



**Digitaalse terviseloo meditsiinidokumentide IT standardid ja
publitseerimispõhimõtted**

Ambulatoorne epikriis



26.09.2006

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Versioon	Muutja	Muutmise kuupäev	Muudatus
V 0.01	Jan Jasinski	12.06.06	Algversioon
V 0.02	Jan Jasinski	06.09.06	Kirjeldatud dokumendi ja XML-i andmeväljade vastavused
V 1.0	Jan Jasinski	26.09.2006	Lõplik versioon

I. AMBULATOORNE EPIKRIIS

1. Üldandmed

1.1. Viide algallikale

- 1.1.1. Ambulatoorne epikriis. Dokumendi „Digitaalse terviseloo projekti raames meditsiiniterminite ja andmesõnastiku koostamine andmekoosseisu ja meditsiinidokumentide kontekstis” 17.05.2006 töoversiooni punkti 3.2 alampunkt 1 (lk 19 - 21)

1.2. Dokumendi LOINC kood

- 1.2.1. 28655-9 (DISCHARGE SUMMARIZATION NOTE, ATTENDING PHYSICIAN)

1.3. Digiteatise liik

- 1.3.1. Ambulatoorse haigusjuhu digiteatis

1.4. Sektsioonide loetelu

- 1.4.1. Ambulatoorne epikriis (sulgudes CDA malli nimetus):
- 1.4.1.1. "FAM" - "Patsiendi perearst" (Performer)
 - 1.4.1.2. "REF" - "Suunaja andmed" (Performer)
 - 1.4.1.3. "AMBS" - "Haigusjuht" (Encounter)
 - 1.4.1.4. "DGN" - "Lõplik kliiniline diagnoos" (Observation)
 - 1.4.1.5. "ANAM" - "Anamnees, diagnoosi põhjendus ja haiguse kulg" (Text)
 - 1.4.1.6. "ALL" - "Allergia" (Observation)
 - 1.4.1.7. "PROC" - "Uuringud ja protseduurid" (Procedure)
 - 1.4.1.8. "SUR" - "Operatsioonid" (Procedure)
 - 1.4.1.9. "ANA" - "Analüüsid" (Procedure)
 - 1.4.1.10. "SUM" - "Kokkuvõtte patsiendi ravist" (Text)
 - 1.4.1.11. "REGIME" - "Režiimi ja ravialased soovitusel" (Text + Observation)
 - 1.4.1.12. "DRUG" - "Väljastatud ravimid" (SubstanceAdministration)
 - 1.4.1.13. "DOC" - "Väljastatud dokumendid" (Act)
 - 1.4.1.14. "DIR" - "Suunamine" (Encounter)

1.5. Kommenteeritud näide

- 1.5.1. XML sõnum:
- 1.5.1.1. XML/Ambulatoorne epikriis.xml

1.6. Stiilifailid

- 1.6.1. Dokumendi spetsiifilised XSL-failid:
- 1.6.1.1. XSL/ambEpicrisis.xsl

II. DOKUMENDI JA XML-I ANDMEVÄLJADE VASTAVUSED

2. Ambulatoorne epikriis

2.1. Dokumendi nr: ClinicalDocument -> id

2.2. Tervishoiuasutuse andmed: ClinicalDocument -> author -> assignedAuthor -> representedOrganization

2.2.1. **Registreerimiskood (äriregister):** ClinicalDocument -> author -> assignedAuthor -> representedOrganization -> id

2.2.2. **Asutuse nimetus:** ClinicalDocument -> author -> assignedAuthor -> representedOrganization -> name

2.2.3. **Aadress (tänav, maja, postikood, linn/vald, maakond):** ClinicalDocument -> author -> assignedAuthor -> representedOrganization -> addr

2.2.4. **e-post:** ClinicalDocument -> author -> assignedAuthor -> representedOrganization -> telecom

