

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

Status:Final

Release:2016

Release status: Published

Managed by:

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1. nl.zorg.DrugUse-v3.0

DCM::CoderList	Kerngroep Registratie aan de Bron
DCM::ContactInformation.Address	*
DCM::ContactInformation.Name	*
DCM::ContactInformation.Telecom	*
DCM::ContentAuthorList	Projectgroep Generieke Overdrachtsgegevens & Kerngroep Registratie aan de Bron
DCM::CreationDate	
DCM::DeprecatedDate	
DCM::DescriptionLanguage	nl
DCM::EndorsingAuthority.Address	
DCM::EndorsingAuthority.Name	PM
DCM::EndorsingAuthority.Telecom	
DCM::Id	2.16.840.1.113883.2.4.3.11.60.40.3.7.4
DCM::KeywordList	drugsgebruik, verdovende middelen, middelen gebruik, drugs
DCM::LifecycleStatus	Final
DCM::ModelerList	Kerngroep Registratie aan de Bron
DCM::Name	nl.zorg.DrugsGebruik
DCM::PublicationDate	1-5-2016
DCM::PublicationStatus	Published
DCM::ReviewerList	Projectgroep Generieke Overdrachtsgegevens & Kerngroep Registratie aan de Bron
DCM::RevisionDate	16-7-2015
DCM::Superseeds	nl.nfu.DrugsGebruik-v1.2.2
DCM::Version	3.0
HCIM::PublicationLanguage	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-138, ZIB-139, ZIB-158, ZIB-161, ZIB-167, ZIB-224, ZIB-225, ZIB-308, ZIB-312, ZIB-313, ZIB-316, ZIB-319.

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-388.

Publicatieversie 1.2.2 (16-07-2015)

Bevat: ZIB-418.

Publicatieversie 3.0 (01-05-2016)

Bevat: ZIB-453

1.2 Concept

Drugs (or: narcotics, amphetamines, intoxicants, highs, hallucinogenics, illegal substances or dope) is a

collective term for drugs and chemical substances with a more or less 'drugging' (anesthetic, boosting and/or hallucinogenic) effect and which can lead to addiction. Drug [Online] Available at: nl.Wikipedia.org/wiki/drug [Accessed: 11 February 2015].

This information model describes the information asked of the patient about their drug use.

1.3 Mindmap

1.4 Purpose

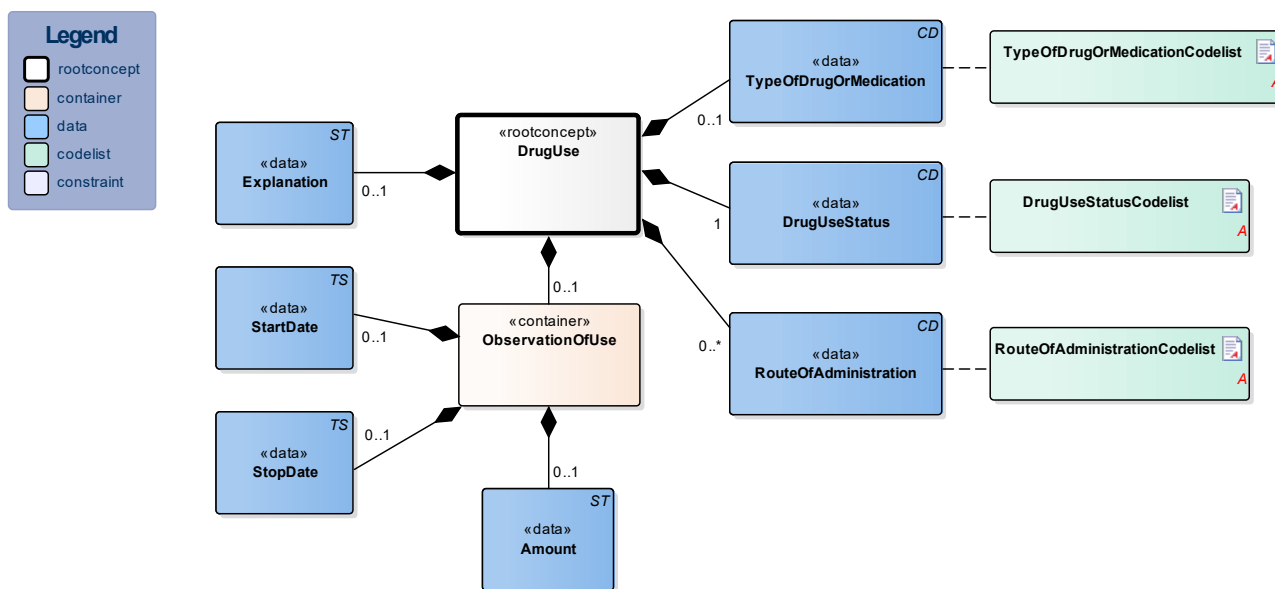
Documenting and sharing registration of the drug use, as described in the concept.

