4.2 Modules

In SNOMED CT, modules are used to organize content for maintenance and publication purposes. All concepts, descriptions, relationships, and reference set members must belong to a module. When a module is published, as part of a release package, all concepts, descriptions, relationships and reference sets that belong to that module must be published together. According to the logical design, this association between a component or reference set member and its associated module is made using the *moduleId* attribute. The moduleId attribute refers to a concept that represents and names the module in which a component or reference set is currently maintained. All components and reference set members within a module are maintained by a single organization.

SNOMED International Modules

The International Edition includes two modules. The core clinical components of SNOMED CT belong to the | SNOMED CT core module| . Metadata components, which support the specification of the terminology, belong to the | SNOMED CT model component module| . Both these modules are main tained by SNOMED International.

SNOMED International also maintains several other modules that supplement, rather that being part of, the International Edition. These include the | SN OMED CT to ICD-10 rule-based mapping module| and the | LOINC - SNOMED CT Cooperation Project module| .

Member and Affiliate Modules

Components and reference sets maintained by Members and Affiliate licensees are also organized into one or more modules. The module concepts used for this purpose must be created and maintained by the same organization. In most cases, the module concept and its associated descriptions and relationships will belong to the same module to which its identifier refers.[1]

Examples

Table 4.2-1 below lists some examples of modules, together with the organization responsible for maintaining and distributing the contents of the module. Note that the namespace identifier (highlighted in red) used in the module identifier refers to the organization who is responsible for that module.

Table 4.2-1: Examples of modules

Module Identifier	Module name	Maintained by
449080006		SNOMED CT to ICD-10 rule-based mapping module|	SNOMED International
731000124108		US National Library of Medicine maintained module|	US National Library of Medicine – Member
22091000087100		Canada Health Infoway Reference Set Module|	Canada Health Infoway – Member
999000011000000103		SNOMED CT United Kingdom clinical extension module|	NHS Digital (UK) – Member

Table 4.2-2 includes a subset of columns and rows from the description file in the 20170301 US Edition. Note that the preferred term of the moduleId is included in the table for readability.

Table 4.2-2: Descriptions assigned to different modules in the US Edition

id	effectiveTime	active	moduleId	conceptId	term
301485011	20170731	1	900000000000207008	SNOMED CT core module|	195967001	Asthma
15631000124116	20120301	1	731000124108	US National Library of Medicine maintained module|	5281000124103	Persistent asthma
181114011	20170731	1	900000000000012004	SNOMED CT model component module|	116680003	Is a

The example above reinforces some key points. Firstly, all components belong to exactly one module, as identified by the moduleId. Secondly, an edition may include components that belong to modules maintained by different organizations.

Footnotes

RefNotes

1 The module concept may, alternatively, belong to a different module maintained by the same organization. When this is the case, the module will necessarily depend upon the module that contains its identifying concept. It is therefore usually simpler to keep the module concept within the module it identifies.