

# **U.S. Nominations for IHTSDO Standing Committees**

**August 2014**

## **Content Committee Candidates**

Candidates Listed Alphabetically

Candidate Name: **James Campbell**

Affiliation: **University of Nebraska Medical Center**

**James Campbell**  
**Statement of Interest**  
**Content Committee**

I have been active in the terminology standards community for the past 25 years including positions on the SNOMED Editorial Board, IHTSDO Technical Committee and Mapping Special Interest group as well as the Clinical LOINC Committee and HL7 Decision Support SIG. I am currently enrolled in the Consultant terminologist program managed by the IHTSDO. I have pursued these activities in support of development and implementation of Electronic Health Records in my clinical department, my healthcare institution, and for the US realm. I consider SNOMED CT to be a critical element to the development and promulgation of an integrated set of reference terminologies which must be promoted in order to support clinical decision making functionality and interoperability of electronic health records. I see the Content Committee of the IHTSDO as an important body wherein I can pursue those goals and contribute to the development and utility of SNOMED CT. I believe the skills and knowledge that I have accumulated during my professional career can contribute materially to the goals of the IHTSDO and the management of SNOMED CT content.

## BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2.  
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Campbell, James		POSITION TITLE	
eRA COMMONS USER NAME CAMPBELLJAMESR		Professor	
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
University of Rochester, Rochester, NY	BS	1968	Physics (summa cum laude)
Creighton University, Omaha		1974-1975	
University of NE Medical Center, Omaha, NE	M.D.	1976	Internal Medicine
University of NE Medical Center, Omaha, NE	Residency	1979	Internal Medicine
University of NE Medical Center, Omaha, NE	Fellowship	1977-1979	Internal Medicine

### A. Positions and Honors

#### Positions and Employment

1980-1990	Instructor, Internal Medicine, University Nebraska Medical Center, Omaha, NE
1984-1992	Assistant Professor of Internal Medicine, University Nebraska Medical Center, Omaha, NE
1990	Chief of Ambulatory Services, Internal Medicine, University Nebraska Medical Center, Omaha, NE
1990	Associate Professor of Internal Medicine, University Nebraska Medical Center, Omaha, NE
1991-1992	Sabbatical at Massachusetts General Hospital, Laboratory of Computer Sciences, Boston, MA
1993-2012	Chief Medical Information Officer, Nebraska Medical Center/UNMC
1994-present	Member of the Graduate College and Graduate College Faculty Fellow
2000-present	Professor of Internal Medicine

#### Honors

Iota Chapter of Phi Beta Kappa, April 1968  
IHTSDO Award for Excellence in Informatics, April 2009  
Fellow, American College of Medical Informatics, 2012  
Fellow, American College of Physicians, 2013

#### Organization Memberships

1979-Present	American College of Physicians
1981-Present	Society of General Internal Medicine
1985-Present	American Medical Informatics Association
1997-2000	Consultant to the SNOMED Editorial Board, College of Am Pathologists
1999-2003	Associate editor, Journal of American Medical Informatics Association
2002-Present	Health Level Seven
2001-2006	Editorial Board member, SNOMED Editorial Board, College of American Pathologists
2002-2006	Study section member, Biomedical Library and Informatics Review Committee, National Library of Medicine

2006- Technical Committee member through 2013, Chair of Mapping Interest Group, Consultant terminologist Program (2013- ); International Healthcare Technology Standards Development Organization

