



ANSI/HL7 EHR CHFP, R1-2008
December 10, 2008
The Health Level Seven
EHR Child Health Functional Profile, Release 1

HL7 EHR
Child Health
Functional Profile,
Release 1



IMPORTANT NOTES:

- A. If you are the individual that downloaded or ordered this HL7 Standard, specification or other work (in each and every instance "Material"),** the following describes the permitted uses of the Material.
- B. If you are NOT such individual,** you are not authorized to make any use of the Material. To obtain an authorized copy of this Material, please visit <http://www.hl7.org/implement/standards/index.cfm>.
- C. If you are not an HL7 Organizational Member,** the following are your permitted uses of this Material:
- 1. Read and Copy License Only.** HL7 hereby grants you the right, without charge, to download and copy (for personal use only) this Material for study purposes only. This license grant does not include the right to sublicense or modify the Material, or to implement the Material, either in whole in part, in any product or service.

Please see <http://www.hl7.org/legal/ippolicy.cfm> for the full license terms governing the Material.

- D. If you are an HL7 Organizational Member,** the following are your permitted uses of this Material.

1. Implementation License Terms.

- 1.1 Definitions.** As used in this Agreement, the following terms shall have the following definitions:

"Compliant Product" is a product or service that implements Material that is an HL7 Specification in whole or in part.

"End User" is a company, entity or individual that is the ultimate purchaser or licensee from Licensee of a Compliant Product.

- 1.2 License.** In consideration of becoming an Organizational member of HL7 and continuing to pay the appropriate HL7 Organizational membership fees in full, HL7 hereby grants to you without additional charge, on a perpetual (except as provided for in the full license terms governing the Material), non-exclusive and worldwide basis, the right to (a) download, copy (for internal purposes only) and share this Material with your employees and consultants for study purposes, and (b) utilize the Material for the purpose of developing, making, having made, using, marketing, importing, offering to sell or license, and selling or licensing, and to otherwise distribute, Compliant Products, in all cases subject to the conditions set forth in this Agreement and any relevant patent and other intellectual property rights of third parties (which may include members of HL7). No other license, sublicense, or other rights of any kind are granted under this Agreement.

Please see <http://www.hl7.org/legal/ippolicy.cfm> for the full license terms governing the Material.



Child Health Functional Profile

Child Health Functional Profile Workgroup
Pediatric Data Standards Special Interest Group
Health Level Seven

Based on the HL7 Electronic Health Record-System Functional Model, Version 1.0

Normative Level Ballot Release 1

Co-Chairs

David C. Classen, MD, MS
Joy Kuhl, MBA
S. Andrew Spooner, M.D., FAAP

Final Version 1.0 (5/20/2008)

HL7® EHR Standard, © 2008 Health Level Seven®, Inc. ALL RIGHTS RESERVED. The reproduction of this material in any form is strictly forbidden without the written permission of the publisher.

HL7 and Health Level Seven are registered trademarks of Health Level Seven, Inc. Reg. U.S. Pat & TM Off

HL7 Child Health Functional Profile: Project Leads

David C. Classen, MD, MS	First Consulting Group
Joy Kuhl, MBA	Alliance for Pediatric Quality
S. Andrew Spooner, MD, FAAP	Cincinnati Children's Hospital and Medical Center

HL7 Child Health Functional Profile: Working Group

Noorullah Akhtar, MD	Driscoll Children's Hospital
Noam H. Arzt, PhD	HLN Consulting, LLC
Roberta B. Baranda, RHIA, CHP	Children's Hospital Central California
Christy Bryant, RN, BSN	Children's Healthcare of Atlanta
Barry Bzostek, MD	Cook Children's Health Care System
Barry L. Cannon, MS, RN	Children's Hospital Central California
Mark Del Beccaro, MD	Children's Hospital & Regional Medical Center
David Butler, MD	Texas Children's Hospital
Sahara L. Fusilier, RN, BSN, MS	Children's Healthcare of Atlanta
Jeffrey Gwin	Children's Hospital Central California
Craig Joseph, MD	Epic Systems
Katherine Lusk, MHSM, RHIA	Children's Medical Center Dallas
Eugenia Marcus, MD, FAAP	Pediatric Health Care at Newton Wellesley
Matthew Murray, MD	Cook Children's Health Care System
Greg Omlor, MD	Akron Children's Hospital
Mitra Rocca	Novartis Pharmaceuticals Corporation
S. Trent Rosenbloom, MD, MPH	Vanderbilt University Medical Center
Rob Savage	EDS
Aileen Sedman, MD	Nat'l Assoc of Children's Hosp & Related Inst.
Becky L. Southworth, RN, MBA	Cook Children's Health Care System
Benjamin Starns, MD, FAAP	NextGen Healthcare Information Systems
Andrea Szentirmai, RN	Cerner Corporation
Cheryl Topps	Miami Children's Hospital
Carl Weigle, MD	Children's Hospital and Health System
Feliciano (Pele) Yu, MD	Children's Hospital of Alabama