2.2.5. **Telefon:** ClinicalDocument -> author -> assignedAuthor -> representedOrganization -> telecom

2.2.6. **Faks:** ClinicalDocument -> author -> assignedAuthor -> representedOrganization -> telecom

2.3. Patsiendi isikuandmed: ClinicalDocument -> recordTarget -> patientRole

2.3.1. **Eesnimi:** ClinicalDocument -> recordTarget -> patientRole -> patient -> name -> given

2.3.2. **Perekonnanimi:** ClinicalDocument -> recordTarget -> patientRole -> patient -> name -> family

2.3.3. **Isikukood:** ClinicalDocument -> recordTarget -> patientRole -> id

2.3.4. **Sünniaeg (pp.kk.aaaa):** ClinicalDocument -> recordTarget -> patientRole -> patient -> birthTime

2.3.5. **Sünnikoht:** ClinicalDocument -> recordTarget -> patientRole -> patient -> birthplace

2.3.6. **Vanus, vastsündinu vanus (alla aastasel lapsel kuudes, päevades):** ClinicalDocument -> recordTarget -> patientRole -> patient -> birthTime -> width

2.3.7. **Sugu:** ClinicalDocument -> recordTarget -> patientRole -> patient -> administrativeGenderCode

2.3.8. **Tegelik elukoht (tänav, maja, korter, postikood, linn/vald, maakond, riik):** ClinicalDocument -> recordTarget -> patientRole -> addr

2.3.9. **Amet:** ClinicalDocument -> recordTarget -> patientRole -> providerOrganization -> templateId

2.3.10. **Töökoht:** ClinicalDocument -> recordTarget -> patientRole -> providerOrganization -> name

2.3.11. **Kontaktisikud:** (ClinicalDocument -> recordTarget -> patientRole -> patient -> guardian)

2.3.11.1. **ees- ja perekonnanimi:** ClinicalDocument -> recordTarget -> patientRole -> patient -> guardian -> guardianPerson -> name

2.3.11.2. **isikukood:** ClinicalDocument -> recordTarget -> patientRole -> patient -> guardian -> id

2.3.11.3. **seos patsiendiga (loend):** ClinicalDocument -> recordTarget -> patientRole -> patient -> guardian -> code

2.3.11.4. **telefoninumber:** ClinicalDocument -> recordTarget -> patientRole -> patient -> guardian -> telecom

2.4. Patsiendi perearst: ClinicalDocument ->component -> structuredBody -> component -> section (FAM) -> entry -> act

2.4.1. **Eesnimi:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> assignedPerson -> name -> given

2.4.2. **Perekonnanimi:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> assignedPerson -> name -> family

2.4.3. **Arsti registreerimiskood:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> id

2.4.4. **Praksis:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> representedOrganization

2.4.4.1. nimi: ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> representedOrganization -> name

2.4.4.2. aadress: ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> representedOrganization -> addr

2.4.4.3. telefon: ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> representedOrganization -> telecom

2.4.4.4. e-post: ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> representedOrganization -> telecom

2.5. Suunaja andmed: ClinicalDocument ->component -> structuredBody -> component -> section (REF) -> entry -> act

2.5.1. **Eesnimi:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> assignedPerson -> name -> given

2.5.2. **Perekonnanimi:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> assignedPerson -> name -> family

2.5.3. **Arsti registreerimiskood:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> id

2.5.4. **Eriala (kood ja nimetus):** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> realmCode

2.5.5. **Tervishoiuasutus:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> representedOrganization

2.5.5.1. registreerimiskood: ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> representedOrganization -> id

2.5.5.2. asutuse nimetus: ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> act -> performer ->assignedEntity -> representedOrganization -> name

2.6. Haigusjuhu andmed: ClinicalDocument ->component -> structuredBody -> component -> section (AMBS)

2.6.1. **Saabumise viis:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> encounter -> precondition -> criterion -> value