## B. Selected peer-reviewed journals

1. Tape TG, Campbell JR. Computerized Medical Records and Preventive Health Care: Success Depends on Many Factors. *Am J Med.* 1993; 94(6):619-625
2. Chute CG, Cohn S, Campbell K, Oliver D, Campbell JR. The Content Coverage of Clinical Classifications, for the CPRI Working Group on Codes and Structures. *JAMIA.* 1996 May-June; 3(3):224-233
3. Campbell JR, Carpenter P, Sneiderman C, Chute CG, Warren JJ. Phase II Evaluation of Clinical Coding Schemes: Completeness, Taxonomy, Mapping, Definitions, and Clarity, for the CPRI Workgroup on Codes and Structures. *JAMIA* 1997 May-June; 4(3):238-251
4. Campbell JR. Semantic Features of an Enterprise Interface Terminology for SNOMED RT. *Medinfo 2001 Vol 10(1):* 82-5
5. Tu S, Campbell JR, Musen MA. The structure of guideline recommendations: a synthesis. *Proc AMIA Symposium.* 2003; 679-683.
6. Tu SW, Musen MA, Shankar R, Campbell JR, Hrabak K, McClay J, Huff SM, McClure R, Parker CG, Rocha R, Abarbanel R, Beard N, Glasgow J, Mansfield G, Ram P, Ye Q, Mays E, Weida T, Chute CG, McDonald K, Mohr D, Nyman M, Scheitel S, Solbrig H, Zill DA, Goldstein MK. Modeling Guidelines for Integration into Workflow. *Proc Medinfo 2004.* 2004; 174-178.
7. McClay JC, Campbell JR, Parker C, Hrabak K, Tu SW, Abarbanel R. Structuring Order Sets for Interoperable Distribution. *Proc AMIA Symposium* 2006. 2006: 549-553.
8. Tu SW, Hrabak KM, Campbell JR, Glasgow J, Nyman MA, McClure R, McClay JC, Abarbanel RM, Mansfield JG, Martins SM, Goldstein MK, Musen MA. Use of Declarative Statements in Creating and Maintaining Computer Interpretable Knowledge Bases for Guideline Based Care, *Proc AMIA Symposium.* 2006: 784-8.
9. Hrabak KH, Campbell JR, Tu SW, McClure R, Weida R. Creating interoperable guidelines: requirements of vocabulary standards for immunization decision support. *Proc MEDINFO 2007.* 2007: 930-4.
10. Tu SW, Campbell JR, Glasgow J, Nyman MA, McClure R, McClay J, Parker C, Hrabak KM, Berg D, Weida T, Mansfield JG, Musen MA, Abarbanel RM. The SAGE guideline model: achievements and review. *JAMIA;* 2007 Sep-Oct; 14(5): 589-98.
11. Campbell JR, Xu J, Fung KW. Can SNOMED CT fulfill the vision of a compositional terminology? Analyzing the use case for problem list. *AMIA Annu Symp Proc.* 2011;2011:181-8.
12. Campbell JR, Brear H, Scichilone R, White S, Giannangelo K, Carlsen B, Solbrig H, Fung KW. Semantic interoperability and the EHR: Context sensitive mapping from SNOMED CT to ICD-10. *Stud Health Technol Inform.* 2013; 192:603-607.
13. Campbell WS, Campbell JR, West WW, McClay JC, Hinrichs SH. Semantic analysis of SNOMED CT for a post-coordinated database of histopathology findings. *JAMIA.* 2014 May 15; doi:10.1136/amiajnl-2013-002456.
14. Waitman LR, Aaronson LS, Nadkarni PM, Connolly DW, Campbell JR. The Greater Plains Collaborative: a PCORnet Clinical Research Data Network. *JAMIA.* 2014 Jul; 21(4):637-641.

## C. Research Support:

### Patient Centered Outcome Research Institute

3/1/2014-Present

Greater Plains Clinical Data Research Network

### Completed Support in the last 10 Years:

000-00-4606 National Institute of Standards and Technology, Advanced Technology Program,

12/1/2001-11/30/2006

Standards-based Interoperable Guideline Systems.



## Skills Matrix – Content Committee

Please help us to ensure that IHTSDO Committees consist of a balanced and diverse set of expertise and experience. We would appreciate if you could complete the form below, marking each box for which you have relevant skills or experience.

Thank you for helping to ensure a strong advisory structure for IHTSDO and its Members.

### Nominee

Name	James Campbell
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### Skills Matrix

IHTSDO seeks individuals with a mix of skills to serve on Standing Committees. Please mark the attribute(s) in which you have experience and expertise at an organizational, national and/or international level.

Attributes	Check all that apply
SNOMED CT Editor	Organizational
SNOMED CT Design	International
SNOMED CT Implementation	Organizational
SNOMED CT Tooling	Organizational
Other Terminology Design, Development & Release	National
Other Terminology Implementation	National
Classification & Grouping	National
Engineering of natural language processing (NLP) systems	---
Engineering of semantic systems (ontologies, decision support, knowledge engineering)	Organizational
Command of two or more languages (e.g. Chinese, French, German, etc)	---
National and International Standards Development and/or Approval	International
Registered Clinical Professional (current or past)	Board cert Internal Medicine
Software design and development	Organizational
Software production for market	Organizational
Data Standards Management including Policy	Organizational
Chief Information Officer and/or Chief Technical Architect Management	Organizational
Active in the IHTSDO community (member of SIG and/or Project Group)	International

Candidate Name: **Keith E. Campbell**

Affiliation: **Veterans Health Administration**



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## Statement of Interest

Nominee: Keith E. Campbell MD PhD

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I am currently an active member of the IHTSDO Technical Committee. My term is due to expire in December 2014, and I would like to take this opportunity to transition from participating as a member of the Technical Committee to that of becoming an active member within the Content Committee.

In the past 20 years, I have enjoyed being a member of the Technical Committee, Implementation and Innovation Committee, the SNOMED Technical Committee, and the SNOMED Editorial Board. Recently, I have been transitioning from more technical concerns, to concerns that relate to the curation of SNOMED CT content. I've been preparing for this transition by participating in the IHTSDO Consultant Terminologist Program. I believe that my prior experience as well the new knowledge gained from the IHTSDO Consultant Terminologist Program will make me an asset to the IHTSDO Content Committee.

