Health & Care Information Model: nl.zorg.AlcoholUse-v3.0

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1. nl.zorg.AlcoholUse-v3.0

Kerngroep Registratie aan de Bron
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Projectgroep Generieke Overdrachtsgegevens &
Kerngroep Registratie aan de Bron
nl
PM
2.16.840.1.113883.2.4.3.11.60.40.3.7.3
social history, sociale anamnese, alcohol
Final
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nl.zorg.AlcoholGebruik
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22-5-2015
nl.nfu.AlcoholGebruik-v1.2.1
3.0
EN

1.1 Revision History

Publicatieversie 1.0 (15-02-2013)

-

Publicatieversie 1.1 (01-07-2013)

-

Publicatieversie 1.2 (01-04-2015)

Bevat: ZIB-116, ZIB-117, ZIB-167, ZIB-235, ZIB-308, ZIB-345.

Incl. algemene wijzigingsverzoeken:

ZIB-94, ZIB-154, ZIB-200, ZIB-201, ZIB-309, ZIB-324, ZIB-326.

Publicatieversie 1.2.1 (22-05-2015)

Bevat: ZIB-378.

Publicatieversie 3.0 (01-05-2016)

Bevat: ZIB-453

1.2 Concept

In the context of this information model, alcohol is the collective term for alcoholic beverages consumed as a leisure product. This information model describes the information asked of the patient about their alcohol use.

1.3 Mindmap

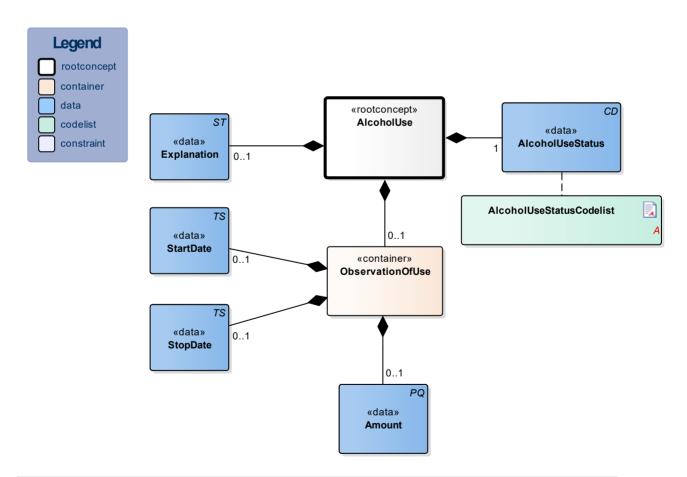
1.4 Purpose

During the social anamnesis, the patient is frequently asked about their alcohol consumption. Excessive (episodic) alcohol consumption may influence the current treatment and diagnostics. Alcohol-related problems are diagnosed as secondary diagnoses more and more often. Source: Guidelines - Multidisciplinary guidelines for Disorders in alcohol use (CBO, 2009)

1.5 Patient Population

1.6 Evidence Base

1.7 Information Model



«rootconcept»	AlcoholUse
	Root concept of the AlcoholUse information model. This concept contains all data elements of the AlcoholUse information model.
Datatype	

DCM::ConceptId	NL-CM:7.3.1	
Opties		

«data»	Explanation		
Definitie	Relevant comments on the alcohol consumption.		
Datatype	ST		
DCM::ConceptId	NL-CM:7.3.7		
DCM::ExampleValue	consumptie alcohol alleen in		
	het weekend		
Opties			

«data»	AlcoholUseStatus		
Definitie	The status of the patient's alcohol use.		
Datatype	CD		
DCM::ConceptId	NL-CM:7.3.2		
DCM::ExampleValue	Drinkt alcohol		
DCM::ValueSet	AlcoholUseStatusCodelist	OID:	
		2.16.840.1.113883.2.4.3.11.60.40.2.7.3.2	
Opties			

«container»	ObservationOfUse		
Definitie	Container of the ObservationOfUse concept. This container contains all data elements of the observation of alcohol use.		
Datatype			
DCM::ConceptId	NL-CM:7.3.3		
Opties			

«data»	StartDate		
Definitie	The date on which the patient started using alcohol.		
Datatype	TS		
DCM::ConceptId	NL-CM:7.3.4		
DCM::ExampleValue	1975		
Opties			

«data»	StopDate		
Definitie	The date on which the patient stopped consuming alcohol.		
Datatype	TS		
DCM::ConceptId	NL-CM:7.3.5		
DCM::ExampleValue	28-02-2012		
Opties			

«data»	Amount		
Definitie	The extent of the patient's alcohol use in units of alcohol per time period.		
Datatype	PQ		
DCM::ConceptId	NL-CM:7.3.6		
DCM::ExampleValue	20/w		
Opties			

«document»	AlcoholUseStatusCodelist		
Definitie			
Datatype			
DCM::ValueSetId	2.16.840.1.113883.2.4.3.11.		
	60.40.2.7.3.2		
Opties			

AlcoholGebruikStatusCodelijst			OID: 2.16.840.1.113883.2.4.3.11.60.40.2.7.3.2	
Concept Name	Concept Code	Coding Syst. Name	Coding System OID	Description
Current drinker of alcohol (finding)	219006	SNOMED CT	2.16.840.1.113883.6.96	Drinkt alcohol
Ex-drinker (finding)	82581004	SNOMED CT	2.16.840.1.113883.6.96	Dronk vroeger alcohol
Lifetime non-drinker (finding)	228274009	SNOMED CT	2.16.840.1.113883.6.96	Heeft nooit alcohol gedronken
Anders	ОТН	NullFlavor	2.16.840.1.113883.5.10 08	Anders

1.8 Example Instances

AlcoholGebruikStatusCode	StartDatum	StopDatum	Hoeveelheid
Drinkt alcohol	1995		3 eenheden per dag

1.9 Instructions

If the exchange of information on past alcohol consumption is desired in the event that the patient has by now stopped or significantly reduced their alcohol intake, then this can be done by applying the information model a second time with an entered stop date, so that it is clear that the amount of units per day is the past amount.

If desired, the sender can include the type of alcohol used in the 'Explanation' field.

1.10 Interpretation

1.11 Care Process

1.12 Example of the Instrument

1.13 Constraints

1.14 Issues

1.15 References

1.16 Functional Model

1.17 Traceability to other Standards

1.18 Disclaimer

This Health and Care Information Model (a.k.a Clinical Building Block) has been made in collaboration with several different parties in healthcare. These parties asked Nictiz to manage good maintenance and development of the information models. Hereafter, these parties and Nictiz are referred to as the collaborating parties. The collaborating parties paid utmost attention to the reliability and topicality of the data in these Health and Care Information Models. Omissions and inaccuracies may however occur. The collaborating parties are not liable for any damages resulting from omissions or inaccuracies in the information provided, nor are they liable for damages resulting from problems caused by or inherent to distributing information on the internet, such as malfunctions, interruptions, errors or delays in information or services provide by the parties to you or by you to the parties via a website or via e-mail, or any other digital means. The collaborating parties will also not accept liability for any damages resulting from the use of data, advice or ideas provided by or on behalf of the parties by means of this Health and Care Information Model. The parties will not accept any liability for the content of information in this Health and Care Information Model to which or from which a hyperlink is referred. In the event of contradictions in mentioned Health and Care Information Model documents and files, the most recent and highest version of the listed order in the revisions will indicate the priority of the documents in question. If information included in the digital version of this Health and Care Information Model is also distributed in writing, the written version will be leading in case of textual differences. This will apply if both have the same version number and date. A definitive version has priority over a draft version. A revised version has priority over previous versions.

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