Me Danish Ba microbiology database

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OVERVIEW

• The visions



- The basic principles of MiBa
- Datamodel and coding
- Perspectives for use of SNOMED CT in MiBa



THE PRIMARY VISIONS FOR MIBA

 Nationwide sharing of patient reports on microbiological test results.

- A new national surveillance system for infectious diseases and microorganisms:
 - automatic, flexible and real time.

• A database for research and quality assessment projects.

MIBA IS A COLLABORATION BETWEEN

All Danish Microbiology Departments

- Suppliers of Laboratory information systems
 - Autonik AB
 - MADS
- Statens Serum Institut
 - Microbiology and Infection Control
 - Virology Surveillance and Research
 - Department of Infectious Disease Epidemiology
 - National Sundheds IT (NSI)
- MedCom
- The Ministry of Health

BASIC PRINCIPLES OF MIBA



DEPARTMENTS OF CLINICAL MICROBIOLOGY IN DENMARK



ACCES TO MICROBIOLOGICAL TEST REPORTS

Before MiBa

 No sharing of test reports between hospitals or GPs

After MiBa

Nationwide acces to all test reports





LOOK UPS (OF INDIVIDUAL PATIENTS) IN MIBA PER MONTH





Voldstedlund, Infektionsepidemiologisk afdeling, Statens Serum Institut NATION WIDE ACCES TO

ALL TEST REPORTS



In MiBa:

14 millions records

accumulated from Jan 2010 - Oct 2014

The Danish population: 5,5 million

NATIONAL SURVEILLANCE





NATIONAL SURVEILLANCE AS IS - (BEFORE MIBA)



Based on manual workflows

STATENS

SERUM INSTITUT



Automatic real time data transfer and analysis



Lab confimed infuenza

STATENS

INSTITUT

Voldstedlund, Infektionsepidemiologisk afdeling, Statens Serum Institut

- Complete data at a national level
- Real time data
- Both positive and negative test results
- All data are personalised (contain the unique CPR number)
- Can be linked to other public registries
- No extra burdens of reporting for the laboratories or health care workers

STATENS

HOW DIFFICULT CAN THIS BE.....



STATENS

SERUM INSTITUT

DATA TRANSFER



STANDARD XML TRANSFER PROTOCOL (MEDCOM XRPT05)



DATA MODEL





MAIN VARIABLES IN MIBA TEST REPORTS

Administrative data

- Patient identification / CPR-number
- Sample IDs
- Various dates
- Requestor (hospital department or GP) (code)*
- Laboratory that performed the test (code)*
- The kind of test ordered (code)*
- Material examined (code)*
- Anatomical location of (code)*
- Clinical information (text)

Results / findings

- Microorganism (findings) (local code)
- Antimicrobial resistance pattern (local code)
- Test performed (analyses) (local code)
- Result / interpretation of test (local code)
- Final evaluation or comment (text)

* National codes

Epidemiology, Statens Serum Institute, Copenhagen, Denmark

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National codes

CENTRAL DYNAMIC MAPNING



Same term for MiBa and SNOMED CT (preferred term)



MAPPING IN PROGRESS





7700 local terms accumulated in MiBa

6650 terms evaluated and mapped to a shared term 1160 shared terms or concepts created in the MiBa classification 790 terms mapped to SNOMED CT[®] Microorganism.

Some terms do not belong to this klassification

SNOMED CT® MICROORGANISM

1:1 mapping

- semi automatically and manually using a browser

- 792 MiBa mapped 1:1 to SNOMED CT
- Definitions of "Genus" >< " X species"
- 35 new SNOMED CT concepts
- Unresolved issues:





- Genus Enterobacter (organism)
 - Enterobacter species synonym to Genus
- Genus Salmonella
 - Salmonella species child of Genus



CONCLUSIONS AND PERSPECTIVES

- The clinically important preferred terms of the microorganism sub- hierarchy in SNOMED CT have been evaluated by Danish experts in microbial taxonomy
- The microorganism sub-hierarchy was found
 - valid and up-to-date
 - suitable for implementation in MiBa as a national terminology
- A few concept's were missing (now created in the Danish extension)
- The concept of X species needed clarification
- Technical aspects of a SNOMED CT implementation will now be considered
- Other MiBa classifications will be considered for SNOMED CT mapping

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