

Implementation of
ENV 1068:1993

Medical informatics — Healthcare information interchange — Registration of coding schemes

UDC 616:681.3.04

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Contents

	Page
Cooperating organizations	Inside front cover
National foreword	ii
Foreword	2
Text of ENV 1068	3

National foreword

This Draft for Development is identical with the European prestandard ENV 1068:1993 *Medical informatics — Healthcare information interchange — Registration of coding schemes*, prepared by CEN whose members have committed themselves to making it available in an appropriate form. In the UK the Draft for Development is the form now chosen for ENVs in the information technology area.

This Draft for Development is published under the direction of the Information Systems Technology Standards Policy Committee whose Technical Committee IST/35 has the responsibility to:

- aid enquirers to understand the text;
- present to the responsible international/European committee any queries on interpretation, or proposals for change, and to keep UK interests informed;
- monitor related international and European developments and promulgate them in the UK.

NOTE International and European Standards, as well as overseas standards, are available from Customer Services, Publications, BSI, Linford Wood, Milton Keynes, MK14 6LE.

After two years this ENV will be reviewed by CEN members with a view to its:

- conversion into a European Standard (which would be implemented in the UK as a British Standard);
- extension once for a further two years;
- replacement by a revised ENV (which would be published in the UK as a revised Draft for Development);
- withdrawal.

The future of this Draft for Development is therefore bound to that of the ENV and the Draft for Development will not be reviewed separately.

This publication is not to be regarded as a British Standard.

Summary of pages

This document comprises a front cover, an inside front cover, pages i and ii, the ENV title page, pages 2 to 20 and a back cover.

This standard has been updated (see copyright date) and may have had amendments incorporated. This will be indicated in the amendment table on the inside front cover.

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Descriptors: Medicine, data processing, information interchange, data representation, data codes, coded character sets, specifications

English version

Medical informatics — Healthcare information interchange — Registration of coding schemes

Informatique médicale — Echange
d'information dans le domaine de la
santé — Enregistrement des systèmes de
codification

Medizinische Informatik —
Informationsaustausch im
Gesundheitswesen — Registrierung von
Kodierungsschemata

This European Prestandard was approved by CEN on 1993-06-01 as a prospective standard for provisional application. The period of validity of this ENV is limited initially to three years. After two years the members of CEN will be requested to submit their comments, particularly on the question whether the ENV can be converted into a European Standard (EN).

CEN members are required to announce the existence of this ENV in the same way as for an EN and to make the ENV available promptly at national level in an appropriate form. It is permissible to keep conflicting national standards in force (in parallel to the ENV) until the final decision about the possible conversion of the ENV into an EN is reached.

CEN members are the national standards bodies of Austria, Belgium, Denmark, Finland, France, Germany, Greece, Iceland, Ireland, Italy, Luxembourg, Netherlands, Norway, Portugal, Spain, Sweden, Switzerland and United Kingdom.

CEN

European Committee for Standardization
Comité Européen de Normalisation
Europäisches Komitee für Normung

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Foreword

The preparation of this standard was undertaken by Project Team 005 of CEN/TC 251 Medical Informatics and covered by the European Commission order voucher BC-IT-212.

The European Prestandard had been approved for submission to the formal vote by CEN/TC 251 during its 11th plenary meeting on 26th January 1993.

This European Prestandard was submitted for formal vote by the CEN Central Secretariat to the members of CEN/CENELEC on 1993-03-29 with the deadline of 1993-06-01. The result of the formal vote was positive.

According to the CEN/CENELEC Internal Regulations, the following countries are bound to announce the existence of this European Prestandard: Austria, Belgium, Denmark, Finland, France, Germany, Greece, Iceland, Ireland, Italy, Luxembourg, Netherlands, Norway, Portugal, Spain, Sweden, Switzerland, United Kingdom

Contents

	Page
Foreword	2
Introduction	3
1 Scope	3
2 Normative references	3
3 Definitions and abbreviations	3
4 Identification of health care coding schemes	4
5 User agreements	5
6 The Registration Authority	5
7 The Register of Health Care Coding Schemes	7
8 Sponsoring Authorities	8
9 Issuing Organizations	9
10 Disputes	10
Annex A (normative) Specification of the Health Care Coding Scheme Designator	11
Annex B (informative) Illustration of terms used in this European Prestandard	12
Annex C (informative) Multiple registrations of health care coding schemes	12
Annex D (informative) Suggested form for: Request for addition to or amendment of the Register of Health Care Coding Schemes	15
Annex E (informative) Version control and changes to coding schemes	19
Diagram 1	12

Introduction

The increased use of data processing and telecommunications capabilities has made possible the interchange of information in machine readable and machine processable formats. As automated interchange of information in health care increases it is essential to provide the appropriate information interchange standards. Representation of information in coded form facilitates its processing by computer and enables it to be expressed with a precision and independence from language that may be difficult to achieve in other forms. Coded representation is therefore frequently used in information interchange for all types of application.

