

NEMESIS 3.5 UUID Workgroup

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Participants

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Impact of Recommendation on Ability to Translate Data

Kevin: If you create 3.4.0 data, it should be transferred in 3.4.0 format.

Aaron: When an agency operates in multiple states accepting different versions, it's easier to generate in one version and then translate to the other. Josh: We would want to ensure that data can be collected in 3.5 and be translatable back to 3.4.

Dagan: Question about whether scope includes linkage of PCRs across agencies for a patient or incident. It does not.

Adam: We currently don't up-translate. We generate each version as needed.

John: We currently don't up-translate. If we needed to add a UUID, we would do so in our system and then generate XML data from there. Many systems already generate and store UUIDs internally.

Consensus: Participants support UUIDs being part of the 3.5 standard. Many systems already have UUIDs and would only need to include them in the XML output. Since different states may be accepting different versions, we should guarantee the ability to translate from 3.5 to 3.4, but not from 3.4 to 3.5.

Option A vs Option B

Option A is to add UUID attributes to recurring group elements in DEMDataSet and to PatientCareReport in EMSDataSet. Option B is to replace current CorrelationID attributes with UUIDs across the entire data standard.

Kevin: Favor Option B as best standard but can see how A is easier to get to. If we go with Option A, would like to add UUIDs to groups within PCRs.

Jon: Immediate need is for UUID instead of composite keys. Option A is easier choice to implement. For our implementation, we don't need to identify groups within PCRs across submissions/updates.

Aaron: Option A is easier to implement. Older version of product does not yet use UUIDs internally. Adding UUIDs to groups within PCRs would represent additional effort.

Adam: We only use CorrelationID when we need to. There is a development effort necessary with either option, but not a big difference between the two.

Kevin: Adding UUIDs to groups in PCRs: quick count shows 29 groups would have attribute added.

Consensus: We need UUIDs to track objects over time, regardless of which option we go with. Option B (or Option A with UUIDs in groups within PCRs) would be more valuable for receiving systems to track/audit changes within PCRs. Developers of local systems may be willing to do the additional effort, but would prefer not to.