**CIIC Project Partners**

| **Organization** | **Project** | **Points of Contact** |
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| **PCPI**  **Duke Clinical Research Institute (DCRI)** | **Registries on FHIR** -- The Registries on FHIR project aims to develop the common data element set, demonstrate that it improves registry interoperability, and to promote a core set of elements that can be implemented nationally to improve value and decrease cost in real-world implementations. | Chrystal Price  [chrystal.price@thepcpi.org](mailto:chrystal.price@thepcpi.org) |
| **American Society of Clinical Oncology**  **MITRE** | **Cancer Interoperability** -- Working with a growing community of oncology stakeholders to define and organize core clinical knowledge critical to cancer care and research; produce logical models and FHIR Implementation Guides; develop efficient data collection and visualization systems; and demonstrate the value at several major cancer centers. | Steve Bratt  [sbratt@mitre.org](mailto:sbratt@mitre.org) |
| **2018 Nursing Big Data Group Intermountain Healthcare** | **Pain Assessment** -- Identify all observations and values needed for a complete pain assessment. Encode the observations to LOINC and values to SNOMED CT. Create a logical model from which FHIR profiles can be created. | Susan Matney  [susan.matney@imail.org](mailto:susan.matney@imail.org) |
| **FDA** | **Systemic Harmonization and Interoperability Enhancement for Laboratory Data (SHIELD)** -- SHIELD supports efforts to accelerate lab data digitization and adopt/develop long-term sustainable infrastructure to improve the quality and harmonization of in vitro diagnostic (IVD) data sources to support regulatory decisions, reduce burdens to the healthcare ecosystem and promote the development of innovative solutions to public health challenges. The fundamental goal is to use the same codes to describe the same IVD test information consistently throughout the healthcare ecosystem, e.g., consistently using the same LOINC code to describe the same type of test. | Michael Waters  [Michael.Waters@fda.hhs.gov](mailto:Michael.Waters@fda.hhs.gov) |
| **FDA** | **Women's Health Technology Coordinated Registry Network** -- Establish a strategically Coordinated Registry Network (CRN) for research on Women’s Health Technologies using three single registries. The users of the CRN will be providers, manufacturers, EHR vendors, hospitals/integrated delivery networks, standard development organizations, researchers and government agencies and other interested in women’s health device safety and effectiveness. Develop tools to facilitate collection of data within the existing and new registries, improve the value and sustainability of registries through leveraging electronic data and demonstrating that the data in the registries can be reused to answer additional questions through the addition of new data elements and patient cohorts | Terrie Reed  [Terrie.Reed@fda.hhs.gov](mailto:Terrie.Reed@fda.hhs.gov)  Behnaz Minaei  [Behnaz.minaei@fda.hhs.gov](mailto:Behnaz.minaei@fda.hhs.gov) |
| **National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)** | **Development of a Chronic Kidney Disease (CKD) Care Plan** -- The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) is collaborating with experts from the nephrology and informatics communities via its CKD e-Care Plan Working Group to develop and implement a person-centered e-care plan incorporating data elements essential for CKD care. The Working Group conducted interviews with individuals living with CKD to understand their values, and developed patient and clinician personas to guide identification of data elements and corresponding data standards (i.e., LOINC, SNOMED-CT, ICD-10, CPT, RxNorm). These personas and data elements have been used during HL7 FHIR and C–CDA Care Plan standards related testing events, yielding C-CDA output and FHIR resources. | Jenna Norton  [jenna.norton@nih.gov](mailto:jenna.norton@nih.gov) |
| **ACOG**  **DHHS – Office of Population Affairs (OPA)** | **OPA Family Planning Annual Report** – To enable OPA to improve get encounter-level data from the 4000 Title X clinics that it supports. Discrete data elements will be used to calculate performance measures, as well as other analysis. Enable applications that will allow these functions should be "plug-and-play" across multiple EHR platforms | Steve Hasley, ACOG CMIO  [hasleysk@upmc.edu](mailto:hasleysk@upmc.edu) |
| **University of Utah** | **FHIR Implementation Guide for Evidence-Based Disease Management** -- Define APIs and associated message payloads to support the management of chronic conditions and associated CDS services. It will provide a layered set of precise implementation guides that extend beyond US Core to both help guide Vendors in the right direction and to allow for conformance testing. The chronic conditions covered by this project shall be determined in the near future. | Claude Nanjo  [claude.nanjo@utah.edu](mailto:claude.nanjo@utah.edu) |
| **National Podiatry Association**  **Intermountain Healthcare** | **Skin and Wound Assessment** –   * Develop standardized models for skin and wound assessment. * Create formal bindings to standard terminology. * Develop a methodology to integrate Clinical LOINC in a format similar to the SNOMED/LOINC agreement related to labs and vitals) for SOLOR * Develop a SME review, approval, and release process guidelines * Develop a versioning framework for knowledge artifacts | Susan Matney  [susan.matney@imail.org](mailto:susan.matney@imail.org) |