



Opportunities for Priority Action to Improve CDS Interoperability and Usability to Reduce Clinician Burden

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**Washington Hilton
Washington, D.C.**

White Paper

A Roadmap for National Action on Clinical Decision Support

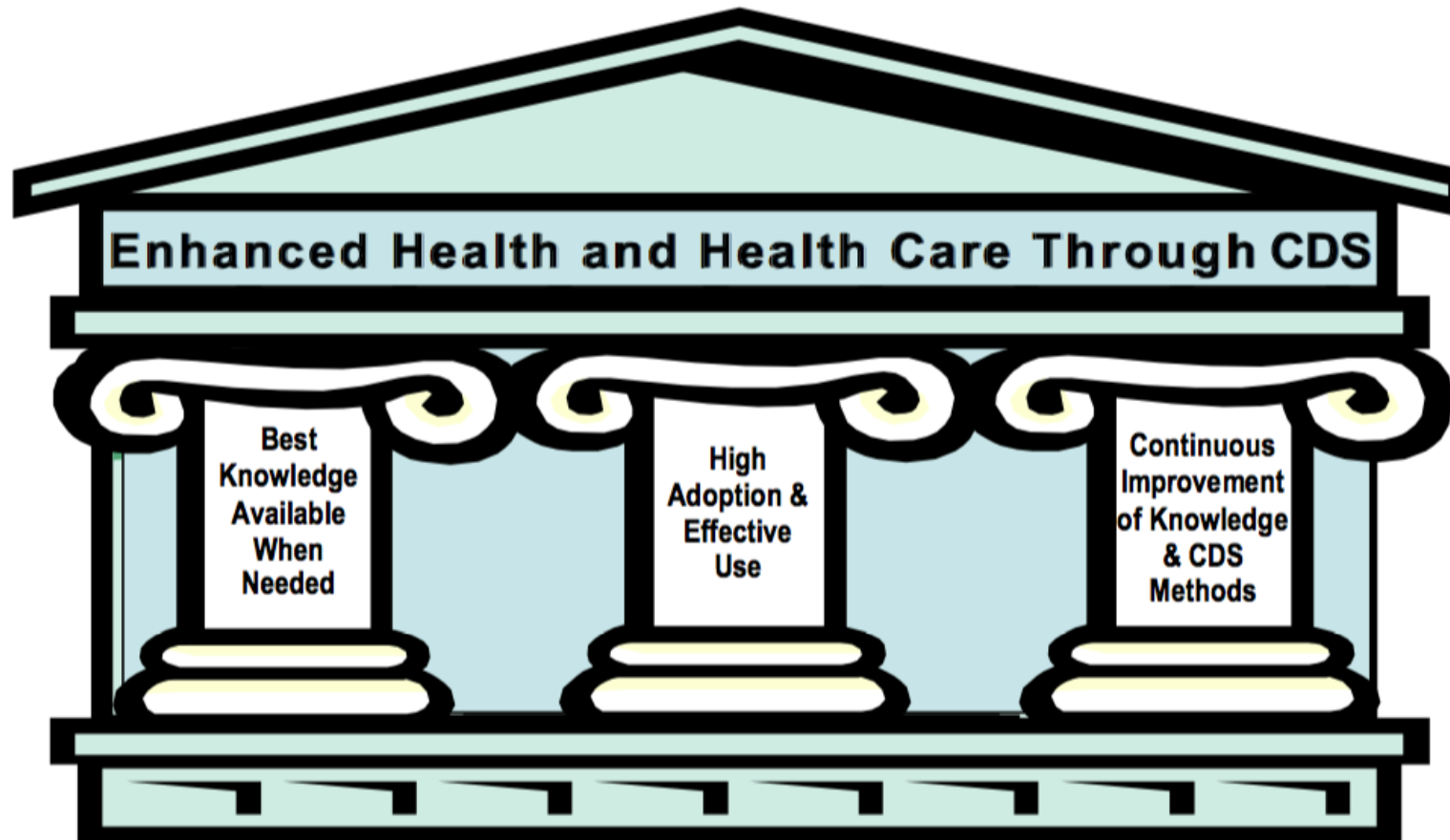


Figure 1. The three pillars for realizing the promise of CDS.



