

HL7 FHIR adoption in European health systems: The case of Germany

**Webinar, 12 November 2024
15.00-16.00 CET**

Online on Teams



The HL7 logo is displayed in a large, bold, red sans-serif font. The background of the slide is a blurred laboratory setting with various glassware like flasks and beakers containing blue liquid, and a rack of test tubes in the background.

HL7



HL7 Europe Labs-on-FHIR webinar series

A succession of open, online educational sessions 2023-24
related to the adoption of FHIR specifications
in Europe's laboratory systems and
the HL7 Europe FHIR Implementation Guide for Laboratory Reports

HL7 FHIR adoption in European health systems: the case of Germany

Speaker introductions

- Presenters:

- Prof Sylvia Thun,
Charité Hospital Berlin, HL7 Germany



- Panel:

- Stefan Sabutsch, Emmanuel Helm, ELGA (AT)
- Alexander Henket, NICTIZ (NL)
- Zsolt Puskás, ESZFK (HU)



Housekeeping



- Your facilitator: Michael Strübin, HL7 Europe
- The webinar will be recorded, slides will be shared in pdf.
- To help ensure a successful webinar please:
 - Stay muted
 - Feel free to use reactions/emojis during the presentations
 - Use the chat to make comments or raise your questions
 - Raise your hand if you'd like to speak
 - If you are invited to speak, please turn on your video and say who you are

HL7 FHIR adoption in European health systems: the case of Germany

Agenda

- Welcome and introductions
- Prof Sylvia Thun, Charité Hospital Berlin, HL7 Germany
- Panel:
 - Stefan Sabutsch, Emmanuel Helm, ELGA (AT)
 - Alexander Henket, NICTIZ (NL)
 - Zsolt Puskás, ESZFK (HU)
- Discussion and Q&A
- Next steps

Laboratory FHIR in Germany

Prof. Dr. Sylvia Thun

Online

2024-11-12

Agenda

- Stakeholder (ISIK, MIO, MII, KKG BfArM)
- InteropCouncil Laboratory - WP Laboratory
- MIO Laboratory
- Microbiology
- LOINC Implementation Charité/
- Medical Informatics Initiative (Research)

Stakeholders in Germany



Nationale Agentur für Digitale Medizin



KASSENÄRZTLICHE
BUNDESVEREINIGUNG



- Terminology
- Electronic Health Records (ePA)
- Electronic Prescriptions (eRP, E-Rezept)
- Interoperability of Data and Interfaces for Hospital Information Systems (ISiK)
- Information System for Infection Protection (DEMIS for COVID-19 etc.)
- Medical Information Objects (MIOs)
 - Vaccination Record
 - Maternity Record
 - Discharge Report
- Research infrastructures
- Secondary data use
- Consent

