# **CDSi Version 3.0: Updates and Enhancements**

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## Agenda

- Scope change between versions 2 and 3
- Changes in the CDSi Resources
  - Supporting Data, Logic Specification, Test Cases, Training Materials
- Successes and challenges
- The future

# **Scope Change**

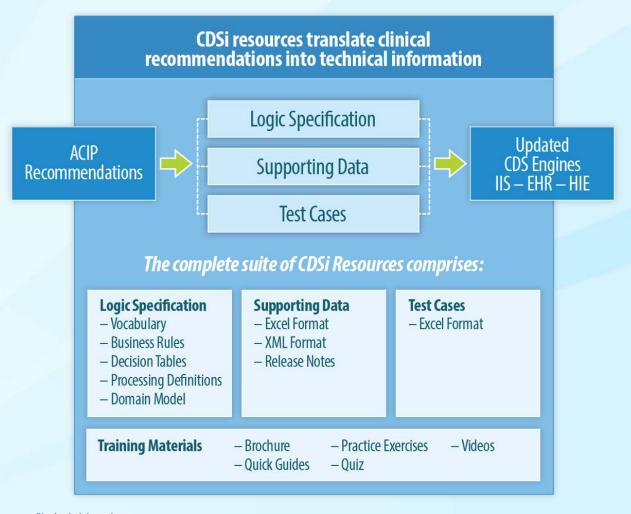
#### Version 2

- Standard age based recommendations (childhood)
- Standard adult recommendations (Pneumococcal 65+)

### Version 3

- Risk related recommendations
  - Codified observations about the patient
  - Medical conditions, occupational risks, behavioral risks, etc
- Updated recommendations

### **CDSi** Resources



https://www.cdc.gov/vaccines/programs/iis/cdsi.html

## **Changes in the Schedule Data Files**

- New list of Coded Observations about the patient
  - Medical conditions, occupational, behavioral, adverse reactions, etc
  - None are intrinsically indications or contraindications
  - Codes are not semantically meaningful
  - Where possible, observations have been mapped to external code sets
    - SNOMED, CVX, PHIN VS
    - Mappings are not comprehensive and are meant to aid in understanding the concepts
  - Coded Observations are used elsewhere in the supporting data

C	bservation	Observation Title	Indication Text Description	Contraindication Text	Clarifying Text	SNOMED (Code)	CVX (Code)	PHIN VS (Code)
	Code 💌	▼	<b>▼</b>	Description <	▼	▼	_	▼
0	17	Chronic lung disease	Administer to persons who		e.g. chronic obstructive lung disease,	Chronic lung disease [disorder]		
			have chronic lung disease.	n/a	emphysema but not asthma	(413839001);Chronic obstructive lung	n/a	n/a
				II/a		disease [disorder] (13645005);Pulmonary	II/a	Tira
						emphysema [disorder] (87433001)		
0:	27	Asthma	Administer to persons who	Do not vaccinate if the patient	n/a	Asthma finding [finding] (390798007);	n/a	n/a
			have asthma.	has asthma.		Asthma [disorder] (195967001)	II/a	II/a
0:	28	Intussusception		Do not vaccinate if the patient	Includes history of uncorrected congenital	Intussusception [morphologic abnormality]		
				has intussusception.	malformation of the gastrointestinal tract that	(35327006);Intussusception of intestine		Previous history of
			n/a		would predispose the infant to [disorder] (4972300	[disorder] (49723003)	n/a	intussusception (VXC21)
					intussusception or history of intussusception.			

# **Changes in the Supporting Data Files**

- New Risk Series have been added
  - Series Type
  - Indications

- Series Group
- Administrative Guidance

Series Name	HPV risk male 3-dose series							
Target Disease	HPV							
Vaccine Group	HPV							
Administrative Guidance	Text							
	The recommendation for a 2-dose schedule does not							
	apply to children aged less than 15 years with							
	asplenia, asthma, chronic granulomatous disease,							
	chronic liver disease, chronic lung disease, chronic							
	renal disease, CNS anatomic barrier defines (e.g.,							
	cochlear implant), complement deficiency, diabetes,							
	heart disease, or sickle cell disease							
Series Type	Туре							
,,	Risk							
Equivalent Series	Series Groups							
Groups	Scried Groups							
	1							
Gender	Required Gender							
	Male							
Select Patient Series	Default Series	Product Path	Series Group Name	Series Group	Series Priority	Series Preference	Minimum Age To Start	Maximum Age To Start
	No	No	Increased Risk	2	А	1	n/a	27 years
Indication	Observation (Code)	Text Description	Indication Begin Age	Indication End Age (less than)	Administrative Guidance			
Indication	Men who have sex with men (036)	Administer to men who have sex with men.	21 years	n/a	Includes gay, bisexual, and other men who have sex with men			
		Administer to persons						
Indication	Transplantation (157)	who have received a	9 years	n/a	n/a			
	Transplantation (161)	transplant.	o yours	Tru	174			
		Administer to persons						
Indication	Radiation therapy (159)	who are undergoing	9 years	n/a	n/a			
	17,	radiation therapy.	,					