Available online at www.sciencedirect.com



Journal of Biomedical Informatics 41 (2008) 387–392

Journal of
Biomedical
Informatics

www.elsevier.com/locate/yjbin

Grand challenges in clinical decision support

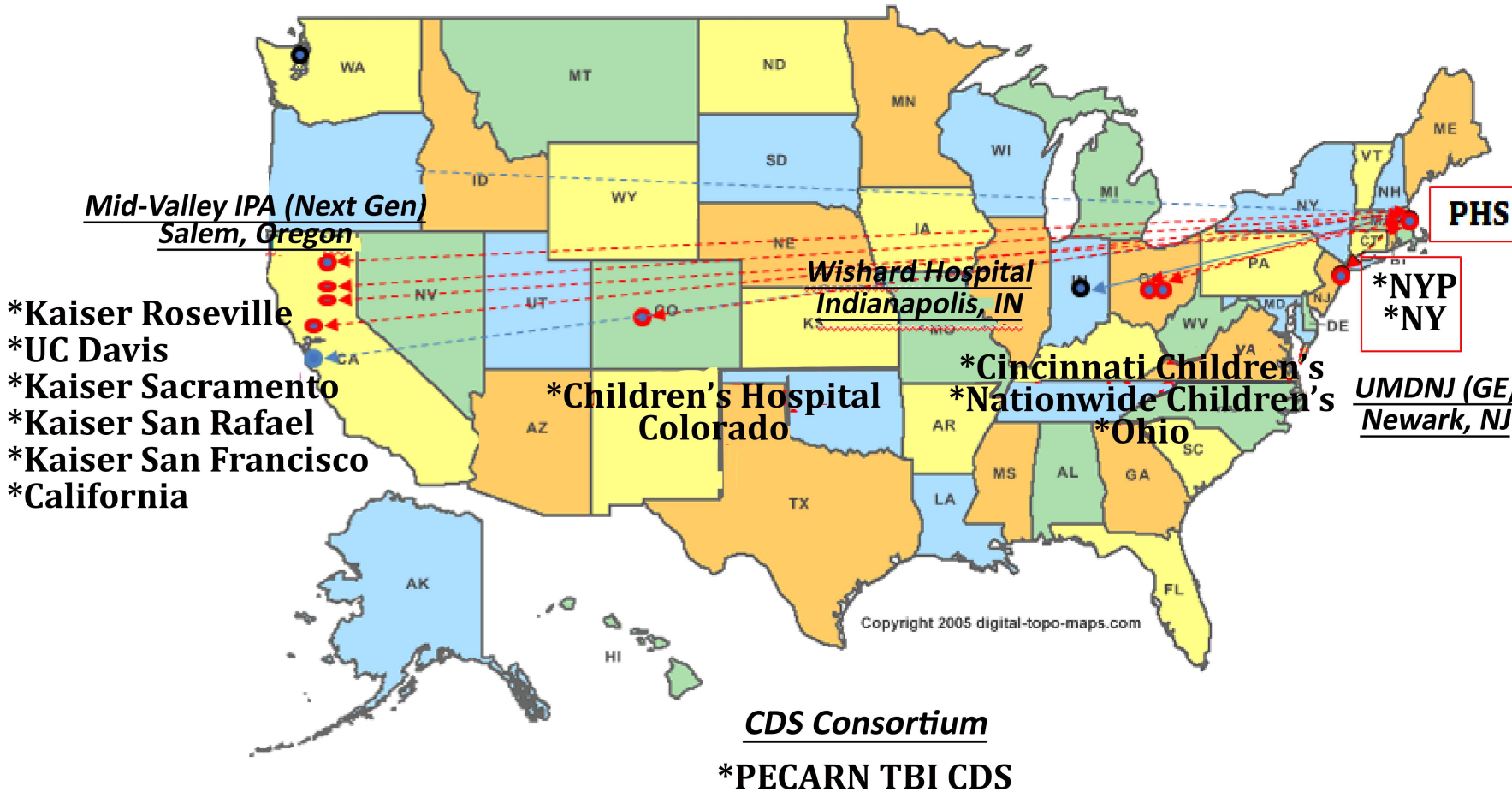
Table 1

Summary of the grand challenges of clinical decision support along with their mean rank and the standard deviation of that ranking ($n = 9$)

Grand challenge description	Mean ranking	Standard deviation
Improve the human–computer interface	2.89	2.71
Disseminate best practices in CDS design, development, and implementation	3.33	1.87
Summarize patient-level information	3.67	2.06
Prioritize and filter recommendations to the user	4.56	2.96
Create an architecture for sharing executable CDS modules and services	5.44	2.30
Combine recommendations for patients with co-morbidities	5.89	2.20
Prioritize CDS content development and implementation	6.00	2.96
Create internet-accessible clinical decision support repositories	6.89	1.69
Use freetext information to drive clinical decision support	7.89	1.27
Mine large clinical databases to create new CDS	8.44	3.00

