

US Extension to SNOMED CT: Inclusion and Exclusion Criteria

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Introduction

Content that is proposed for inclusion in SNOMED CT must be relevant for use in healthcare. This condition is necessary but not sufficient for automatic inclusion of the content into the International Release of SNOMED CT. In such instances, the proposed content may still be considered for inclusion in the US Extension to SNOMED CT. While all proposed content would ideally be of such compelling quality and need that it would be included in the International Release of SNOMED CT, the establishment of the US Extension provides a means to address more time-urgent or US-specific terminology needs than are reasonable or appropriate to expect of the International Release. In general, the acceptance criteria for the US Extension are broader than the criteria for acceptance into the International Release of SNOMED CT in order to support requirements of the US health IT initiatives. These criteria will be reviewed periodically by the US Extension Guidance Committee and revisions made as necessary and appropriate.

The US Extension to SNOMED CT, managed/controlled by the National Library of Medicine (NLM), plays two important and distinct roles in relation to the International Release of SNOMED CT. First, the US Extension is a means for addressing immediate US programmatic or clinical needs, in a manner that is strictly consistent with the review criteria of the IHTSDO. When demonstrable US needs must be addressed more quickly than the international process for review of content would permit, the US Extension would provide a mechanism for temporary acceptance pending formal review and acceptance into the International Release. Second, the US Extension is a means to address unique US programmatic or clinical needs, provided they are consistent with the review criteria of the IHTSDO. These instances are expected to be few in number.

Content submitted to the NLM for inclusion in SNOMED CT will initially be reviewed according to IHTSDO criteria.^{1,2,3} Criteria for inclusion or exclusion as content in the US Extension (either temporary or permanent) are listed below.

Criteria for inclusion in the US Extension to SNOMED CT (one or more must apply):

1. The content is reasonably in the healthcare domain.
2. The content is not currently supported by any other recognized standard reference terminology in the U.S.
3. The content complies with US Extension editorial guidelines.

4. The content request is supported by a nationally recognized use case, i.e., it is recognized as a US-specific requirement.
5. The content is within the scope of the International Release of SNOMED CT, but cannot be accommodated in the International Release within the timeframe needed by U.S. users, because:
 - a. The content is on hold by IHTSDO due to inadequate policy addressing the proper representation and placement of the content in the SNOMED CT structure.
 - b. The content is needed in advance of the next International Release.
 - c. The content does not comply with the editorial guidelines of the current content model
 - i. e.g. precoordination of laterality
6. The content does not conform to IHTSDO or US Extension editorial guidelines; however, the content is within the scope of SNOMED CT coverage, with specific term(s) required by U.S. legislative mandate.
7. The content is deemed appropriate by the US Extension Guidance Committee.

Criteria for exclusion from the US Extension of SNOMED CT (one or more must apply):

1. The content is not in US English.
2. The content is not reasonably associated with the healthcare domain.
3. The content is more appropriately represented in another US recognized healthcare standard.
4. The content is specific to the internal operations of the source (proposing) entity.
5. The content uses ambiguous colloquialisms, abbreviations or acronyms.
6. The content is required to comply with short maximum string lengths to conform to limited information models.
7. The content consists of multiple concepts concatenated into narrative text. Exceptions to this policy will be considered when the phrases are required to support US specific quality measures.

In instances where content is rejected for inclusion in the US Extension, NLM will provide a justification for the rejection and may suggest alternative representation(s) of the content that is semantically similar to the requested content for consideration by the submitter. A formal appeal process for rejected content is currently under development.

References:

1. SNOMED Clinical Terms Editorial Guidelines Content Inclusion Principles and Process, 20100312, Version 1.09
2. Pre-coordination Road Map Project Group: Outline process to triage new concept request submissions for the SNOMED CT International Edition that contain expressions. V0.2a
3. IHTSDO Quality Assurance Framework; Introduction and description of IHTSDO quality assurance framework, 05/17/2010, Version 2.0 (http://www.ihtsdo.org/fileadmin/user_upload/Docs_01/Publications/Quality_Assurance/IHTSDO_Quality-Assurance_Framework_20100517_v2.2.pdf)