# **Changes in the Supporting Data Files**

### New antigens

- Japanese Encephalitis
- Meningococcal B (including new 2-dose series)
- Rabies
- Typhoid
- Yellow Fever

### Updated recommendations (Abridged)

- HPV 2-dose
- 2016-2017 influenza
- 5-dose IPV series
- OPV changes

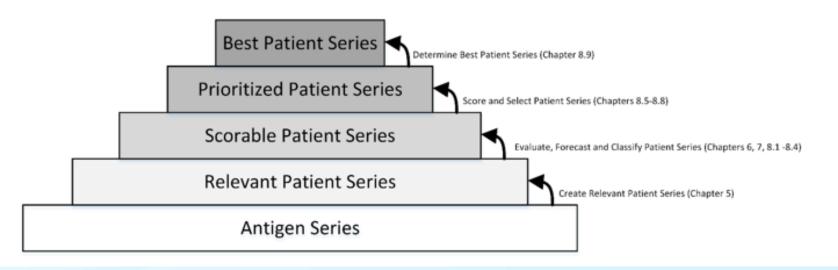
## **Changes in the Supporting Data Files**

### Other changes

- Gender moved to the Series level (no longer at the Dose level)
- Inadvertent Vaccine section added
  - Inadvertent doses may be repeated immediately (Td/Tdap, OPV)
- Immunity now references a Coded Observation
- Contraindications moved from Schedule Supporting Data into the Antigen Supporting Data using Coded Observations
  - Contraindications can be at the antigen level or the vaccine level
- FAQ section added

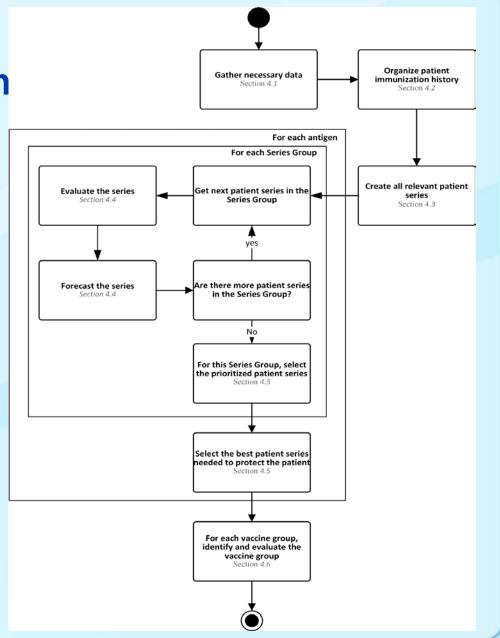
### **Changes in the Logic Specification**

- Relevant Patient Series are selected from the total list of Antigen Series based on standard recommendations, patient gender and observations about the patient
- Scorable Patient Series are selected from the evaluated and forecasted Relevant Patient series
- A single Prioritized Patient Series is selected for Series Group based on score
- One or more non-redundant Best Patient Series are selected from the Prioritized Patient Series



## Changes in the Logic Specification

- Pre-filtering of series at the start
  - Gender, underlying risk indicators, etc
- Core Evaluation and Forecast logic is unchanged
  - But it needs to be run for each Series Group
  - One prioritized series for each Series Group
- A given patient may have one or more best series at the end of the process
  - Standard series and risk series are not always equivalent and one of each type of series may be needed



## **Changes in the Test Cases**

- Clarifications and updates as recommendations evolve
- Separate spreadsheets for age-based recommendations and risk-based recommendations
  - 203 new risk-based scenarios
  - Risk-based test cases are fundamentally similar to the age-based test cases, but include relevant observations

# **Changes in the Training Materials**

- Introductory material
  - Overview video
  - Infographic
  - Miniguide
  - Common misconceptions
- Training materials
  - Self-assessment
  - Date calculation guide
  - Test case quick guide
  - Supporting data quick guide
  - Practice exercises

## **Successes and Challenges**

- □ The CDSi resources now more fully reflect the ACIP recommendations
- We now have a starting list of patient observations that impact a patient's immunization requirements
- □ But...
  - Many CDS engines (even in EHRs) won't have all the necessary patient information
  - Many observations are still quite vague
  - Many variations between ACIP recommendations in terms of wording and concepts
  - Many questions about how to display multiple series to providers

### The Future

- Ongoing maintenance and optimization
- Working with ACIP on harmonizing recommendations and previewing recommendations before publication
  - Indications and contraindications
  - Intervals and ages
- Leverage this work elsewhere
  - Patient observation exchange using HL7
- Interoperability specs
  - FHIR projects to optimize resources and create FHIR profiles/implementation guides

### **CDSi Contributors**

CDSi panel/informational group
CDC vaccine group SMEs
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**Thoughts? Suggestions? Questions?**