CDS Consortium Demonstrations: 2008-13

Toward a National Knowledge Sharing Service



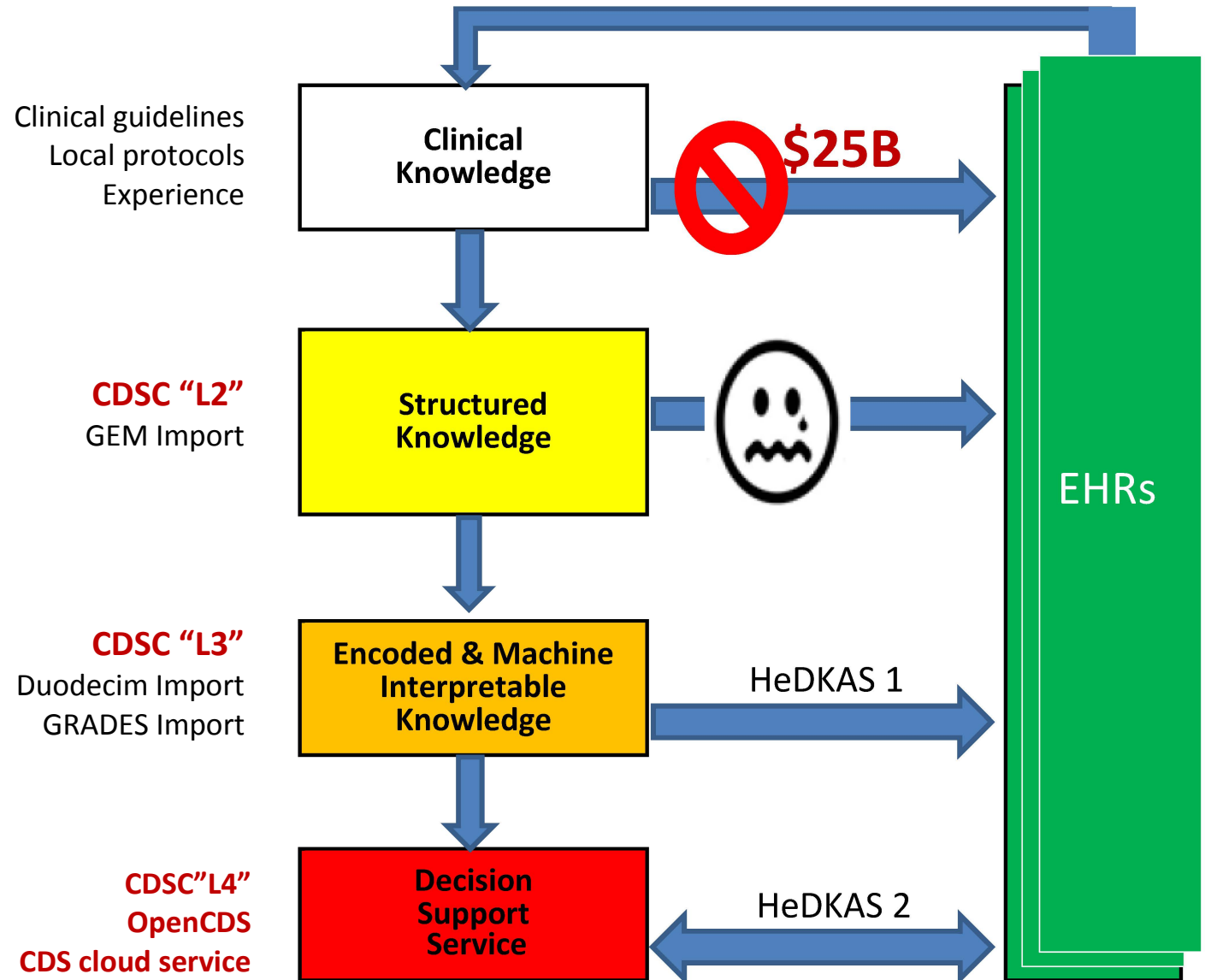
Clinical Decision Support Consortium
Middleton B, PI: 2008-13, AHRQ –funded: HHS290200810010

Major accomplishments:

- Knowledge artifacts published: 11 clinical rules, 50+ classification rules and 375 immunization schedule rules
- 8 clinical sites implemented using 5 different EHRs
- More than 240 users utilize CDS services
- Established legal framework for collaboration
- Since 2010 more than 1.7M CCD transactions were processed
- 31 entities (companies and academics) in a pre-competitive environment
- Contributed to ONC-sponsored Health- e-Decisions efforts: KAS 1 and KAS 2

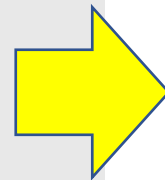
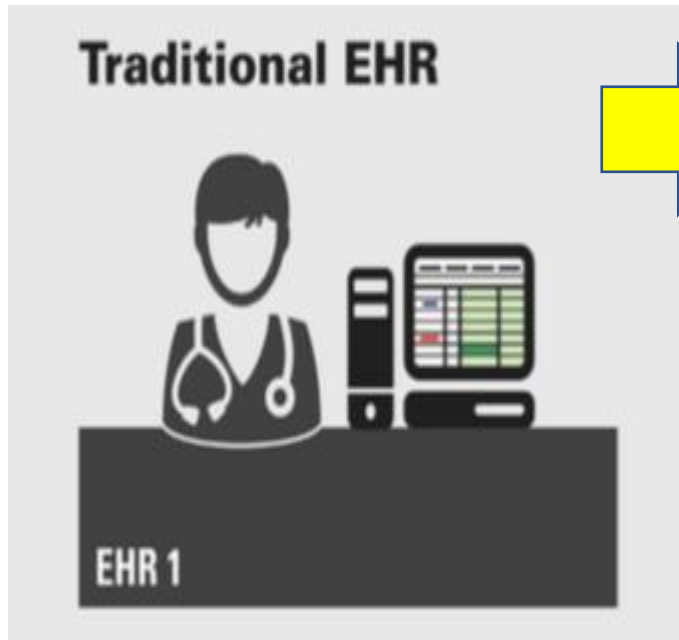
CDS “Unified Approach”

*Kawamoto K, Middleton B,
Reider J, Rosendale D, Schiffman R.
From **Guidelines to Clinical
Decision Support: a Unified
Approach to Translating and
Implementing Knowledge**
AMIA Panel Presentation, Chicago,
IL 2012*



