

GELLO an object-oriented expression language for clinical

decision support

GEM Guideline Elements Model
GIN Generic Incident Notification
GIS Geographic Information System
GLIF GuideLine Interchange Format

HCD Human Centered Design

HCIS Health Care Information System HDC Health Disparities Collaborative

HDF Hierarchical Data Format

HHS U.S. Department of Health and Human Services

HIE Health Information Exchange
HIM Health Information Management

HIMSS Health Information and Management Systems Society
HIPAA Health Insurance Portability and Accountability Act
HIS Health Information System or Hospital Information

Systems

HISPC Health Information Security and Privacy Collaboration

HIT Health Information Technology

HITECH Health Information Technology for Economic and Clin-

ical Health

HITPC Health Information Technology Policy Committee
HITSC Health Information Technology Standards Committee
HITSP Health Information Technology Standards Panel

HL7 Health Level Seven

HMD Hierarchical Message Descriptions

HRSA Health Resources and Services Administration

Health IT Workforce Curriculum

HSSP Healthcare Services Specification Project

HTTP Hypertext Transfer Protocol

HW Hardware Hz Hertz

IANA Internet Assigned Numbers Authority ICD International Classification of Diseases

ICD-10-CM International Classification of Diseases, 10th Revi-

sion, Clinical Modification

ICH International Conference on Harmonisation of Techni-

cal Requirements for Registration of Pharmaceuticals

for Human Use

ICMP Internet Control Message Protocol

ICPC International Classification of Primary Care

ICSR Individual Case Safety Report

ICT Information and Communication Technologies

ICU Intensive Care Unit

IDS Intrusion Detection System

IE Internet Explorer

IEC International Electrotechnical Commission
IEEE Institute of Electrical and Electronics Engineers

IETF Internet Engineering Task Force IG Implementation Guide (HL7)

IHE Integrating the Healthcare Enterprise

IHS Indian Health Services

IHTSDO International Health Terminology Standards Develop-

ment Organisation

IIS Internet Information Services
INR International Normalized Ratio

IOM Institute of Medicine
IP Internet Protocol
IP/OP Inpatient/Outpatient
IS Information System

ISDN Integrated Services Digital Network

ISO International Organization for Standardization

ISO/TC International Organization for Standardization's (ISO)

Technical Committee (TC) on health informatics

IT Information Technology

ITS Implementable Technology Specifications (HL7)

JIC Joint Initiative Council LAB Laboratory Data Model

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LAN Local Area Network

LDAP Lightweight Directory Access Protocol

Consortium of major companies and other large pri-Leapfrog Group

vate and public healthcare purchasers

LIMS Lab Information Management System

LLC Logical Link Control

LOINC Logical Observation Identifiers Names and Codes

MAC Mandatory Access Control

Medication Administration Record MAR

Medical Doctor MD

Model Driven Architecture MDA **MDE** Master Data Element

MDF Methodology Development Framework

MDM Master Data Management

System of standardized medical terminology devel-MEDCIN

oped by Medicomp Systems

Medical Dictionary for Regulatory Activities MedDRA Multipurpose Internet Mail Extensions MICR MIME Magnetic Ink Character Recognition MIS Management Information System

MLM Medical Logic Module

MLLP Minimal Lower Layer Protocol

Medicare Prescription Drug, Improvement, and Mod-MMA

ernization Act or Medicare Modernization Act

MMIS Medicaid Management Information System

MOTS Modifiable Off-the-Shelf MPI Master Patient Index

MSH Message Header Segment

MU Meaningful Use

NAHIT National Alliance for Health Information Technology

NAT **Network Address Translation**

NCPDP National Council for Prescription Drug Programs

NCL National Cancer Institute

NCI-CBIIT National Committee on Vital Health Statistics

NCVHS National Cancer Institute Center for Bioinformatics

and Information Technology

NDC National Drug Codes **NDF** National Drug File

NDF-RT National Drug File-Reference Terminology National Electrical Manufacturers Association NEMA

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NEDSS National Electronic Disease Surveillance System
NETSS National Electronic Telecommunications System for

Surveillance

NetBUI NetBios Extended User Interface NGC National Guideline Clearinghouse

NHIMG National Health Information Management Group

NIC Network Interface Cards
NIH National Institutes of Health

NIST National Institute for Standards and Technology
NIST-ATL National Institute for Standards and Technology-Ad-

vanced Technology Laboratories

NHIN Nationwide Health Information Network

NLB Network Load Balancing
NLM National Library of Medicine
NPI National Provider Identifier