2.6.2. **Alguskuupäev ja lõppkuupäev:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> encounter -> effectiveTime

2.6.3. **Visiidid:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> encounter -> entryRelationship -> encounter

2.6.3.1. **Visiidi kuupäev (pp.kk.aaaa):** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> encounter -> entryRelationship -> encounter -> effectiveTime

2.6.3.2. **Visiidi liik (esmane-, korduv-, kodu-, telefonikonsultatsioon):** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> encounter -> entryRelationship -> encounter -> precondition -> criterion -> value

2.6.4. **Surm:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> encounter -> entryRelationship -> act

2.6.4.1. **pp.kk.aaaa ja kellaeg:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> encounter -> entryRelationship -> act -> effectiveTime

2.6.4.2. **surmateatise nr:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> encounter -> entryRelationship -> act -> reference -> externalDocument -> id

2.6.4.3. **vormistamise kuupäev:** ClinicalDocument ->component -> structuredBody -> component -> section -> entry -> encounter -> entryRelationship -> act -> precondition -> criterion -> value

2.7. Lõplik kliiniline diagnoos: ClinicalDocument ->component -> structuredBody -> section (DGN) -> entry -> observation

2.7.1. Põhihaigus

2.7.1.1. **arsti sõnaline diagnoos:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value -> originalText

2.7.1.2. **diagnoosi nimetus RHK-10 järgi:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value

2.7.1.3. **kood RHK-10:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value

2.7.1.4. **diagnoosi täpsustus ("+" elus esmakordselt, "-" korduvalt ja "0" täpsustamata):** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value -> qualifier

2.7.2. Põhihaiguse tüsistus

2.7.2.1. **arsti sõnaline diagnoos:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value -> originalText

2.7.2.2. **diagnoosi nimetus RHK-10 järgi:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value

2.7.2.3. **kood RHK-10:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value

2.7.3. Kaasuavad haigused (1 või enam)

2.7.3.1. **arsti sõnaline diagnoos:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value -> originalText

2.7.3.2. **diagnoosi nimetus RHK-10 järgi:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value

2.7.3.3. **kood RHK-10:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value

2.7.3.4. **diagnoosi täpsustus ("+" elus esmakordselt, "-" korduvalt ja "0" täpsustamata):** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value -> qualifier

2.7.4. Välispõhjus

2.7.4.1. **diagnoosi nimetus RHK-10 järgi:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value

2.7.4.2. **kood RHK-10:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value

2.7.4.3. **IDB klassifikaator:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value

2.7.5. Pahaloomulise kasvaja levik

2.7.5.1. **staadium:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value -> qualifier

2.7.5.2. **TNM klassifikatsiooni kood :** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value

2.8. Anamnees, diagnoosi põhjendus ja haiguse kulg: ClinicalDocument ->component -> structuredBody -> section (ANAM)-> text

2.8.1. Üldjuhul on tegemist vabateksti väljaga: ClinicalDocument ->component -> structuredBody -> section -> text -> paragraph -> content

2.8.1.1. **anamnees:** ClinicalDocument ->component -> structuredBody -> section -> text -> list -> item -> content

2.8.1.2. **diagnoosi põhjendus:** ClinicalDocument ->component -> structuredBody -> section -> text -> list -> item -> content

2.8.1.3. **haiguse kulg:** ClinicalDocument ->component -> structuredBody -> section -> text -> list -> item -> content

2.9. Allergia (allergia, mis tekkis antud haigusjuhu käigus): ClinicalDocument -> component -> structuredBody -> section (ALL) -> entry -> observation

2.9.1. **Kuupäev:** ClinicalDocument -> component -> structuredBody -> section -> entry -> observation -> effectiveTime

2.9.2. **ravim/aine/materjal, mille suhtes allergia tekkis:** ClinicalDocument -> component -> structuredBody -> section -> entry -> observation -> entryRelationship -> substanceAdministration -> consumable -> manufacturedProduct