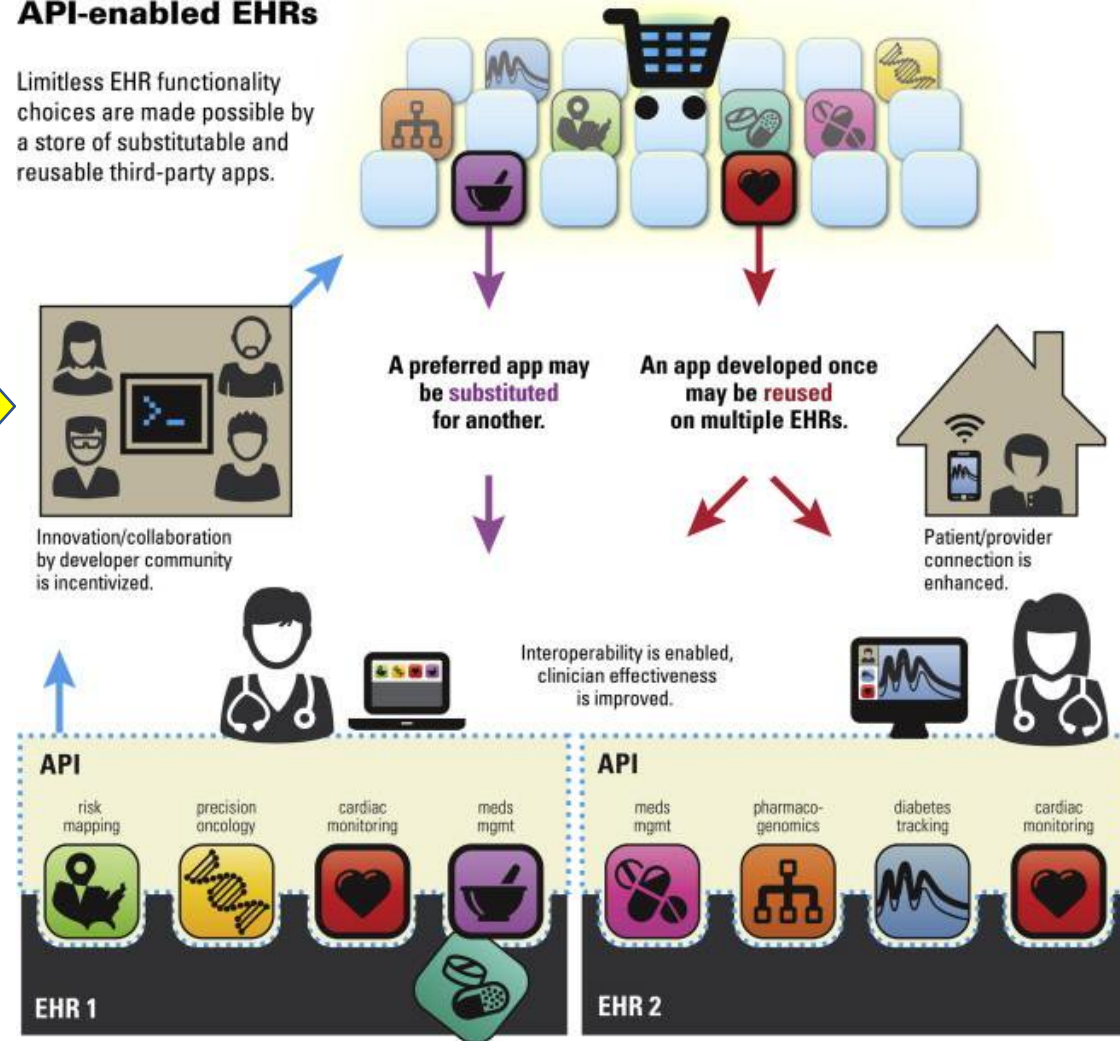
“CDSC” = CDS Consortium

EHR - API Ecosystem



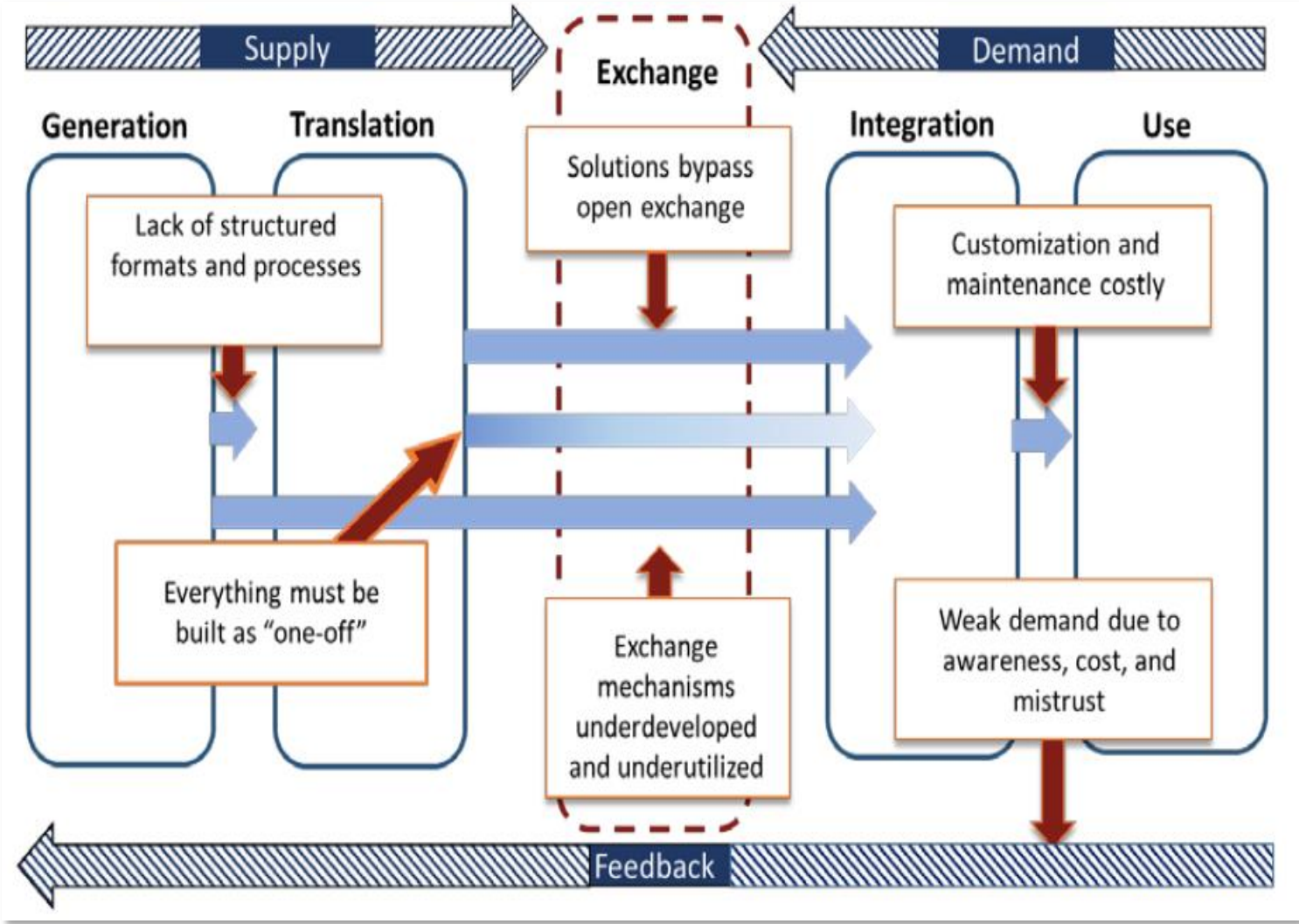
API-enabled EHRs

Limitless EHR functionality choices are made possible by a store of substitutable and reusable third-party apps.



K.D. Mandl, J.C. Mandel, I.S. Kohane, Driving Innovation in Health Systems through an Apps-Based Information Economy, Cell Syst. 1 (2015) 8–13.