Through participation in the Content Committee, I hope to closely align the work occurring in the US Veterans Health Administration with the work of the IHTSDO as it relates to SNOMED, SNOMED/LOINC integration, and related activities of mutual concern.

I believe Content Committee work is important because it directly aligns to the IHTSDO's strategic priorities set for 2015.

These are:

1. Make it easier to use SNOMED CT for priority use cases
2. Produce robust terminology standards that are "fit for purpose" for priority use cases
3. Facilitate use of SNOMED CT with other international standards
4. Strengthen responsiveness and clinical governance of SNOMED CT
5. Sustain and strengthen the organizational foundations of IHTSDO

I hope that my involvement in the Content Committee can help bring the perspective of a large clinical organization to the delivery of these strategic priorities.

Thank you for your consideration,  
Keith E. Campbell MD, PhD



## Mini- Curriculum Vitae

NAME Keith Eugene Campbell, M.D., Ph.D.	POSITION TITLE(s) Vice President & Chief Technology Officer; Informatics, Inc. Director of Clinical Decision Support; Department of Veterans Affairs
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EDUCATION/TRAINING			
INSTITUTION AND LOCATION	DEGREE	YEAR(s)	FIELD OF STUDY
Central Washington University, Ellensburg, Washington	B.A.	1984	Chemistry
University of Southern California, Los Angeles, California	M.D.	1989	Medicine
Santa Clara Valley Medical Center, San Jose, California	Internship	1989-1990	Transitional
Stanford University, Stanford, California	Ph.D.	1990-1997	Computer Science/Medical
Santa Clara Valley Medical Center, San Jose, California	Board Eligible	1995-1996	Informatics Internal Medicine

### PROFESSIONAL EXPERIENCE:

1985-1986	GM-Hughes Aircraft Company, El Segundo, CA	Software Engineer
1988-1988	Clinical Center, NIH, Bethesda MD	Research Assistant, Department of Radiology
1989-1990	University of Southern California, Los Angeles, CA	Research Assistant, Applied Pharmacokinetics
1990-1994	Santa Clara Valley Medical Center, San Jose, CA	Primary Care Physician
1993-1994	Ameritech Knowledge Data, Palo Alto CA	Informatics Consultant
1990-1995	Stanford University, Palo Alto, CA	Post-doctoral Fellow
1994-1997	Oceania, Inc. Palo Alto, CA	Informatics Consultant
1995-1998	Kaiser Foundation Health Plan, Oakland, CA	Informatics Consultant
1997-1998	Chiron Informatics, Alameda, CA	Informatics Consultant
1998-2000	The Permanente Company, Oakland, CA	Assistant National Director
1993-2000	Lexical Technology, Alameda, CA	Informatics Consultant
1999-2000	The Veterans Administration, Washington DC	Informatics Consultant
2000-2000	Kaiser Foundation Health Plan, Oakland, CA	Informatics Consultant
2000-2002	Apelon Corporation, Ridgefield, CT	Member, Board of Directors
1998-2004	University of California, San Francisco	Assistant Adjunct Professor
2000-2004	Inoveon Corporation, Oklahoma City, OK	Chief Technology Officer
2004-Curr	Informatics, Inc., Bend, OR	Vice President/Chief Technology Officer
2005-Curr	Oregon Health and Science University, Portland, OR	Assistant Clinical Professor
2010-Curr	Department of Veterans Affairs	Director of Clinical Decision Support

### RESEARCH EXPERIENCE:

1990-1994	Post-doctoral Fellow, Participated in T-Helper project, Initiated the Ivory project, began work on distributed terminology development (dissertation topic). Stanford University, Stanford, CA
1995-1998	Consultant, Convergent Medical Terminology Project, Kaiser Foundation Health Plan, Oakland CA
1998-2000	Principal Investigator, Convergent Medical Terminology Project, The Permanente Company, Oakland CA
2000-2004	Chief Technology Officer, Inoveon, Inc., Oklahoma City, OK
2004-Curr	Chief Technology Officer, Informatics, Inc., Bend, OR

### NATIONAL COMMITTEES:

1993-1996	Consulting Member, SNOMED Editorial Board. College of American Pathologists. Northfield, Illinois
1997-2007	Voting Member, SNOMED Editorial Board. College of American Pathologists. Northfield, Illinois
1998-2001	Vocabulary Committee Co-Chair. Health Level Seven, Inc. Ann Arbor, Michigan
2007-2009	Member, SNOMED R&I Committee. International Health Standard Development Organization. Copenhagen, Denmark
2009 – Curr	Member, Technical Committee. International Health Standard Development Organization. Copenhagen, Denmark

### VOLUNTEER EXPERIENCE:

2014	Clinical Terminology Specialist. Peace Corps. Bend, Oregon
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## Skills Matrix – Content Committee

Please help us to ensure that IHTSDO Committees consist of a balanced and diverse set of expertise and experience. We would appreciate if you could complete the form below, marking each box for which you have relevant skills or experience.

