Health & Care Information Model:

nl.zorg.SOAPReport-v1.0

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Nictiz Better health through better information

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1. nl.zorg.SOAPReport-v1.0

DCM::CoderList	
DCM::ContactInformation.Address	*
DCM::ContactInformation.Name	*
DCM::ContactInformation.Telecom	*
DCM::ContentAuthorList	
DCM::CreationDate	25-5-2020
DCM::DescriptionLanguage	nl
DCM::EndorsingAuthority.Address	
DCM::EndorsingAuthority.Name	PM
DCM::EndorsingAuthority.Telecom	
DCM::Id	2.16.840.1.113883.2.4.3.11.60.40.3.13.6
DCM::KeywordList	Notitie, Verslag, SOEP
DCM::LifecycleStatus	Final
DCM::ModelerList	Zib centrum
DCM::Name	nl.zorg.SOEPVerslag
DCM::PublicationDate	01-09-2020
DCM::PublicationStatus	Published
DCM::ReviewerList	
DCM::RevisionDate	
DCM::Supersedes	
DCM::Version	1.0
HCIM::PublicationLanguage	EN

1.1 Revision History

Publicatieversie 1.0 (01-09-2020)

1.2 Concept

A SOUP report is a textual report of (part of the consult) according to the SOUP structure. SOUP (acronym for subjective, objective, evaluation, plan) is a method used by health professionals to structurally record information that comes up during contact between the patient and a health professionals in the patient's record.The following standardized format is used for reporting:

- Subjective: the patient's complaint and request for help and the amnesic data
- Objective: the findings from the physical and supplementary examination.
- Assessment: the working hypothesis and the thinking process, for example a differential diagnosis of the healthcare professional.
- Plan: the diagnostic plan or treatment plan and what has been discussed or agreed with the patient.

The SOAP report is mainly used in general practice care.

1.3 Mindmap

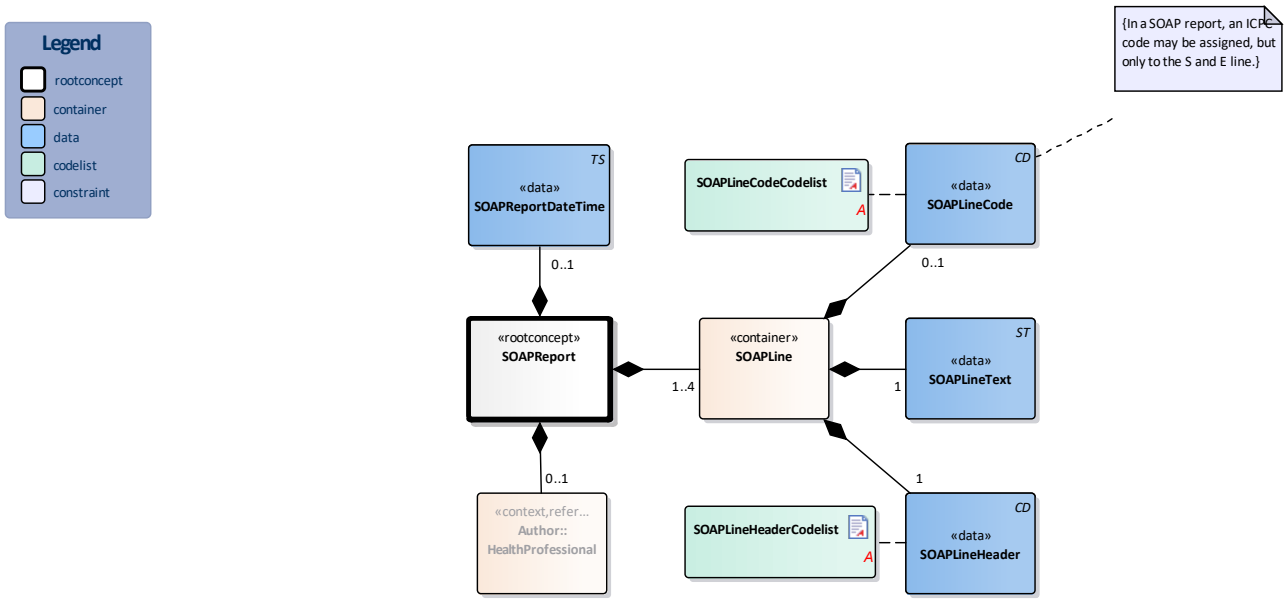
1.4 Purpose

A contact note using the SOAP format offers a healthcare professional the possibility to record in a structured manner information of a contact with a patient in free text. Due to the standardized method of recording, an SOAP report also makes it possible to monitor the patient's condition and its treatment over time.