NRZ Non Return to Zero

NTFS New Technology File System NQF National Quality Forum

OASIS Organization for the Advancement of Structured Infor-

mation Standards

OCC Office of Care Coordination
OCL Object Constraint Language

OCR Office of Civil Rights

ODM Operational Data Model or Optical Character Recog-

nition

OID Object Identifier

OLAP Online Analytical Processing OMG Object Management Group

ONC Office of the National Coordinator for Health Informa-

tion Technology

ONC-ATCB Office of the National Coordinator Authorized Testing

and Certification Body

OOD Operating Room

OR Object Oriented Design

OS Operating System

OSI Open Systems Interconnection

OTP One-Time Passwords

OUI Organizational Unique Identifier

OWL Web Ontology Language

PACS Picture Archiving and Communication Systems

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PBMS Pharmacy Benefit Managers

PCI Peripheral Componet Interconnect

PCT Primary Care Trust

PDAs Portable Digital Assistants or Personal Digital Assis-

tants

PDCA Plan-Do-Check-Act
PDSA Plan-Do-Study-Act
PDUs Protocol Data Units

PHDSC Public Health Data Standards Consortium

PHER Public Health Emergency Response

PHI Protected Health Information
PHII Personal Health Record

PHR Pubic Health Informatics Institute

PHR-FM Personal Health Record-Functional Model
PIC Process Improvement Committee (HL7)
PIX Patient Identifier Cross-Referencing

PKI Public Key Infrastructure
PM Project Management
PMH Past Medical History
PMI Patient Master Index

PMS Practice Management System

POP Post Office Protocol
PPP Point-to-Point Protocol
QAP Quality Assurance Project
QFD Quality Function Deployment

QI Quality Improvement RA Registration Authority

R-ADT Reservation/Registration-Admission, Discharge,

Transfer

RAID Redundant Array of Independent Disks

RAM Random Access Memory
RBAC Role Based Access Control

RCRIM Regulated Clinical Research Information Management

RELMA Regenstrief LOINC Mapping Assistant

RF Radio Frequency

RFI Radio Frequency Interference RFID Radio Frequency Identifiers

RFP Request For Proposal

RHIOs Regional Health Information Organizations

RIM Reference Information Model

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RIS Radiology Information Systems
RMIM Refined Message Information Model

RMPI Registry Master Patient Index

ROI Return On Investment
RPM Remote Patient Monitoring
RPS Regulated Product Submission

RSNA Radiological Society of North America

RX Prescription

SAEAF Services-Aware Enterprise Architecture Framework

SAIF Services Aware Interoperability Framework

SAN Storage Area Network

SATA Serial Advanced Technology Attachment

SCO SDO Charter Organization

SCSI Small Computer System Interface
SDLC Software Development Life Cycle
SDM Systems Development Method
SDO Standard Development Organization

SDTM Study Data Tabulation Model

SEI Subject Matter Expert

SME Software Engineering Institute
SMTP Simple Mail Transport Protocol

SNOMED Systematized Nomenclature of Medicine

SNOMED CT Systematized Nomenclature of Medicine--Clinical

Terms

SNOMED RT Systematized Nomenclature of Medicine--Reference

Terminology

SNOP Systematized Nomenclature of Pathology

SOA Service Oriented Architecture
SOAP Simple Object Application Protocol

SOP Structured Product Labeling
SPC Statistical Process Control
SPL Standard Operating Procedure
SSA Social Security Administration

SSID Service Set Identifier
SSL Secure Socket Layer
SSN Social Security Number

SSO Single Sign-On

STP Shielded Twisted-Pair

TCP/IP Transmission Control Protocol / Internet Protocol TEPR Toward an Electronic Patient Record Conference

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TLS Transport Layer Security

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TP Twisted-Pair

TPS Transaction Processing System
TSC HL7 Technical Steering Committee

TTL Time to Live

UAT User Acceptance Testing
UDP User Datagram Protocol
UML Uniform Modeling Language

UMLS Unified Medical Language System URLs Universal Resources Locators

UPI Unique Patient Identifier
UPS Un-interrupted power supply

US Ultrasound

USB Universal Serial Bus

US TAG U.S. Technical Advisory Group

UTP Unshielded Twisted-Pair VA Veterans Administration

VA NDF-RT Veterans Administration National Drug File-Reference

Terminology

vMR Virtual Medical Record VPN Virtual Private Network

VSS Volume Shadow Copy Service

VUHID Voluntary Universal Healthcare Identification System

VUMC Vanderbilt University Medical Center

W3C World Wide Web Consortium

WAN Wide Area Network
WAP Wireless Access Point
WHO World Health Organization
WLAN Wireless Local Area Network

WONCA World Organization of National Colleges, Academies

and Academic Associations of General Practitioners/ Family Physicians. (World Organization of Family

Doctors)

WSDL Web Services Description Language

WWW World Wide Web

XDR External Data Representation XML Extensible Markup Language

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^{*}Indicates this link is no longer functional.



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