Please send completed forms to the National Library of Medicine via e-mail ([auld@nlm.nih.gov](mailto:auld@nlm.nih.gov)) no later than COB August 4, 2014. Please use the subject "US Nominations – IHTSDO Standing Committees".

Thank you for helping to ensure a strong advisory structure for IHTSDO and its Members.

### Nominee

Name	Keith E. Campbell, MD, PhD
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### Skills Matrix

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Attributes	Check all that apply
SNOMED CT Editor	✓
SNOMED CT Design	✓
SNOMED CT Implementation	✓
SNOMED CT Tooling	✓
Other Terminology Design, Development & Release	✓
Other Terminology Implementation	✓
Classification & Grouping	✓
Engineering of natural language processing (NLP) systems	
Engineering of semantic systems (ontologies, decision support, knowledge engineering)	✓
Command of two or more languages (e.g. Chinese, French, German, etc)	
National and International Standards Development and/or Approval	✓
Registered Clinical Professional (current or past)	✓
Software design and development	✓
Software production for market	✓
Data Standards Management including Policy	✓
Chief Information Officer and/or Chief Technical Architect Management	✓
Active in the IHTSDO community (member of SIG and/or Project Group)	✓

Candidate Name: **Jennifer Garvin**

Affiliation: **University of Utah**

## **Statement of Interest for Dr. Jennifer Garvin**

Dr. Garvin is well suited for a position on the Content Committee for a variety of reasons. She brings 30 years of experience in health information and health informatics management. She recently served a two-year term on the Content Committee. During her tenure she helped the committee to develop a strategic approach to increasing capacity for SNOMED-CT development based on prioritization of key use cases. She also helped develop an internal plan to track the work of the content committee and related activities. During her work on the Healthcare Information Technology Standards Panel (HITSP), a panel “formed for the purpose of harmonizing and integrating standards that meet clinical and business needs for sharing information among organizations and systems”, Dr. Garvin assisted in the development of standards for quality and performance measurement as part of the Population Perspective Technical Committee (PP-TC). This committee developed a quality interoperability specification (IS) which “defines specific standards needed to benefit providers by providing a collection of data for inpatient and ambulatory care and to benefit clinicians by providing real-time or near-real-time feedback regarding quality indicators for specific patients”. She also served on the EHR Clinical Research Tiger team, which is developing a Requirements Design and Standards Selection (RDSS) to use data from the EHR for clinical research such as clinical trials and observational studies.

She served on the American Health Information Management Association (AHIMA) Quality Initiatives and Secondary Data Practice Council for two years. The council advises “AHIMA of the issues and HIM best practices and functions in the quality and secondary data domain.” Dr. Garvin was also elected to the position of Director on the AHIMA Board of Directors. She was appointed to the American Medical Informatics Association and American Health Information Management Association Terminology and Classification Policy Task Force to develop recommendations that will support interoperability and redesign the US approach to healthcare terminologies and classifications accounting for significant international approaches and achievements.

In her current position as a research investigator in the IDEAS Center in VA Salt Lake City she undertakes project using informatics standards, information extraction techniques, and structured data from the EHR to support automation of performance measurement and other health services research. Dr. Garvin gained early professional experience working within an integrated community healthcare system in her role as the Corporate Coordinator of Medical Staff Performance Improvement within the West Jersey Health System. She has corporate experience as the Corporate Coding Consultant with the Corporate Division of Humana, Inc. in Louisville, Kentucky. She served as the Director of Medical Records, Quality Assurance, Utilization Review, Risk Management at St. Joseph Hospital in Philadelphia.

Dr. Garvin has experience with SNOMED CT through her research with the multi-threaded clinical vocabulary server, through her HITSP efforts, and her past work serving on the IHTSDO Content Committee. She uses SNOMED CT in her research and plans to expand her efforts in this regard.

Dr. Garvin is convinced that the work of the Content committee is essential to the success of the healthcare because SNOMED CT is the standard in the US for clinical terminology. The use of SNOMED CT is becoming more and more critical within the electronic health record, because so much depends on accurate and timely development. The work of the Content Committee is key to expanding use of SNOMED CT throughout the world.