2.9.3. Allergia avaldumine:

2.9.3.1. **arsti sõnaline diagnoos:** ClinicalDocument -> component -> structuredBody -> section -> entry -> observation -> value -> originalText

2.9.3.2. **diagnoosi nimetus RHK-10 järgi:** ClinicalDocument -> component -> structuredBody -> section -> entry -> observation -> value

2.9.3.3. **kood RHK-10:** ClinicalDocument -> component -> structuredBody -> section -> entry -> observation -> value

2.10. Uuringud, analüüsid, protseduurid, operatsioonid (kajastatakse epikriisi koostaja poolt olulisemaks peetud toimingud): ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure

2.10.1. **Uuringud ja protseduurid:** ClinicalDocument -> component -> structuredBody -> section (PROC) -> entry -> procedure

2.10.1.1. **kuupäev:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> effectiveTime

2.10.1.2. **nimetus ja kood haigekassa loendi järgi :** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> reference -> externalProcedure -> code

2.10.1.3. **nimetus(ed) ja kood(id) NCSP järgi:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> reference -> externalProcedure -> code

2.10.1.4. **kirjeldus:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> reference -> text

2.10.2. **Operatsioonid:** ClinicalDocument -> component -> structuredBody -> section (SUR) -> entry -> procedure

2.10.2.1. **kuupäev:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> effectiveTime

2.10.2.2. **nimetus ja kood haigekassa loendi järgi :** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> reference -> externalProcedure -> code

2.10.2.3. **nimetus(ed) ja kood(id) NCSP järgi:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> reference -> externalProcedure -> code

2.10.2.4. **kirjeldus:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> reference -> text

2.10.2.5. **anesteesia liik (nimetus ja kood) :** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> methodCode

2.10.2.6. **Operatsiooni lisavahendi nimetus ja kood haigekassa loendi järgi:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> entryRelationship -> supply -> code

2.10.3. **Analüüsid:** ClinicalDocument -> component -> structuredBody -> section (ANA) -> entry -> procedure

2.10.3.1. **Analüüsi nimetus:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> reference -> externalProcedure -> code

2.10.3.2. **parameeter:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> entryRelationship -> observation -> specimen -> specimenRole -> specimenPlayingEntity -> code

2.10.3.3. **referentsväärtused:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> entryRelationship -> observation -> referenceRange -> observationRange -> text

2.10.3.4. **analüüsi kuupäev:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> effectiveTime,

2.10.3.5. **analüüsi vastuse kuupäev:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> entryRelationship -> observation -> effectiveTime

2.10.3.6. **tulemus:** ClinicalDocument -> component -> structuredBody -> section -> entry -> procedure -> entryRelationship -> observation -> value