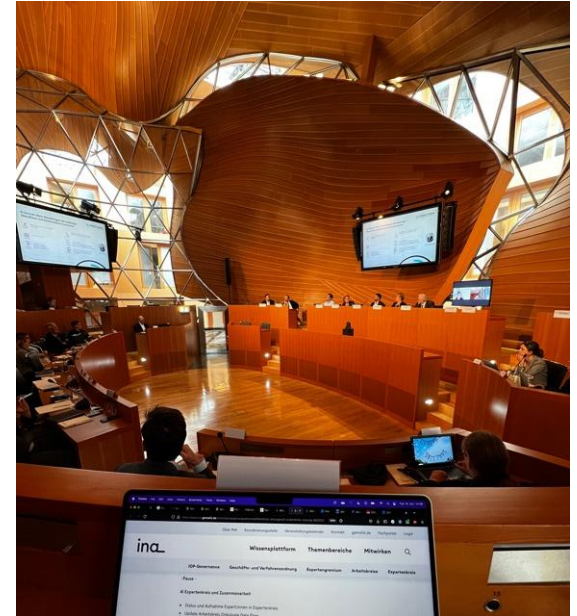
Interoperability in Germany



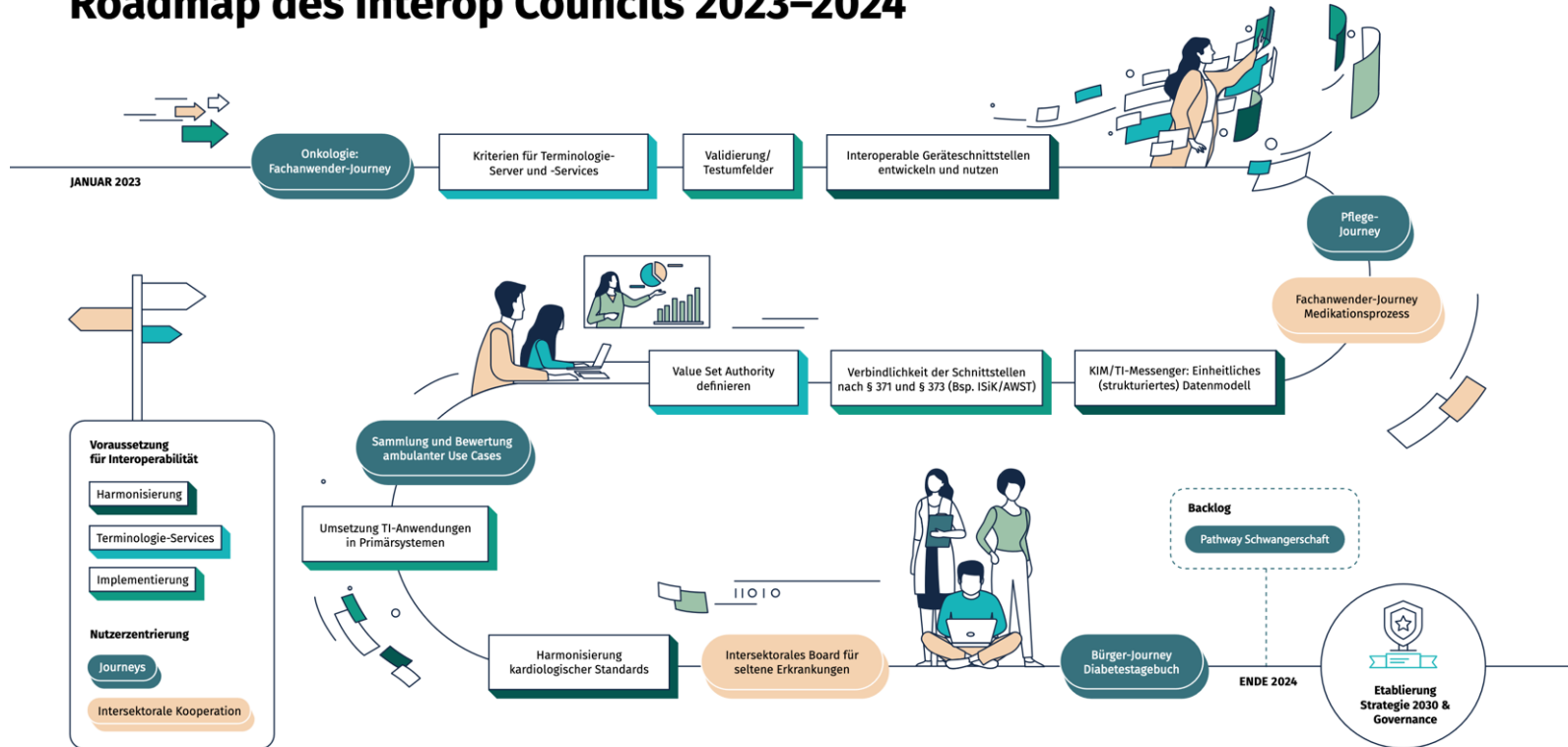
INTEROP COUNCIL
for digital health in Germany

National Health-IT-Interoperability-Governance

- Gesundheits-IT-Interoperabilitäts-Governance-Verordnung (GIGV)
- Interdisciplinary expert panel and working groups to identify needs and make recommendations for an interoperable ecosystem in health IT
- Semantic and syntactic standards are jointly identified, prioritized and updated by the coordinating body and expert panel.
- Standards included in a knowledge platform can be recommended by the coordinating body and the expert panel for healthcare.