**MINI-CURRICULUM VITAE**  
**Jennifer H Garvin PhD, MBA, RHIA, CCS, CPHQ, CTR, FAHIMA**

**Associate Professor, University of Utah, Department of Biomedical Informatics and VA Health Scientist, IDEAS Research Center, Salt Lake City, UT**

**EDUCATION**

**Selected Professional Organization & Scientific Activities**

2006	Member, American Medical Informatics Association, (AMIA)-AHIMA Terminologies and Classifications Policy Task Force
2007 - 2008	Member, American National Standards Institute, Healthcare Information Technology Standards Panel (HITSP), Population Health Technical Committee representing the United States Department of Veterans Affairs
2011 - 2012	Elected Representative, International Health Terminology Standards Development Organization, (Veterans Administration) Note: In this position I represented the VA and the Americas on the Content Committee. We undertook strategic planning efforts to increase capacity to create new SNOMED-CT terminology, to determine important international use cases and to develop a timeline for content creation.
2008 - 2013	United States Department of Veterans Affairs, Consortium for Healthcare Informatics Research (CHIR)—initial member of the grant writing team and researcher in several projects. I also developed and conducted in partnership with the overall PI the initial meetings in Salt Lake City.
2010	Invited Participant, Institute of Medicine, Roundtable Series on Value & Science-Driven Healthcare, "Electronic Infrastructure for the Learning Healthcare System: Strategy Scenarios," sponsored by the Office of the National Coordinator for Health Information Technology Designated VA Representative by Gail Graham
2013 - Present	Member, United States Department of Veterans Affairs, Steering committee for VA Information Resource Center (VIREC)

**Garvin JH, Watzlaf V, Moeini S (2006).** Fighting fraud automatically. *JAHIMA*, 77(3), 32-4, 36. PMID 16573284  
**Weiner MG, Dorr DA, Garvin JH, Kho AN, Pifer E, Bates DW (2006).** Health information technology's potential to improve care: what is the reality? *Tex Med*, 102(7), 37-44. PMID 17115564

**Garvin JH, Weiner MG (2007).** Clinicians and coders are different: Examples of disparities in primary care coding. *AMIA Annu Symp Proc*, 961. PMID 18694061

**Garvin JH, Martin KS, Stassen DL, Bowles KH (2008).** The Omaha System. Coded data that describe patient care. *JAHIMA*, 79(3), 44-9; quiz 51-2. PMID 18422005

**Garvin JH, Jones TD, Washington L, Weeks C (2009).** Data Collection and Reporting for Healthcare disparities. *JAHIMA*, 80(4), 40-43. PMID 19418910

**Garvin JH, Elkin PL, Shen S, Brown S, Trusko B, Wang E, Hoke L, Quiaoit Y, Lajoie J, Weiner MG, Graham P, Speroff T (2012).** Automated Quality Measurement in Department of the Veterans Affairs Discharge Instructions for Patients with Congestive Heart Failure. *LID - 10.1111/j.1945-1474.2011.00195.x [doi]. J Healthc Qual*. PMID 23819743

**Garvin JH, DuVall SL, South BR, Bray BE, Bolton D, Heavirland J, Pickard S, Heidenreich P, Shen S, Weir C, Samore M, Goldstein MK (2012).** Automated extraction of ejection fraction for quality measurement using regular expressions in Unstructured Information Management Architecture (UIMA) for heart failure. *J Am Med Inform Assoc*, 19(5), 859-66. PMID 22437073

**Garvin JH, Redd A, Bolton D, Graham P, Roche D, Groeneveld P, Leecaster M, Shen S, Weiner M (Fall 2013).** Exploration of ICD-9-CM Coding of Chronic Disease within the Elixhauser Comorbidity Measure in Patients with Chronic Heart Failure. *Perspect Health Inf Manag*, 2013 Oct 1(10), 1b. PMID 24159270



## Skills Matrix – Content Committee

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### Nominee

Name	Jennifer Garvin
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### Skills Matrix

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SNOMED CT Editor	
SNOMED CT Design	
SNOMED CT Implementation	
SNOMED CT Tooling	
Other Terminology Design, Development & Release	
Other Terminology Implementation	
Classification & Grouping	x
Engineering of natural language processing (NLP) systems	x
Engineering of semantic systems (ontologies, decision support, knowledge engineering)	
Command of two or more languages (e.g. Chinese, French, German, etc)	
National and International Standards Development and/or Approval	x
Registered Clinical Professional (current or past)	x
Software design and development	x
Software production for market	
Data Standards Management including Policy	x
Chief Information Officer and/or Chief Technical Architect Management	
Active in the IHTSDO community (member of SIG and/or Project Group)	Past Content Committee Member

Candidate Name: **Persko L. Grier, Jr. (PJ)**

Affiliation: **National Network of Libraries of Medicine**





## Statement of Interest – Content Committee

### Nominee

Name	Persko L. Grier, Jr. (PJ)

**Please state why the nominee is suited for the Committee and why the nominee feels that the Committee's work is important.**

#### **Why is the nominee is suited for the Committee?**

Having experience with governance and policy-making pathways honed key attributes that the Committee should seek in a qualified candidate. My candidate attributes include collaboration, tolerance for uncertainty, change, valuing others and membership.