- 2.11. Kokkuvõtte patsiendi ravist:** ClinicalDocument ->component -> structuredBody -> section (SUM) -> text
- 2.11.1. **Üldjuhul on tegemist vabateksti väljaga:** ClinicalDocument ->component -> structuredBody -> section -> text -> paragraph -> content
- 2.11.2. **Kui tervishoiuasutuse infosüsteem võimaldab on info jagatud plokkidesse:**
- 2.11.2.1. **ploki pealkiri:** ClinicalDocument ->component -> structuredBody -> section -> text -> list -> item -> caption
- 2.11.2.2. **ploki sisu:** ClinicalDocument ->component -> structuredBody -> section -> text -> list -> item -> content
- 2.12. Režiimi- ja ravialased soovitused, sh taastusraviks:** ClinicalDocument ->component -> structuredBody -> section (REGIME) -> text
- 2.12.1. **Vabateksti väli:** ClinicalDocument ->component -> structuredBody -> section -> text -> paragraph -> content
- 2.12.2. **Töökorralduse ja/või töökeskkonna ajutise või alalise muutmise vajadus:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value
- 2.12.3. **põhjus:** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> value
- 2.12.4. **kestus (algus- ja lõppkuupäev):** ClinicalDocument ->component -> structuredBody -> section -> entry -> observation -> effectiveTime
- 2.13. Väljakirjutatud ravimid (1 või enam):** ClinicalDocument ->component -> structuredBody -> section (DRUG) -> entry -> substanceAdministration
- 2.13.1. **Retsepti nr:** ClinicalDocument ->component -> structuredBody -> section -> entry -> substanceAdministration -> id
- 2.13.2. **Toimeaine nimetus:** ClinicalDocument ->component -> structuredBody -> section -> entry -> substanceAdministration -> consumable -> manufacturedProduct -> manufacturedMaterial -> code
- 2.13.3. **Ravimvorm:** ClinicalDocument ->component -> structuredBody -> section -> entry -> substanceAdministration -> precondition -> criterion -> value
- 2.13.4. **Ühekordne annus:** ClinicalDocument ->component -> structuredBody -> section -> entry -> substanceAdministration -> doseQuantity
- 2.13.5. **Manustamiskordade arv:** ClinicalDocument ->component -> structuredBody -> section -> entry -> substanceAdministration -> repeatNumber
- 2.14. Väljastatud dokumendid (dokumendid, mida DL ei saadeta):** ClinicalDocument ->component -> structuredBody -> section (DOC) -> entry -> act
- 2.14.1. Töövõimetusleht
- 2.14.1.1. **liik:** ClinicalDocument ->component -> structuredBody -> section -> entry -> act -> precondition -> value
- 2.14.1.2. **number:** ClinicalDocument ->component -> structuredBody -> section -> entry -> act -> reference -> externalDocument -> id
- 2.14.1.3. **alustamise ja lõpetamise kuupäevad (1 või enam):** ClinicalDocument ->component -> structuredBody -> section -> entry -> act -> precondition -> value
- 2.14.2. Teatis
- 2.14.2.1. **kuupäev:** ClinicalDocument ->component -> structuredBody -> section -> entry -> act -> effectiveTime
- 2.14.2.2. **nimetus:** ClinicalDocument ->component -> structuredBody -> section -> entry -> act -> precondition -> value
- 2.14.2.3. **kellele väljastatud (teatis koolile, lasteaiale, liiklusõnnetusest, tööõnnetusest, teatis nakkushaiguse kohta jne.):** ClinicalDocument ->component -> structuredBody -> section -> entry -> act -> participant -> participantRole -> playingEntity -> name, id
- 2.14.3. Tervise seisundi kirjeldus (Arstliku ekspertiisi taotluse juurde SM määrus nr 45, 130303) jm:

2.14.3.1. **kuupäev:** ClinicalDocument ->component -> structuredBody -> section -> entry -> act -> effectiveTime

2.14.3.2. **number:** ClinicalDocument ->component -> structuredBody -> section -> entry -> act -> reference -> externalDocument -> id

2.15. Ambulatoorsele vastuvõtule pöördumise aeg: ClinicalDocument ->component -> structuredBody -> section (DIR) -> entry -> encounter

2.15.1. **Vabateksti väli:** ClinicalDocument ->component -> structuredBody -> section -> text -> paragraph -> content

2.15.2. **Täpsustatud või soovituslik aeg:** ClinicalDocument ->component -> structuredBody -> section -> entry -> encounter -> effectiveTime

2.16. Epikriisi koostamise kuupäev, pp.kk.aaaa: ClinicalDocument -> effectiveTime

2.17. Koostaja: ClinicalDocument -> author -> assignedAuthor -> assignedPerson

2.17.1. **ees- ja perekonnanimi:** ClinicalDocument -> author -> assignedAuthor -> assignedPerson -> name

2.17.2. **registreerimiskood:** ClinicalDocument -> author -> assignedAuthor -> id

2.17.3. **eriala (kood ja nimetus):** ClinicalDocument -> author -> assignedAuthor -> realmCode