Roadmap des Interop Councils 2023–2024



https://www.ina.gematik.de/fileadmin/Dokumente/gematik_Interop_Council_Roadmap_und_Backlog.pdf

Interoperability of Data and Interfaces for Hospital Information Systems (ISiK)

- Table shows the release and validity periods of various ISiK modules
- Mandatory for specific software products used in hospitals

Modul	Releasedatum des Moduls	Verpflichtend ab	Gültig bis*	Abkündigungsdatum
<u>Basis Stufe 3</u>	01.07.2023	01.07.2025	30.06.2026	-
<u>Basis Stufe 2</u>	01.07.2022	01.07.2024	30.06.2025	-
<u>Basis Stufe 1</u>	01.07.2022	Abgekündigt	Abgekündigt	01.07.2024
<u>Dokumentaustausch Stufe 3</u>	01.07.2023	01.07.2025	30.06.2026	-
<u>Dokumentaustausch Stufe 2</u>	01.07.2022	abgekündigt	abgekündigt	01.02.2023

<https://fachportal.gematik.de/informationen-fuer/isik#c5807>

Interoperability of Data and Interfaces for Hospital Information Systems (ISiK)

- ISiK laboratory module is currently not mandatory for hospitals systems
- Contains an Observation profile
- Other profiles, such as laboratory orders and laboratory reports, will be developed at a later stage

Implementierungsleitfaden ISiK-Labor

Einführung Release Notes Zusammenfassung Übergreifende Festlegungen Übergreifende Use Cases Datenobjekte

Laboruntersuchung (Observation)

Viele medizinischen Entscheidungen benötigen Informationen zu den Laboruntersuchungen eines Patienten. Hierzu gehören z.B. aktuelle Nierenfunktionswerte, Leberwerte, Blutbildwerte oder Hormone aus Schilddrüse. Jede dieser Untersuchungen wird durch bestimmte [\[https://loinc.org/ LOINC\]](https://loinc.org/) oder [\[http://snomed.info/sct SNOMED CT\]](http://snomed.info/sct) Codes bezeichnet. Der angegebene Wert ist durch genaue Einheitenangaben in [\[http://units.who.int/ UCUM\]](http://units.who.int/) zu konkretisieren. Motivierender Use-Case zur Einführung dieser Profile ist die [Arzneimitteltherapiesicherheit im Krankenhaus - AMTS](#).

In FHIR werden Untersuchungen, bzw. Beobachtungen als **Observation**-Ressource repräsentiert. Zugehörige Codes und Einheiten sind den entsprechenden Valuessets zu entnehmen.

Profil

Name	Canonical
ISiKLaboruntersuchung	https://gematik.de/fhir/isik/StructureDefinition/ISiKLaboruntersuchung

ISiKLaboruntersuchung (Observation)

Path	Cardinality	Binding	Pattern
identifier	0..*		
basedOn	0..*		
partOf	0..*		
status	1..1	code	binding
category	1..*	CodeableConcept	binding Pattern
code	1..1	CodeableConcept	
subject	1..1	Reference(Patient Group Device Location)	
focus	0..*	Reference(Resource)	
encounter	0..1	Reference(Encounter)	
effective[x]	0..1		
issued	0..1	Instant	
performer	0..*	Reference(Practitioner PractitionerRole Orga...)	
value[x]	0..1		

https://simplifier.net/guide/isik-labor-v4/ImplementationGuide-markdown-Datenobjekte-Profil_ISiKLaboruntersuchung?version=current

- LOINC provides standardized terminology for laboratory tests and clinical observations.
- BfArM is responsible for the further development of LOINC for the needs in Germany and for the provision of translations for the electronic patient record
- BfArM partners with the National Association of Statutory Health Insurance Physicians (KBV) and mio42 GmbH to create Medical Information Objects (MIOs) for use in electronic patient records.