There are many coding schemes in use in health care. In the development of this European Prestandard it was recognized that immediate international adoption of a single coding scheme for each type of health care information is impracticable. Therefore, when interchanging information, it is necessary to identify unambiguously the coding schemes used for its representation. This European Prestandard recognizes existing coding schemes and provides a means for using them in a uniform way in health care information interchange. It allows an occurrence of health care information to be represented by more than one coding scheme. However the registration procedure is also intended to discourage the unnecessary proliferation of coding schemes used for the interchange of health care information.

The use of the procedures in this European Prestandard will:

- a) facilitate the representation of health care information in coded form for all purposes;
- b) reduce the potential ambiguity of information in coded form;
- c) reduce the need for human intervention in information interchange between applications;
- d) diminish the time required for the introduction of information interchange agreements;
- e) provide independence from language;
- f) in consequence of the foregoing, reduce the cost of information interchange.

1 Scope

This European Prestandard specifies a procedure for the registration of coding schemes used in health care for any purpose. It also specifies the allocation of a unique Health Care Coding Scheme Designator (HCD) to each registered coding scheme. A code value can thus be given an unambiguous meaning by association with an HCD.

The method by which an HCD and a code value are associated is not defined by this standard. The association is achieved in any manner appropriate to the syntax used.

This European Prestandard does not specify the coding schemes to be used in health care, give guidance on their selection nor describe methods of representing information in coded form.

2 Normative References

This European Prestandard incorporates by dated or undated reference, provisions from other publications. These normative references are cited in the appropriate places in the text and the publications are listed hereafter. For dated references, subsequent amendments and revisions of any of these publications apply to this European Prestandard only when incorporated in it by amendment and revision. For undated references the latest edition of the publication referred to applies.

ISO 2382-4, *Information processing systems — Vocabulary — Part 04: Organization of data*.

ISO 6523, *Data interchange — Structure for the identification of organizations*.

3 Definitions and abbreviations

For the purposes of this European Prestandard, the following definitions apply:

3.1

bit; binary digit

either of the digits 0 or 1 when used in the pure binary numeration system

(ref ISO 2382-4)

3.2

character

a member of a set of elements that is used for the representation, organization or control of data

(ref ISO 2382-4)

3.3

character set

a finite set of different characters that is complete for a given purpose

(ref ISO 2382-4)

3.4

coding scheme

a collection of rules that maps the elements of one set on to the elements of a second set

(ref ISO 2382-4)

3.5**coded set**

a set of elements which is mapped on to another set according to a coding scheme

(ref ISO 2382-4)

3.6**code meaning**

an element within a coded set

EXAMPLE: “Paris Charles-De-Gaulle” which is mapped on to the three-letter abbreviation “CDG” by the coding scheme for three-letter abbreviations of airport names.

3.7**code value**

the result of applying a coding scheme to a code meaning

EXAMPLE: “CDG” as the representation of “Paris Charles-De-Gaulle” in the coding scheme for three-letter representations of airport names. (based on ISO 2382-4, modified to use preferred terms defined above *coding scheme* for *code* and *code meaning* for an element of a *coded set*.)

NOTE A diagrammatic illustration of the terms defined in 3.4, 3.5, 3.6 and 3.7 is provided in Annex B.

3.8**health care coding scheme**

coding scheme used in health care

3.9**health care coding scheme designator [HCD]**

unique permanent identifier of a health care coding scheme registered for use in information interchange under the terms of this European Prestandard

NOTE A formal specification of the health care coding scheme designator is included in Annex A.

3.10**organization**

unique framework of authority within which a person or persons act, or are designated to act, towards some purpose

(ref ISO 6523)

NOTE Groupings and subdivisions of an organization may also be considered as organizations where there is a need to identify these in information interchange.

3.11**register of health care coding schemes**

the register that is maintained in accord with the provisions of this European Standard

3.12

issuing organization (of a health care coding scheme)

organization which assumes responsibility for the administration of a specific health care coding scheme

3.13

registration authority (for health care coding schemes)

body responsible for assigning Health Care Coding Scheme Designators and for maintaining the Register of Health Care Coding Schemes as described in this standard

3.14

sponsoring authority (for health care coding schemes)

body recognized by the requirements of this standard to receive requests for registration of health care coding schemes from Issuing Organizations and submit them to the Registration Authority

NOTE The definitions of Registration Authority, Sponsoring Authority and Issuing Organization for health care coding schemes are based on the generic definitions of these authorities and organizations in ISO 6523.

3.15**health care coding scheme specification**

a source of information about a health care coding scheme maintained and made available by the Issuing Organization in accordance with the terms of this standard

4 Identification of health care coding schemes

4.1 Purpose of the identification procedure

The procedure described in this clause provides for the unambiguous identification of registered health care coding schemes when they are used for the purpose of information interchange in health care. A code value is given an unambiguous meaning by association between:

- a) a Health Care Coding Scheme Designator (HCD), and
- b) the code value.

4.2 Health Care Coding Scheme Designator (HCD)

The HCD shall have a fixed length of six (6) characters and shall conform to the formal specification in Annex A.