

**American Nurses Association Statement  
Regarding  
Patient Medical Record Information (PMRI) Terminology**

**NATIONAL COMMITTEE ON  
VITAL AND HEALTH STATISTICS  
SUBCOMMITTEE ON STANDARDS AND SECURITY**

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# PMRI Terminologies: New Groups or Subsets

- Issues

- Categorized by domain, purpose, health care process
- Clinically specific and convergent as subset labels unclear, but contents imply “concept-oriented terminology”
- Physician diagnosis and intervention codes categorized as diagnosis and procedure codes whereas nursing diagnoses and interventions are categorized as nursing

- Recommendations

- Consider use of intervention rather than procedure as label
- Categorize terminologies by multiple dimensions including purpose, contents, and semantic structure

# PMRI Terminologies: Add or Delete Terminologies

- Issues
  - List of nursing codes is incomplete (See Table 1)
  - Omaha and Perioperative Nurses Data Set incorrectly labeled as not in UMLS
- Recommendations
  - If data sets are to be included as PMRI terminologies consider addition of Nursing Minimum Data Set
  - Evaluate appropriateness of including the International Classification of Nursing Practice
  - No deletions

# PMRI Terminologies: Priorities

- High Priorities
  - Pharmacy
  - Laboratory
  - Diagnoses, interventions, and outcome codes for clinical professionals including physicians and nurses
- Rationale
  - Patient safety
  - Healthcare quality
  - Multidisciplinary care
- No suggestions for designations as low priority

# PMRI Terminologies: Criteria

- Additions
  - Documentation of reliability, validity, and clinical utility
- Modifications
  - Some criteria must vary according to type of terminology (data set, classification, nomenclature, etc.) – See Table 2
  - Need to clarify which criteria particularly relate to which type of semantic structure
  - Relationships among terminologies – clarification of terminology characteristics versus roles of models and software
    - ISO reference terminology models for diagnoses and interventions
    - Terminology software tools and rules engines

# PMRI Terminologies: ANSI-accreditation

- No requirement for terminology developer to be ANSI-accredited
- Affiliated with ANSI-accredited organization
- Open meetings with timely notification
- Balloting process published with accommodation of public comment and appeal
- Use existing standards, definitions, processes where available (e.g., ANSI, HL7, ISO)

# Conclusions

- National information infrastructure is critical for ensuring patient and public safety and improving the quality of health care
- PMRI terminologies that facilitate data sharing and re-use are an essential building block of such an infrastructure
- To achieve optimal impact, PMRI terminologies must be inclusive of the disciplines that contribute to healthcare processes and outcomes