1.5 Patient Population

1.6 Evidence Base

Though this information model can also be used to abuse (the patient's own) medication, the project group eventually decided to focus on the transfer of information on drug use, as described in the concept. Seeing as there is a large variety of ways to record the amount of drugs used, we decided that this part is to be entered as free text.

1.7 Information Model



«rootconcept»	DrugUse	
Definitie	Root concept of the DrugUse information model. This concept contains all data elements of the DrugUse information model.	
Datatype		
DCM::ConceptId	NL-CM:7.4.1	
Opties		

«container»	ObservationOfUse
Definitie	Container for ObservationOfUse. This container contains all data elements of the ObservationOfUse container.
Datatype	
DCM::ConceptId	NL-CM:7.4.5
Opties	

«data»	StartDate
Definitie	The date on which the patient started using.
Datatype	TS
DCM::ConceptId	NL-CM:7.4.6
DCM::ExampleValue	1975
Opties	

«data»	StopDate
Definitie	The date on which the patient quit using
Datatype	TS
DCM::ConceptId	NL-CM:7.4.7
DCM::ExampleValue	28-02-2012
Opties	

«data»	Amount
Definitie	The number of units (pills, joints, shots etc.) per day, week, month or year or the frequency of use.
Datatype	ST
DCM::ConceptId	NL-CM:7.4.8
DCM::ExampleValue	3 maal per week
Opties	

«data»	Explanation
Definitie	Relevant comments on the drug use.
Datatype	ST
DCM::ConceptId	NL-CM:7.4.9
DCM::ExampleValue	XTC
Opties	

«data»	TypeOfDrugOrMedication
Definitie	Type of drug used by the patient.
Datatype	CD
DCM::ConceptId	NL-CM:7.4.2
DCM::ExampleValue	LSD
DCM::ValueSet	TypeOfDrugOrMedicationCo delist OID: 2.16.840.1.113883.2.4.3.11.60.40.2.7.4.1
Opties	

«data»	DrugUseStatus
Definitie	Indication stating whether there was any drug use in the past or present.

Datatype	CD	
DCM::ConceptId	NL-CM:7.4.3	
DCM::ExampleValue	Huidig gebruik	
DCM::ValueSet	DrugUseStatusCodelist	OID: 2.16.840.1.113883.2.4.3.11.60.40.2.7.4.2
Opties		

«data»	RouteOfAdministration	
Definitie	The way the drugs are used.	
Datatype	CD	
DCM::ConceptId	NL-CM:7.4.4	
DCM::ExampleValue	intraveneus (spuiten)	
DCM::ValueSet	RouteOfAdministrationCodelist	OID: 2.16.840.1.113883.2.4.3.11.60.40.2.7.4.3
Opties		

«document»	DrugUseStatusCodelist	
Definitie		
Datatype		
DCM::ValueSetId	2.16.840.1.113883.2.4.3.11.60.40.2.7.4.2	
Opties		

DrugGebruikStatusCodelijst			OID: 2.16.840.1.113883.2.4.3.11.60.40.2.7.4.2	
Concept Name	Concept Code	Coding Syst. Name	Coding System OID	Description
Misuses drugs (finding)	361055000	SNOMED CT	2.16.840.1.113883.6.96	misbruikt drugs
Has never misused drugs	228368007	SNOMED CT	2.16.840.1.113883.6.96	heeft nooit drugs misbruikt
Misused drugs in past (finding)	44870007	SNOMED CT	2.16.840.1.113883.6.96	heeft in het verleden drugs gebruikt