<http://www.bfarm.de>

Medical Information Object (MIO) Laboratory Report



KASSENÄRZTLICHE
BUNDESVEREINIGUNG

- MIO Lab-Report in first stage designed for clinical chemistry
- Outpatient and inpatient setting
- Microbiology, cytology and genetics will be modelled at a later stage
- FHIR document Bundle for storage in the EHR
- A tool for visualizations is offered

MIO LABORBEFUND

Wiebke Metzger
Geburtsdatum: 17.02.2014 (8 Jahre) | Geschlecht: weiblich | Versichertennummer: B789522772

Gesamtbefund-Identifikator: **6283467234**

Beauftragte Person/Einrichtung: **Labor (Sülowbogen MVZ (Berlin))**

Ärztliche Validierung durch: **Dr. med. Susanne Korte**

Auftragsinformationen

Eingegangen am: 24.02.2022, 12:39 | Auftragschlüssel: 4200022429 | Dringlichkeit: **Elig** | Auftraggeber*in: **Dr. med. Horst Heller**

Fragenstellung: **Routine-Check; Hepatobiliagnostik**

Gesamtbefund

Erstellt am: 24.02.2022, 14:38 (vorläufig) | Einweisung: **Kritisch**

Gesamtbefundtext: **Zeitrahe Laborkontrolle dringend empfohlen: Differentialblutbild, Elektrolyte, Glucose, Leber- und Nierenfunktion!**

☐ LORNC anzeigen | ☒ Ergebnisdarstellung mit Referenzbalken

Hämatologie

Kleines Blutbild

Nr.	Bezeichnung/Untersuchung	Ergebnis	Referenzbereich	Interpretation	Probe (1)
1	Leukozyten	6,3 $10^9/L$	4,0 - 9,0	Normal	Probe (1)
2	Erythrozyten	5,4 $10^{12}/L$	4,3 - 5,9	Normal	Probe (1)
3	Hämoglobin	12,0 g/dL	14,0 - 18,0	Erniedrigt	Probe (1)
4	Hämatokrit	40,9 %	40 - 50	Normal	Probe (1)
5	MCV	75,5 fL	80 - 96	Erniedrigt	Probe (1)
6	MCH	23,6 pg	28 - 32	Kritisch Erniedrigt	Probe (1)
7	MCHC	31,3 g/dL	30 - 36	Normal	Probe (2)
8	Thrombozyten	517,0 $10^9/L$	150 - 400	Erhöht	Probe (2)

<https://mio.kbv.de/display/LAB1X0X0/Visualisierungen+--Arbeitsstand+2023>

Implementation Concept for Lab-Report in German Electronic Health Record (ePA) 1/3

- **Objective:**
 - Integrate Medical Information Object (MIO) Lab Reports into the ePA to enhance accessibility for both providers and patients.
- **Process:**
 - Lab results, once physician-verified, should be stored as atomic units in the ePA, ensuring timely access and data integrity.
 - Authorized medical personnel, like lab physicians, should have direct upload privileges, optimizing report visibility across providers.



Positionspapier

Arbeitskreis „Einführungskonzept Laborbefund“

27.9.2024

https://www.ina.gematik.de/fileadmin/Arbeitskreisdokumente/Final_Positionspapier_Einf_Labor.pdf

Implementation Concept for Lab-Report in German Electronic Health Record (ePA) 2/3

- **Key features:**
 - Patients can access their lab results promptly, with a cautionary note for medical interpretation.
 - Critical results are flagged for immediate provider and patient notification.
 - Genetic testing results require patient consent for ePA inclusion.



Positionspapier

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27.9.2024

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Implementation Concept for Lab-Report in German Electronic Health Record (ePA) 3/3

- **Harmonization & Interoperability:**
 - FHIR, SNOMED, LOINC for compatibility across EU healthcare systems
 - The ePA will support secure data exchange nationally and within the European Health Data Space.
- **Implementation phase:**
 - Pilot rollouts in designated model regions and phased approach
- **Benefits for healthcare:**
 - Improved continuity of care and data accessibility in emergencies
 - Potential for secondary data usage in research with patient consent