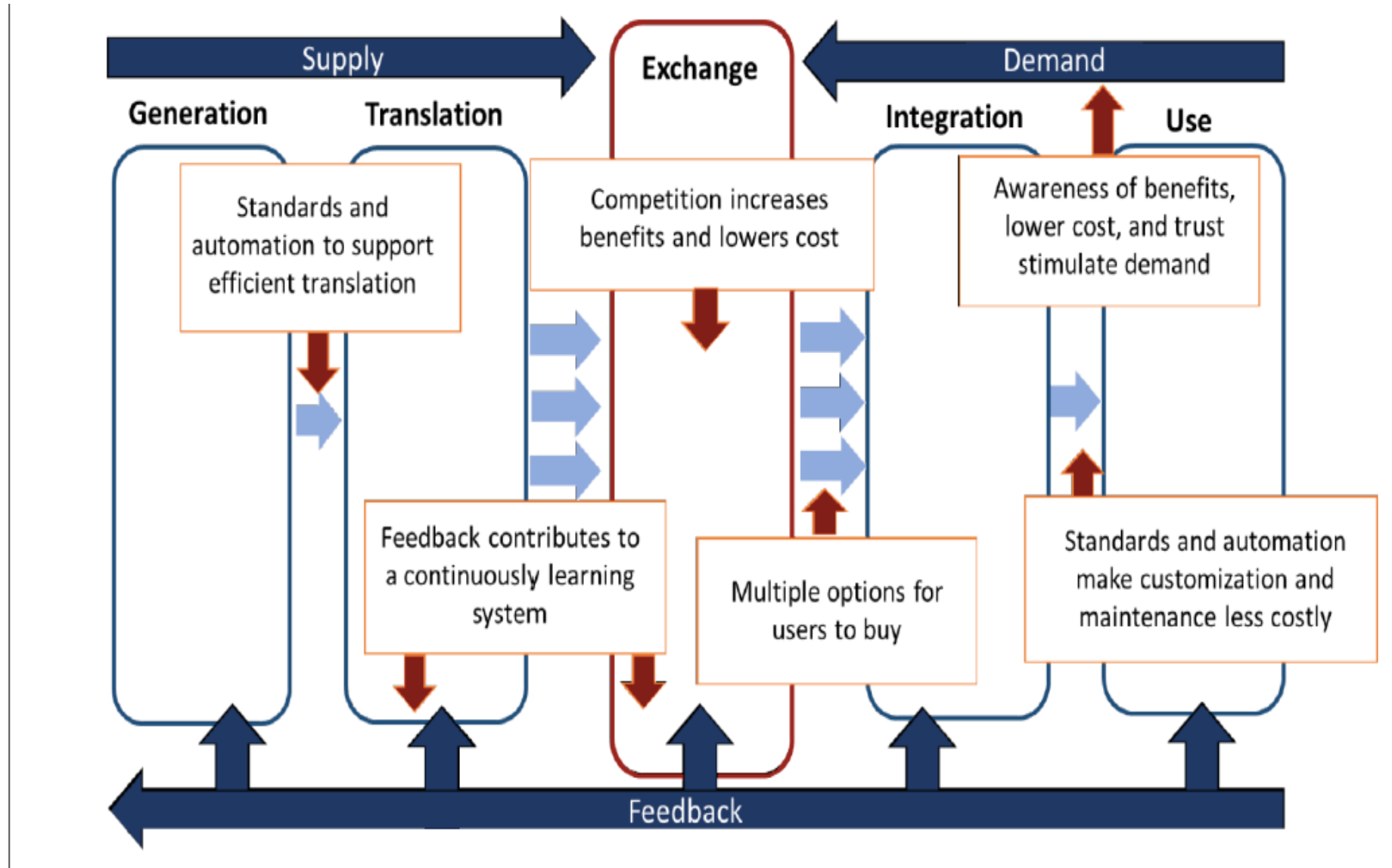
CDS Marketplace Current State



*CDS Resource
Sharing and Use*

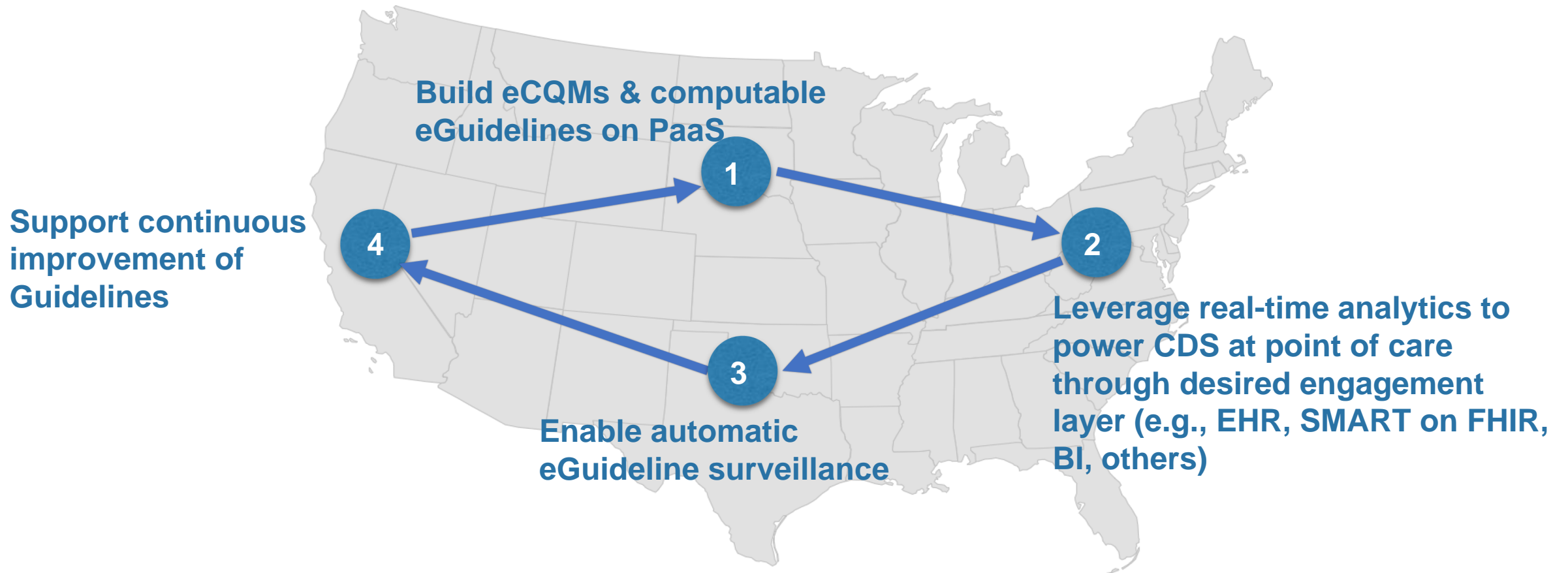
*Discern Health
Recommendations