I am a strong proponent of collaboration. Collaborative initiatives are smart ways to getting things done, because they demonstrate that "more" can be accomplished in the end game and frequently at less cost than going it alone. Collaborations capitalize on the complementary strengths of the participating organizations. An example is a statewide, hospital-based, medical information group purchasing alliance that I built.

Having a high tolerance for uncertainty is essential. Coupled with the awareness that it is imperative to be actionable with the information at hand. There is never a point where a decision-maker, or a group consensus, owns 100% of the information, because both knowledge and information is constantly changing. An instance of uncertainty is when I routinely appeared before the DE Health Fund Advisory Council and not knowing for 3-4 months if my agency's annual \$550,000 request for funds would be approved.

Concerning change, everyone should embrace it. Just a few weeks ago while attending a nursing informatics conference, I learned of early planning efforts for ICD-11, already. Here in the U.S., healthcare facilities are just finishing up the bridges between ICD-9 and ICD-10. So a good candidate, or good leader, must be adept at processing change and have a contingency plan ready for review and possible adoption.

Because IHTSDO has a global reach, it is doubly important that its governance context and its staff value other cultures. Personally, I'm currently re-learning Spanish using an online tool and have plans to attend a weeklong cultural immersion program in Veracruz, Mexico next spring. This goal is important to me, not just for the prospect of being elected to join this committee, but I also own property in Mexico. Each time I'm there, my desire for Spanish fluency increases.

In 2013, IHTSDO derived about 97% of its annual income from member fees. This indicates that customer engagement is central to its global clinical terminology mission. I infer that IHTSDO's success is a result of listening to its customers, involving them and delivering value-added products and services. Today, I'm responsible for member relations for 1200 clients and previously for countless customers during my 18-year stay at Verizon Communications.

#### **Why does the nominee feels that the Committee's work is important?**

The Content Committee's work is important because it contributes to SNOMED CT's broad scope and global harmonization. The Committee's work adds direct value to EHRs, it has made available several SNOMED CT subsets, its work has enriched SNOMED CT with the addition of laboratory content from LOINC and it approved an editorial policy focused on diagnostic imaging. The goal of HIT is to be seamless and transparent across healthcare settings. At the goal's core is interoperability and for interoperability to be realized it requires standards and with this audience, specifically clinical terminology standards.





## Mini Curriculum Vitae – Content Committee

### Nominee

Name	<p>Persko L. Grier, Jr. (PJ)</p> <ul style="list-style-type: none"><li>• <i>MS – Public Administration</i>, Stony Brook University</li><li>• <i>MSLIS – Library &amp; Information Science</i>, Drexel University</li><li>• <i>Certificate – Clinical Informatics</i>, Johns Hopkins University</li></ul>
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### Key areas of the nominee's experience and expertise

#### **Terminology Management – ontologies, taxonomies, thesauri, classification and grouping** SNOMED CT

First, while attaining my Clinical Informatics certificate several classes tackled SNOMED from various angles. The Practicum class, designed independently as a study, was a gateway for observing provider-centered snapshots of three University of Maryland Medical System ambulatory clinics at various stages of Portfolio<sup>®</sup> (EPIC) implementation. I had immersive EPIC ambulatory provider training including diagnoses and problem lists, before undertaking the study of physician behavior, while interacting with Portfolio and patients.

Second, I teach a 4hour class entitled [\*Breaking an EHR-S: a sandbox workshop\*](#). Because students are from multiple institutions, the class content relies on the use of an EHR ([\*practicefusion\*](#)) that has a commons license for instruction. Twenty minutes of time is allocated to terminologies and their interplay with the problem lists, particularly SNOMED CT and ICD-9, using the system's dashboard during the provider encounter.

Third, being a regional representative on the National Network of Libraries of Medicine's national task force on MedlinePlus Connect, I am in a unique position to understand the complexities inherent in NLM's continuing task of keeping mapping structure up-to-date between MedlinePlus and problem code queries originating from institutional EHRs participating in the Medlineplus Connect web service.

#### **MESH AND NCImetathesaurus**

As a former director at the Delaware Academy of Medicine, I was a project lead on a public health law demonstration project sponsored by the NLM/SIS Division and officials in state government that sought to apply MeSH tags to State of Delaware digital public health law content. A SIS licensed taxonomy software was used to classify the content. Where MeSH tags were not found, we used the NCImetathesaurus browser. Legal concepts that defied medical tagging were also captured.

#### **ORACLE – PLUMTREE**

As a consultant at Johnson & Johnson Pharmaceutical Research and Development, I participated on the content classification sub-committee team tasked to plan, develop and implement a version of Plumtree software to serve as the unit's internal portal. Tasks spanned assessments of documents and collections in business, research & development and regulatory for the design of a corporate taxonomy. A major task required an analytical ontological review the ideological and physical concepts of the business.