1.5 Patient Population

1.6 Evidence Base

1.7 Information Model



«rootconcept»	SOAPReport	
Definitie	Root concept of the SOAPReport information model.This root concept contains all data elements of the SOAPReport information model.	
Datatype		
DCM::ConceptId	NL-CM:13.6.1	
Opties		

«data»	SOAPReportDateTime	
Definitie	Date and time when the report was recorded	
Datatype	TS	
DCM::ConceptId	NL-CM:13.6.2	
Opties		

«context»	Author::HealthProfessional	
Definitie	The healthcare provider who prepared the report and who is responsible for its content.	
Datatype		
DCM::ConceptId	NL-CM:13.6.3	
DCM::ReferencedConceptId	NL-CM:17.1.1	This is a reference to the rootconcept of information model HealthProfessional.
Opties		

«container»	SOAPLine	
Definitie	Container of the SOAPLine concept.This container contains all data elements of the SOAPLine concept.	
Datatype		
DCM::ConceptId	NL-CM:13.6.4	
Opties		

«data»	SOAPLineCode	
Definitie	Coded values can be added to a line that describe essential aspects of the line. In a SOAP report an ICPC code may be assigned, but only to the S and E line.	
Datatype	CD	
DCM::ConceptId	NL-CM:13.6.5	
DCM::ValueSet	SOAPLineCodeCodelist	OID: 2.16.840.1.113883.2.4.3.11.60.40.2.13.6.1
Opties		

«data»	SOAPLineHeader	
Definitie	The name of the SOAP line as an coded description. In a SOAP report this can be one of the following: subjective, objective, assessment or plan.	
Datatype	CD	
DCM::ConceptId	NL-CM:13.6.6	
DCM::ValueSet	SOAPLineHeaderCodelist	OID: 2.16.840.1.113883.2.4.3.11.60.40.2.13.6.2
Opties		

«data»	SOAPLineText	
Definitie	The actual content of the section as free formatted text.	
Datatype	ST	
DCM::ConceptId	NL-CM:13.6.7	
DCM::DefinitionCode	SNOMED CT: 422813005 Document section	
Opties		

«document»	SOAPLineCodeCodelist	
Definitie		
Datatype		
DCM::ValueSetBinding	Required	
DCM::ValueSetId	2.16.840.1.113883.2.4.3.11. 60.40.2.13.6.1	
Opties		

SOEPRegelCodeCodelijst	**OID: 2.16.840.1.113883.2.4.3.11.60.40.2.13.6.1**	
Codes	Coding Syst. Name	Coding System OID
Alle waarden	ICPC-1 NL	2.16.840.1.113883.2.4.4.31.1

«document»	SOAPLineHeaderCodelist	
Definitie		
Datatype		
DCM::ValueSetBinding	Required	
DCM::ValueSetId	2.16.840.1.113883.2.4.3.11. 60.40.2.13.6.2	
Opties		

SOEPRegelNaamCodelijst			**OID: 2.16.840.1.113883.2.4.3.11.60.40.2.13.6.2**	
Concept Name	**Concept Code**	**Coding System Name**	**Coding System OID**	**Description**
Subjective	255362007	SNOMED CT	2.16.840.1.113883.6.96	Subjectief
Objective	260224007	SNOMED CT	2.16.840.1.113883.6.96	Objectief
Evaluation	129265001	SNOMED CT	2.16.840.1.113883.6.96	Evaluatie

Management - action	129271007	SNOMED CT	2.16.840.1.113883.6.96	Plan

	Legend
Definitie	
Datatype	
Opties	

1.8 Example Instances

SOEP Verslag	
SOEPVerslagDatumTijd	21-07-2019
Auteur	
Medewerkerscode	01299
AGBCode	01999999
Initialen	H.A
Geslachtsnaam	Janszens
ZorgverlenersRol	Huisarts
SOEPRegel	
SOEPRegelNaam	S
SOEPRegelTekst	Sinds 2 maanden hoesten. Begonnen na start enalapril. Een weekje gestopt, klachten toen weg. Na hervatten klachten weer terug gekomen.
SOEPRegelCode	Hoesten, ICPC code R05
SOEPRegel	
SOEPRegelNaam	O
SOEPRegelTekst	Keelinspectie geen bijzonderheden, pulmonaal vesiculair ademgeruis (VAG)
SOEPRegel	
SOEPRegelNaam	E
SOEPRegelTekst	bijwerking ACE-remmer
SOEPRegelCode	Geneesmiddelbijwerking, ICPC code A85
SOEPRegel	
SOEPRegelNaam	P
SOEPRegelTekst	Overzetten van enalapril naar telmisartan. Evaluatie over 2 weken.

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

This health and care information model is based on the information model template ClinicalNote-v1.0.

1.18 Disclaimer

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Nictiz
P.O. Box 19121
2500 CC Den Haag
Oude Middenweg 55
2491 AC Den Haag

070-3173450
info@nictiz.nl
www.nictiz.nl

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