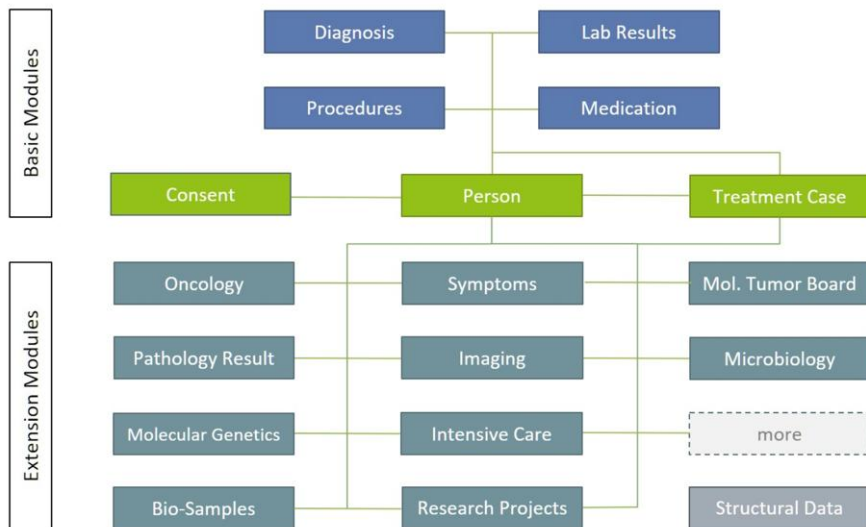
Positionspapier

Arbeitskreis „Einführungskonzept Laborbefund“

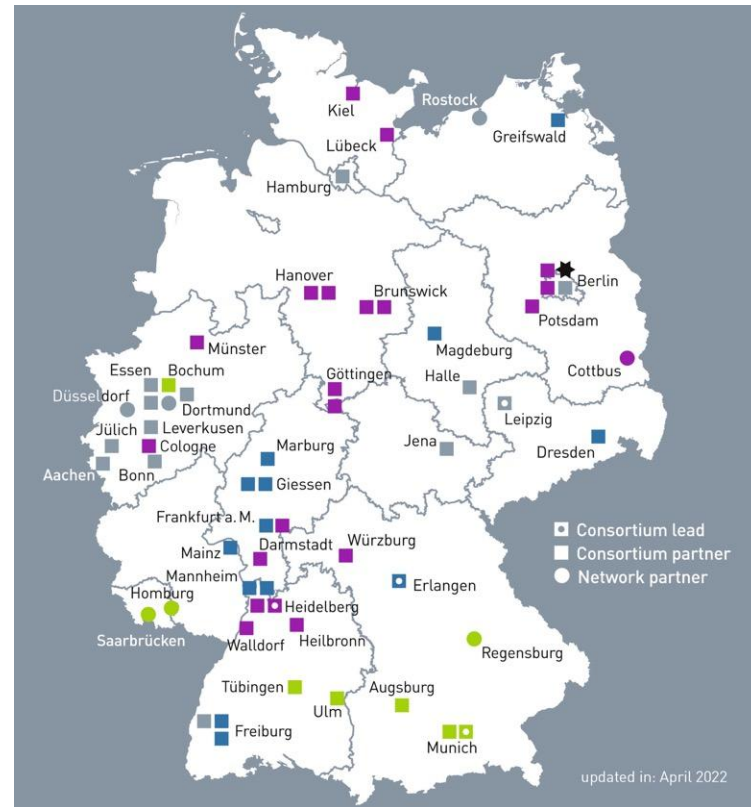
27.9.2024

https://www.ina.gematik.de/fileadmin/Arbeitskreisdokumente/Final_Positionspapier_Einf_Labor.pdf