«document»	RouteOfAdministrationCodelist	
Definitie		
Datatype		
DCM::ValueSetId	2.16.840.1.113883.2.4.3.11.60.40.2.7.4.3	
Opties		

ToedieningswegCodelijst			OID: 2.16.840.1.113883.2.4.3.11.60.40.2.7.4.3	
Concept Name	Concept Code	Coding Syst. Name	Coding System OID	Description
ORAAL	9	G-Standaard Toedieningswegen	2.16.840.1.113883.2.4.4.9	oraal
NASAAL	6	G-Standaard Toedieningswegen	2.16.840.1.113883.2.4.4.9	nasaal (snuiven)
INHALATIE	62	G-Standaard Toedieningswegen	2.16.840.1.113883.2.4.4.9	Inhalatie (roken)

INTRAVENEUS	5	G-Standaard Toedieningsweg	2.16.840.1.113883.2.4.4.9	Intraveneus (spuiten)
Other	OTH	NullFlavor	2.16.840.1.113883.5.1008	Anders

«document»		TypeOfDrugOrMedicationCodelist		
Definitie				
Datatype				
DCM::ValueSetId	2.16.840.1.113883.2.4.3.11.60.40.2.7.4.1			
Opties				
DrugsOfGeneesmiddelSoortCodelijst			OID: 2.16.840.1.113883.2.4.3.11.60.40.2.7.4.1	
Concept Name	Concept Code	Coding Syst. Name	Coding System OID	Description
Heroin (substance)	387341002	SNOMED CT	2.16.840.1.113883.6.96	Heroïne
Benzodiazepine (substance)	372664007	SNOMED CT	2.16.840.1.113883.6.96	Benzodiazepine
Methadone (substance)	387286002	SNOMED CT	2.16.840.1.113883.6.96	Methadon
Hydroxybutyric acid (substance)	62821004	SNOMED CT	2.16.840.1.113883.6.96	GHB
Cocaine (substance)	387085005	SNOMED CT	2.16.840.1.113883.6.96	Cocaïne
Cocaine freebase (substance)	229003004	SNOMED CT	2.16.840.1.113883.6.96	Crack, base coke
Methylenedioxymethamphetamine (substance)	288459003	SNOMED CT	2.16.840.1.113883.6.96	MDMA
Amphetamine (substance)	703842006	SNOMED CT	2.16.840.1.113883.6.96	Amfetamine, speed
Cannabis (substance)	398705004	SNOMED CT	2.16.840.1.113883.6.96	Cannabis, wiet marihuana, hasj
Hallucinogenic mushrooms (substance)	229006007	SNOMED CT	2.16.840.1.113883.6.96	Paddo's
Lysergic acid diethylamide (substance)	15698006	SNOMED CT	2.16.840.1.113883.6.96	LSD
Ketamine (substance)	373464007	SNOMED CT	2.16.840.1.113883.6.96	Ketamine
Phencyclidine (substance)	9721008	SNOMED CT	2.16.840.1.113883.6.96	PCP
Methamphetamine (substance)	387499002	SNOMED CT	2.16.840.1.113883.6.96	Crystal meth, methamfetamine
Anabolic steroid (substance)	111151007	SNOMED CT	2.16.840.1.113883.6.96	Anabole steroïde
Laxative (substance)	372800002	SNOMED CT	2.16.840.1.113883.6.96	Laxans
Other	OTH	NullFlavor	2.16.840.1.113883.5.1008	Anders

1.8 Example Instances

Soort Middel	Drugs Gebruik Status	Start datum	Stop datum	Toedieningsweg	Hoeveelheid	Toelichting
XTC	misbruikt drugs	1985		oraal	2x per maand	Op feestjes en in uitgaanscircuit. Vroeger wat meer dan tegenwoordig.
Soort Middel	Drugs Gebruik Status	Start datum	Stop datum	Toedieningsweg	Hoeveelheid	Toelichting
Heroïne	heeft in het verleden drugs gebruikt	1970	1985	intraveneus	3x per week	

1.9 Instructions

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

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