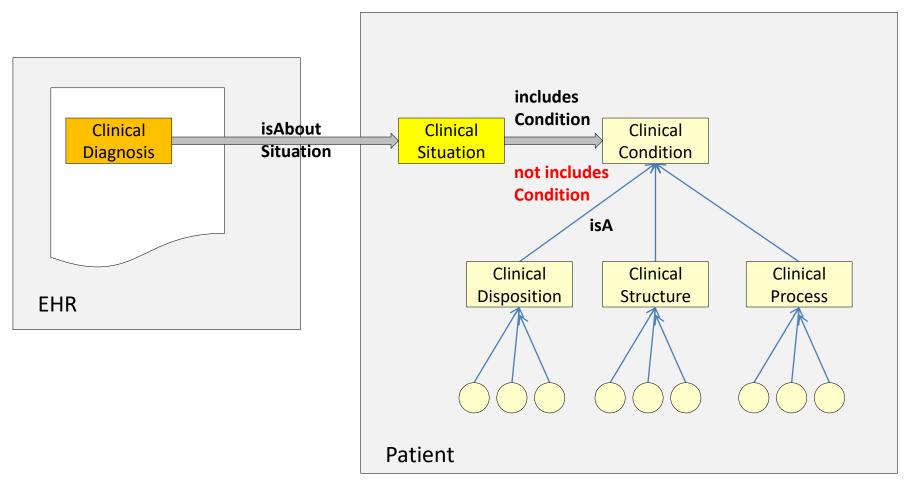
# ICD 11 FC and SNOMED CT – finding as Ontologies of Clinical Situations

Stefan Schulz

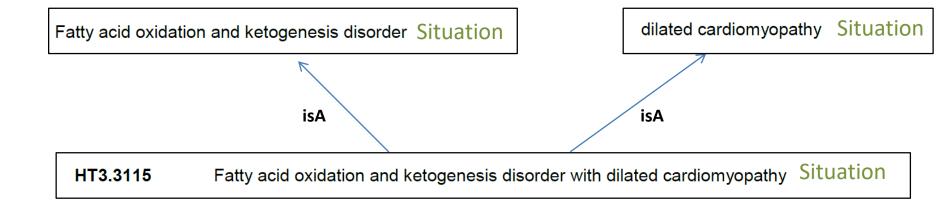
#### Model according to SemanticHealthNet



A clinical situation with X is a phase of a patient's life in which a condition of the type X is wholly present

A clinical situation without X is a phase of a patient's life that does not include any condition of the type X at any time

## Conjunction Example (ICD11 draft)



## Example (ICD11 draft)

		clinical disposition?
HZ8	Chronic peripheral venous insufficiency	
HZ8.1	Lower limb venous hypertension _	clinical process?
	•	clinical structure?
HZ8.2	Lower limb venous telangiectases	
HZ8.3	Lower limb varicose veins clinical structure?	
HZ8 Chronic peripheral venous insufficiency Situation <<		
HZ8	Chronic peripheral venous insufficiency Situation isA	
HZ8.1	Lower limb venous hypertension	Situation
HZ8.2	Lower limb venous telangiectases Situation	
HZ8.3	Lower limb varicose veins Situatio	n <u>isA</u>

#### Situations in SNOMED CT

- Many Is-a links in the SNOMED finding hierarchy only plausible for situations (Tetralogy of Fallot example), cf. eHealth 2012 paper
- Very difficult to draw a line between conditions and situations, cf. AMIA 2012 paper
- Caveat: Bipartition in existing SNOMED situation hierarchy (context model):
  - Situations proper (e.g. Has a red eye)
  - Information entities (e.g. Suspected sarcoma)
- See MEDINFO 2012 submission on the SNOMED CT context model

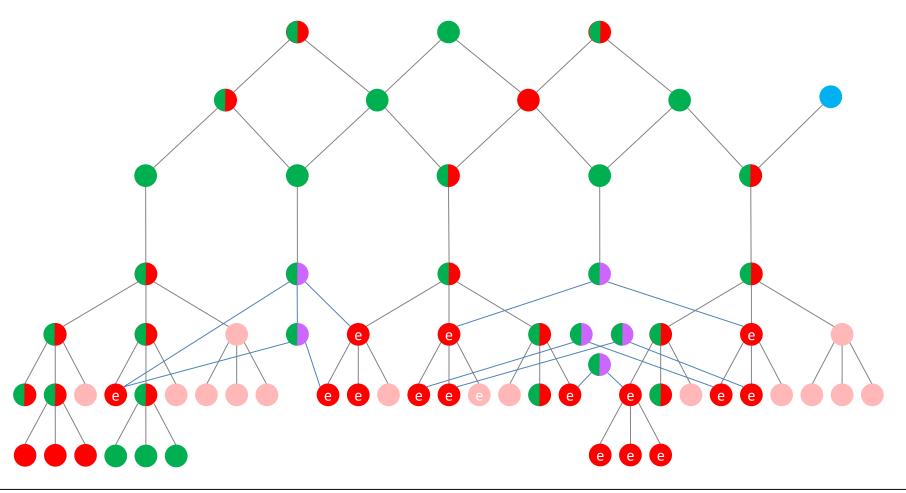
## Open issues (II)

- Consensus in both communities
- Action to "officially" declare SNOMED CT findings/disorders as Clinical situations
- "Situation" in FSNs and text definitions
- What about disjointness of ICD categories?
  - Tricuspid stenosis and Mitral stenosis are disjoint conditions
  - <u>Situation</u> with Tricuspid stenosis and <u>Situation</u> with Mitral stenosis are not disjoint (only very few situations are really disjoint, e.g. pregnancy and prostate cancer)
  - Axiomatization of "Clinical Situation": JAMIA paper under review

## Open issues (II)

- Exclusions:
- Many ICD class that carry (or inherit) exclusions
- Classes with exclusions are managed in the foundational component
- Classes with exclusions do normally not exactly map to SNOMED CT concepts
  - e.g. icd:Acute pericarditis excludes rheumatic p.
  - icd:Acutepericarditis equivalentTo
     sct:AcutePericarditis and not RheumaticPericarditis

# Exclusions and common ontology

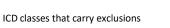




ICD linearizations and FC

only ICD linearizations (residuals)

only FC (common parents of "e")



ICD "heading"
SNOMED CT