to Office Clinical
Quality and Safety,
ONC, 2015*

CDS Market Preferred State



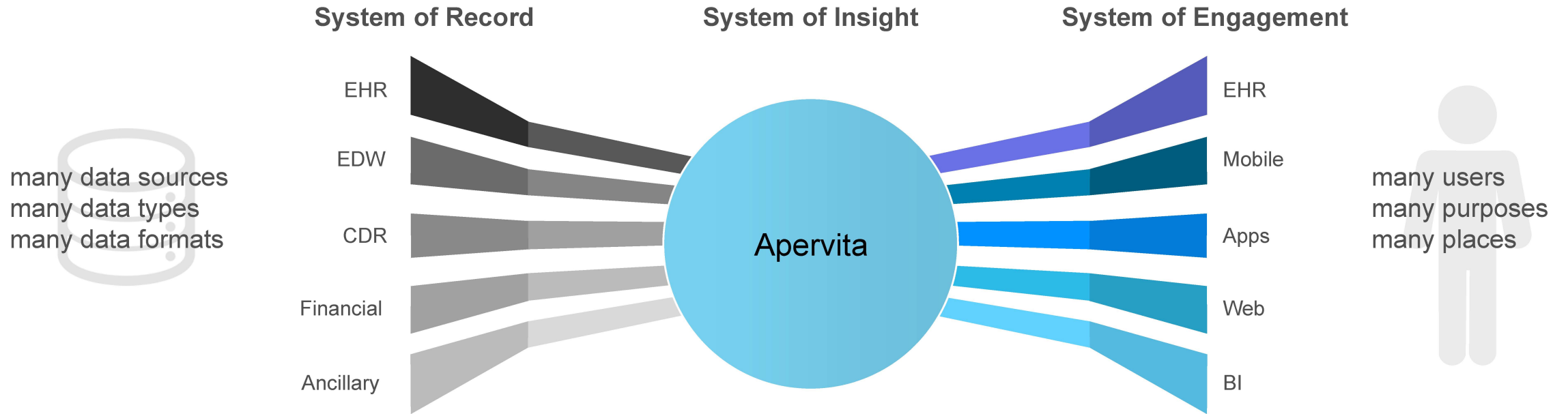
The Vision: CDS for 'best care everywhere'