#### **Policy and Governance – boards, advisory boards and taskforces**

Member - (DE) Lt. Governor's (J. Kearny) Health Disparities Taskforce, 2006 - 2008  
Health Fund Advisory Council (DE) – Agency applicant, attended hearings, prepared testimony, 2004 - 2007  
Trustee – PALINET (PA), regional library cooperative, 2005 - 2008  
Member – MedlinePlus Connect National Taskforce (MD), NNLM, 2012 - 2016  
President/Chair – District of Columbia Area Health Sciences Libraries, 2014

<sup>i</sup> Portfolio<sup>®</sup> Ambulatory is the service mark of the University of Maryland Medical System for its EpicCare Electronic Health Record system (EHR-S)



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### Nominee

Name	Persko L. Grier, Jr. (PJ)
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Other Terminology Implementation	
Classification & Grouping	✓
Engineering of natural language processing (NLP) systems	
Engineering of semantic systems (ontologies, decision support, knowledge engineering)	
Command of two or more languages (e.g. Chinese, French, German, etc)	
National and International Standards Development and/or Approval	
Registered Clinical Professional (current or past)	
Software design and development	✓
Software production for market	
Data Standards Management including Policy	
Chief Information Officer and/or Chief Technical Architect Management	
Active in the IHTSDO community (member of SIG and/or Project Group)	

Candidate Name: **Amy Wang** *[Incumbent]*

Affiliation: **Intelligent Medical Objects**

## **Statement of Interest for Amy Wang for IHTSDO Content Committee**

Submitted by Amy Wang, Clinical Implementation Lead, Intelligent medical Objects

August 4, 2014

SNOMED CT great breadth and depth of coverage of clinical content, and will continue to expand and evolve to meet changes in medicine and the health information landscape. Medical knowledge will continue to develop, areas of medicine will evolve, and new use cases for health information will emerge. More member countries will join the IHTSDO and bring in new needs for content. Ongoing collaboration with key professional and standards organizations helps promotes relevance of content and semantic interoperability. The IHTSDO Content Committee plays a great role in identifying and prioritizing needs and developing SNOMED CT content to best meet the user requirements.

In my current work, I collaborate with EHR implementers and users as well as EHR developers. I am able to bring the feedback and experiences of users of varying health information systems and representing diverse use cases and practice settings. It is often a challenge to reconcile conflicting clinical, semantic, regulatory, and resource requirements. As it may be impossible to meet all needs fully all at once, it is necessary to prioritize these needs. The Content Committee also addresses similar or identical issues through prioritization.

During the past two years, I have served as a member of the IHTSDO Content Committee. It has been a rewarding experience and has provided an opportunity to connect experiences of health information systems users to SNOMED CT development. I am committed to the advancement of clinical terminology standards and would like to continue my involvement with the SNOMED CT community. With my experience as a clinician, SNOMED editor, EHR content developer, terminology developer, and terminology implementer, I can continue to make significant contributions to the Content Committee.

## AMY Y. WANG, MD

### PROFESSIONAL EXPERIENCE

- Clinical Integration Lead, Intelligent Medical Objects, Northbrook, Illinois** 2013 to 2014
- Implement clinical terminologies in health information systems
- Lead Clinical Terminologist, Intelligent Medical Objects, Northbrook, Illinois** 2004 to 2013
- Develop clinical and consumer terminologies and content for use in health information systems.
- Adjunct Professor, Department of Biomedical and Health Information Sciences, College of Applied Health Sciences, University of Illinois at Chicago, Chicago, IL** 2012 to 2013
- Teach Consumer Health Informatics course in Master of Science in Health Informatics program
- Clinical Consultant, Volunteers in Medicine – Clinic of the Cascades, Bend, Oregon** 2003
- Advised on scheduling, building layout, organizational structure, personnel, training, and technical issues for successful EHR implementation at volunteer community health center in rural Oregon.
- Clinical Content Developer, Greenway Medical Technologies, Carrollton, Georgia** 2002 to 2003
- Developed clinical terminologies and content, supported implementation, training, and support for ambulatory care EHR
- SNOMED Clinical Editor, College of American Pathologists, Northfield, Illinois** 2000 to 2002
- Collaborated with multidisciplinary, international design teams to merge two comprehensive medical terminologies, SNOMED RT and CTV3, into a unified work, SNOMED CT. Presented talks and articles about SNOMED CT development
- Locum Tenens Family Physician** 1999 to 2000
- Family medicine practice in acute, ambulatory, urban, and rural settings

### EDUCATION AND POSTGRADUATE TRAINING

- Graduate Certificate in Medical Informatics, Oregon Health and Science University, Portland, OR 2004
- Family Medicine Residency, University of Illinois at Chicago-St. Francis Hospital, Evanston, IL 1996 to 1999
- Doctor of Medicine, Northwestern University Medical School, Chicago, IL 1996
- Bachelor of Arts with Honor in Biology, Washington University, St. Louis, MO 1991