Child Health Functional Profile: Introduction

The Child Health Functional Profile (Child Health-FP) is a new project of the HL7 Pediatric Data Standards Special Interest Group (PeDSSIG). It conforms to the HL7 Electronic Health Record System Functional Model (EHR-S FM), and it is aimed at developing an HL7 Normative Functional Profile for electronic health record (EHR) systems that are used to care for children.

This first iteration provides the essential general pediatric functions and specific conformance criteria that are important to include in any system through which a child might receive primary care in the United States in both inpatient and outpatient settings. The intent is to assist all childcare providers and associated IT vendors in helping to ensure safe, effective and reliable care of children through the safe and effective use of information technology. Specifically, the Child Health-FP describes additional EHR-S functionality that is necessary to care for a child

age 0-18 who receives routine wellness and preventive, acute illness, or acute trauma care that takes place in:

- the newborn nursery,
- the primary care provider's office,
- the emergency department or urgent care clinic, and in
- the inpatient hospital setting.

The Child Health-FP also supports ambulatory and inpatient hospital care for common chronic pediatric diseases such as asthma, sickle cell disease and diabetes, as well as those with social situations such as foster care, divided homes and state custody.

The profile does not, at the present time, describe functions required to care for children with severe chronic conditions such as cancer, transplant of any type, AIDS, severe neurologic chronic disease such as paralysis, or who require care in an intensive care unit such a neonatal ICU or cardiac ICU. (This list exemplifies severe chronic conditions but is not inclusive.) In addition, children under age 18 who are pregnant will also not be described in this profile.

Background

Founded in 1987, Health Level Seven (HL7) is a not-for-profit healthcare standards development organization (SDO) accredited by the American National Standards Institute (ANSI). While traditionally involved in the development of messaging standards used by healthcare systems to exchange data, HL7 has begun to develop other standards related to healthcare information systems. In 2002, a newly formed HL7 EHR Special Interest Group began development of a functional model for EHR systems. Shortly thereafter, a number of organizations approached HL7 to develop a consensus standard to define the necessary functions for an EHR system. The EHR Special Interest Group was promoted to a full technical committee (EHR-TC), and in 2004 published the *EHR-S Functional Model* as a Draft Standard for Trial Use (DSTU).^[1] The Functional Model underwent membership level ballot in September 2006 and January 2007, and it was approved as standard in February 2007. The EHR-TC intends that unique functional profiles be developed by subject matter experts in various care settings to inform developers, purchasers, and other stakeholders of the functional requirements of systems developed for these domains.

The HL7 PeDSSIG was founded in 2003 primarily to inform HL7 and other healthcare standards development organizations of the unique requirements and workflows for child healthcare. The PeDSSIG founders solicited input and membership from organizations such as the American Academy of Family Physicians (AAFP), American Academy of Pediatrics (AAP), The American Board of Pediatrics (ABP), Child Health Corporation of America (CHCA), and the National Association of Children's Hospitals and Related Institutions (NACHRI). Participation was also sought from the international community as well as the vendor community through the press, HL7 announcements and personal invitations.

With one-third of the United States' population being children, and with over half of those children visiting clinicians in settings other than pediatric offices, the PeDSSIG believed it important to ensure that the HL7 EHR-S FM include functionality critical for child healthcare. Over the previous four years, the PeDSSIG has worked to identify and refine a broad list of functions required of EHR systems for the care of children. Many of the functions identified by the PeDSSIG are included in the new EHR-S FM standard. In addition, a number of them are referenced in policies published by the AAP on "Special Requirements for Electronic Medical