We need a new approach and capabilities to distribute and operationalize computable clinical guidelines as CDS and monitor its effectiveness



A System of Insight

The platform to implement a next generation architecture



Apervita is positioned to support HCOs and business networks at scale: supporting and providing leadership in the vision, design, and deployment of advanced applications and analytics across the healthcare industry

Methodology and Application Overview

L1 Started with paper CDS STI Guideline

L2 Converted Guideline to a logic flow diagram

L3 Built standards-compliant CQL and FHIR Resources

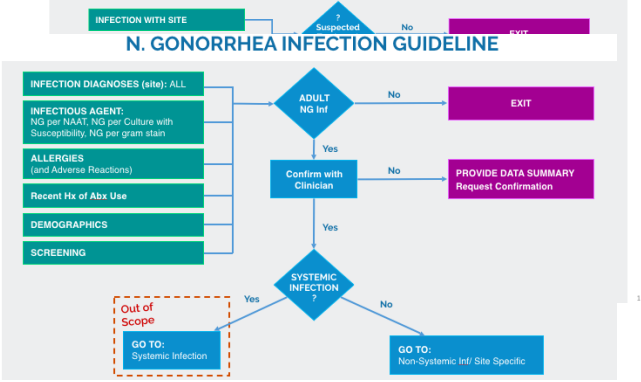
L4 Implemented real-time CDS on Apervita



Sexually Transmitted Diseases Treatment Guidelines, 2015



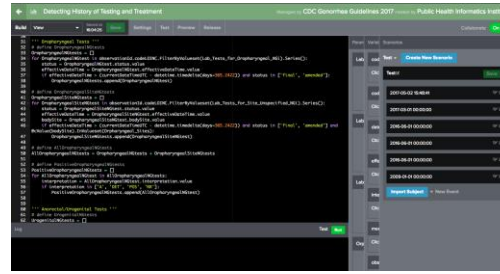
Suspected Cephalosporin Treatment Failure for N. gonorrhoea Infection



```

define PossibleNGTests:
  [Observation: code in
  where
    S.effectiveDateTime
    S.status in {'final',
    S.interpretation |
  sort by S.effective

  {
    "type": "data-added",
    "resource": {
      "type": "Observation",
      "subject": {
        "path": "code",
        "valueString": "Lab Tests for Urogenital Neisseria Gonorrhoea Infections"
      }
    }
  }
  }
  {
    "type": "applicability",
    "description": "An adult or adolescent person with no relevant drug allergies has a new untreated urogenital NG inf.",
    "language": "en",
    "applicability": "1xCandidateForStandardNGITreatmentRecommendation"
  }
  }
  
```



Boxwala AA, Rocha BH, Maviglia S, et al. A multi-layered framework for disseminating knowledge for computer-based decision support. Journal of the American Medical Informatics Association : JAMIA. 2011;18 Suppl 1:i132-i139.

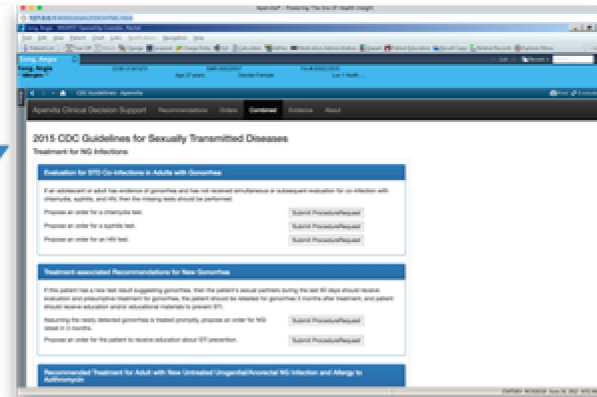
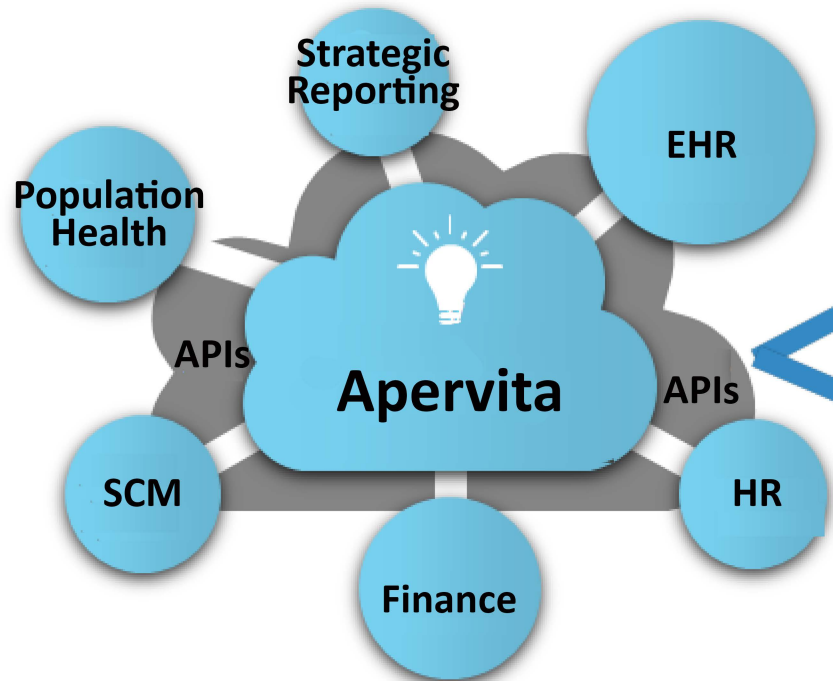
Implementation and Application Overview