### SELECTED PUBLICATIONS AND PRESENTATIONS

1. Kanter, AS, Fraser HSF, Payne, J, Wang AY. Development of a Common Maternal Health Concept Dictionary: Integration of Mobile Maternal Health Platforms using the Maternal Concept Lab. Presented at AMIA PHI 2011.
2. Charlot R, Cole CL, Cheriff A, Kanter AS, Masarie FE, Wang AY, Oganessova A and Naeymi-Rad F. Finding Specialists Using Interface Terminology and Concept-based Hierarchical Reference Terminology. Presented at VIVO National Conference, 2010.
3. Wang AY. Enhancing Clinical and Meaningful Use through Terminology. Presented at Eclipsys User Network Outcomes Conference, 2009.
4. Kanter AS, Wang AY, Masarie FE, Naeymi-Rad F, Safran C. Interface Terminologies: Bridging the Gap between Theory and Reality for Africa. *Stud Health Technol Inform*. 2008;136:27-32 and presented at HELINA 2007, Bamako, Mali.
5. Naeymi-Rad F, Wang AY, Cheriff A, Cole CL, Alban CJ, Haines D, Scichilone R, and Kanter AS. Improving Clinical and Business Processes: Capitalizing on the Investment in Controlled Medical Terminology. AMIA Annual Symposium proceedings 2007:1183-5.
6. Becker J, Gill R, Moy S, Seshadri V, Tran D, Wang A, Yang G. Managing Change. In: Lorenzi NM, Ash JS, Embinder L, Embinder J, McPhee W (Eds.), *Transforming Health Care Through Information*. 2<sup>nd</sup> ed. New York: Springer-Verlag. 2005. p. 43-8.
7. Wang AY, Sable JH, Spackman KA. The SNOMED Clinical Terms Development Process: Refinement and Analysis of Content. *Journal of the American Medical Informatics Association*, Symposium Supplement, p.845-849, 2002. Presented at 2002 AMIA Symposium.
8. Wang AY, Spackman KA. The Grouping of Roles in SNOMED Clinical Terms. *Journal of the American Medical Informatics Association*, Symposium Supplement, p.1192, 2002. Presented at 2002 AMIA Symposium.
9. Wang AY, Barrett JW, Bentley T, Markwell D, Price C, Spackman KA, Stearns MQ. Mapping Between SNOMED RT and Clinical Terms Version 3: A Key Component of the SNOMED CT Development Process. *Journal of the American Medical Informatics Association*, Symposium Supplement, p.741-745, 2001. Presented at 2001 AMIA Symposium.
10. Stearns MQ, Price C, Spackman KA, Wang AY. SNOMED Clinical Terms: Overview of the Development Process and Project Status. *Journal of the American Medical Informatics Association*, Symposium Supplement, p.662-666, 2001.
11. Sable JH, Nash S, Wang AY. Culling a Clinical Terminology: A Systematic Approach to Identifying Problematic Content. *Journal of the American Medical Informatics Association*, Symposium Supplement, p.578-82, 2001.





## Skills Matrix – Content Committee

Please help us to ensure that IHTSDO Committees consist of a balanced and diverse set of expertise and experience. We would appreciate if you could complete the form below, marking each box for which you have relevant skills or experience.

Thank you for helping to ensure a strong advisory structure for IHTSDO and its Members.

### Nominee

Name	Amy Wang
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### Skills Matrix

IHTSDO seeks individuals with a mix of skills to serve on Standing Committees. Please mark the attribute(s) in which you have experience and expertise at an organizational, national and/or international level.

Attributes	Check all that apply
SNOMED CT Editor	<input checked="" type="checkbox"/>
SNOMED CT Design	<input checked="" type="checkbox"/>
SNOMED CT Implementation	<input checked="" type="checkbox"/>
SNOMED CT Tooling	<input checked="" type="checkbox"/>
Other Terminology Design, Development & Release	<input checked="" type="checkbox"/>
Other Terminology Implementation	<input checked="" type="checkbox"/>
Classification & Grouping	<input checked="" type="checkbox"/>
Engineering of natural language processing (NLP) systems	<input type="checkbox"/>
Engineering of semantic systems (ontologies, decision support, knowledge engineering)	<input type="checkbox"/>
Command of two or more languages (e.g. Chinese, French, German, etc)	<input checked="" type="checkbox"/>
National and International Standards Development and/or Approval	<input checked="" type="checkbox"/>
Registered Clinical Professional (current or past)	<input checked="" type="checkbox"/>
Software design and development	<input checked="" type="checkbox"/>
Software production for market	<input checked="" type="checkbox"/>
Data Standards Management including Policy	<input type="checkbox"/>
Chief Information Officer and/or Chief Technical Architect Management	<input type="checkbox"/>
Active in the IHTSDO community (member of SIG and/or Project Group)	<input checked="" type="checkbox"/>