Analytics Engine
apervita

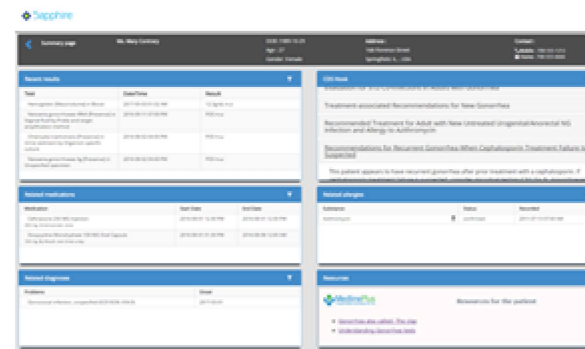
EHRs



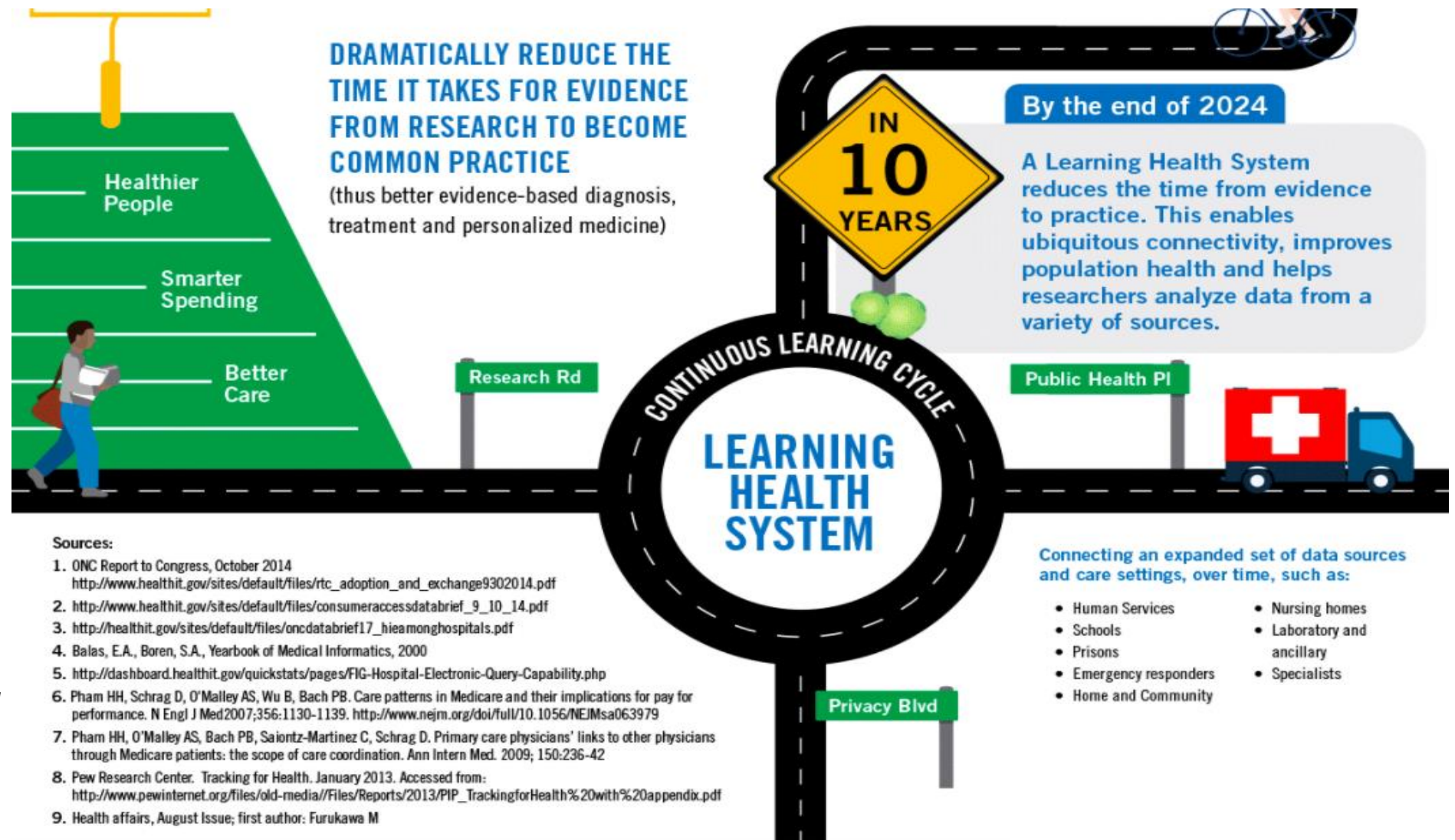
SMART on FHIR Apps



SMART on FHIR
Elimu Sapphire



Shared Nationwide Interoperability Roadmap: The Journey to Better Health and Care



<http://bit.ly/2hYDJSJ>

Thank You!

Blackford Middleton

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