FHIR for Research in Germany



<https://www.medizinformatik-initiative.de/>



LOINC Top 300 Subset

- LOINC-coded analyses ordered by frequency from 5 German university hospitals

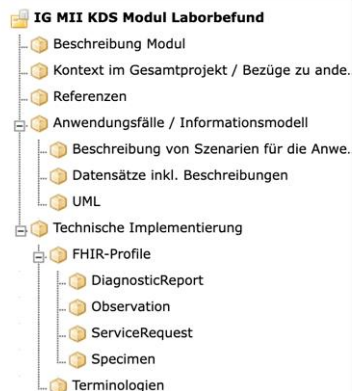
rank	primär	usedInLabs	sekundär	COMPONENT	PROPERTY	TIME_ ASPCT	SYSTEM	SCALE_TYP	METHOD_ TYP
1	59826-8	5	59826-8	Creatinine	SCnc	Pt	Bld	Qn	
1	59826-8	5	38483-4	Creatinine	MCnc	Pt	Bld	Qn	
1	59826-8	5	14682-9	Creatinine	SCnc	Pt	Ser/Plas	Qn	
1	59826-8	5	2160-0	Creatinine	MCnc	Pt	Ser/Plas	Qn	
1	59826-8	5	21232-4	Creatinine	MCnc	Pt	BldA	Qn	
2	26464-8	5	26464-8	Leukocytes	NCnc	Pt	Bld	Qn	
2	26464-8	5	49498-9	Leukocytes	NCnc	Pt	Bld	Qn	Estimate
2	26464-8	5	6690-2	Leukocytes	NCnc	Pt	Bld	Qn	Automated count
2	26464-8	5	804-5	Leukocytes	NCnc	Pt	Bld	Qn	Manual count
3	20570-8	5	20570-8	Hematocrit	VFr	Pt	Bld	Qn	
3	20570-8	5	31100-1	Hematocrit	VFr	Pt	Bld	Qn	Impedance
3	20570-8	5	4544-3	Hematocrit	VFr	Pt	Bld	Qn	Automated count
3	20570-8	5	4545-0	Hematocrit	VFr	Pt	Bld	Qn	Spun
3	20570-8	5	48703-3	Hematocrit	VFr	Pt	Bld	Qn	Estimated
3	20570-8	5	32354-3	Hematocrit	VFr	Pt	BldA	Qn	
3	20570-8	5	41654-5	Hematocrit	VFr	Pt	BldV	Qn	
3	20570-8	5	41655-2	Hematocrit	VFr	Pt	BldMV	Qn	
3	20570-8	5	42908-4	Hematocrit	VFr	Pt	BldC	Qn	

[https://biom131.imbi.uni-freiburg.de/medinf/gmds-ag-mdk/archiv/2018/2018-09-04-symposium-osnabrueck/B3-1_MII-Kerndatensatz_Laborbefunde+Medikation_\(Ganslandt,%20Bietenbeck,%20Boeker\)_GMDS-2018_\(2F\).pdf](https://biom131.imbi.uni-freiburg.de/medinf/gmds-ag-mdk/archiv/2018/2018-09-04-symposium-osnabrueck/B3-1_MII-Kerndatensatz_Laborbefunde+Medikation_(Ganslandt,%20Bietenbeck,%20Boeker)_GMDS-2018_(2F).pdf)

Medical Informatics Initiative (MII) Laboratory Module

- Laboratory results that are usually performed in a central laboratory of a hospital
- Does not include microbiology, virology, genetics
- Contains profiles for DiagnosticReport, Observation and ServiceRequest

Medizininformatik Initiative - Modul Laborbefund - ImplementationGuide



Kerndatensatz Modul Laborbefund

Die vorliegende Spezifikation beschreibt die FHIR-Repräsentation des Kerndatensatz-Moduls 'Laborbefund' der Medizininformatik-Initiative. Im Folgenden werden die Use-Cases des Moduls sowie die dazugehörigen FHIR-Profil und Terminologie Ressourcen in ihrer verbindlichen Form beschrieben.

Veröffentlichung	
Datum	19.07.2021
Version	1.0.6
Status	Active
Realm	DE

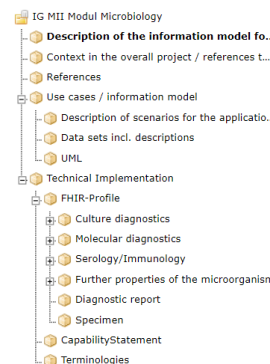
https://www.medizininformatik-initiative.de/Kerndatensatz/Modul_Laborbefund/IGMIKDSModulLaborbefund.html

Medical Informatics Initiative (MII)

Microbiology Module

- Microbiology tests that are most commonly performed to investigate microorganisms
- Includes culture, antimicrobial susceptibility, molecular diagnostics, serology and immunology
- Contains profiles for DiagnosticReport and Observation

[EN] Medical Informatics Initiative - Modul Microbiology - Implementation Guide - Version 1.0



Description of the information model for the KDS module Microbiology

The extension module Microbiology comprises the information for the detection and description of microorganisms such as bacteria, viruses and fungi. The information model describes the various microbial examinations (Observations) using different diagnostic methods such as:

- Culture and Microscopy
- Molecular diagnostics
- Serology / Immunology

Other properties of the microorganism which could possibly be determined or deduced using multiple methods have been grouped under the following category:

- Further properties of the organism

Culture and Microscopy

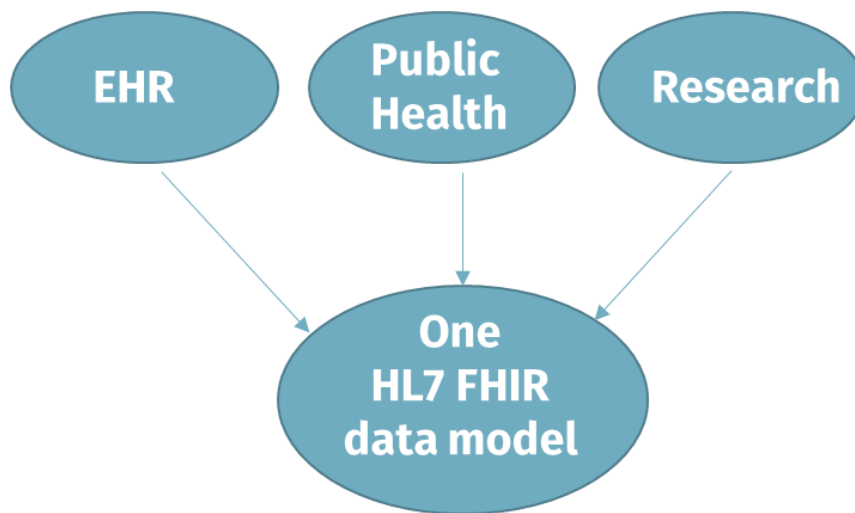
The profiles modelled under the two diagnostic methodologies microbiology culture and microscopy describe information related to the detection of the microorganism, to the colony count, to the antimicrobial susceptibility and to the microscopic description of the findings. The LOINC code for the detection of the microorganism is generic "Microorganism identified in Unspecified specimen by Culture", the name of the specific microorganism detected or examined is defined in the component of the FHIR observation. The Colony count profile foresees both the possibility of a numerical as well as semiquantitative value. For the susceptibility tests an intensional value set including all LONC codes referring to antimicrobial phenotypic susceptibility was established. Results can be expressed both using the EUCAST system as well as CLSI. Microscopy information includes specific methodology used, morphology, Barlett and Nugent score.

<https://simplifier.net/Medizininformatik-Initiative-Modul-Mikrobiologie/>

Ongoing developments for Microbiology module

Collaboration across relevant **German** Stakeholders for a unified data model for microbiology:

- ✓ MIO42
- ✓ Robert Koch Institute
- ✓ Medical Informatics Initiative



German Portal for Medical Research Data



- Aimed at researchers
- Central portal to
 - submit feasibility requests (FHIR search)
 - request access to health and biospecimen data
 - coordinate data provision
 - present research projects



www.forschen-fuer-gesundheit.de

<https://www.medizininformatik-initiative.de/>

Research Data Infrastructure

Datenübersicht

Hier finden Sie eine Übersicht über alle verfügbaren Daten. Diese wird regelmäßig aktualisiert.

Die folgenden Zahlen in der Datenübersicht sind Summen der Rückmeldungen aller Standorte zu den jeweiligen Suchanfragen, die in Abhängigkeit davon, wie viele und welche Standorte zum Zeitpunkt der Suchanfrage antworten, variieren können. Abweichungen von den Ergebnissen der Machbarkeitsanfragen sind daher erwartbar.



+10 Mio

Personen

Basisdaten eines Krankenhausaufenthaltes von Patientinnen und Patienten



25

Standorte

Datenintegrationszentren, die über das Forschungsdatenportal Daten bereitstellen



+75 Mio

Diagnosen

Beschreibung der Krankheiten einer Person



+800 Mio

Laborwerte

Daten zu Laboruntersuchungen von Patientinnen und Patienten



+50 Mio

Prozeduren

Dokumentation von Operationen und medizinischen Eingriffen



+80 Mio

Medikationsdaten

Dokumentation von Arzneimittelverordnungen und -gaben



+550k

Bioproben

Verfügbare Bioproben, die zur Diagnose oder Therapie entnommen wurden



+100k

Einwilligungen

Verfügbare positive Einwilligungsinformationen von Patientinnen und Patienten



29

Projektanträge

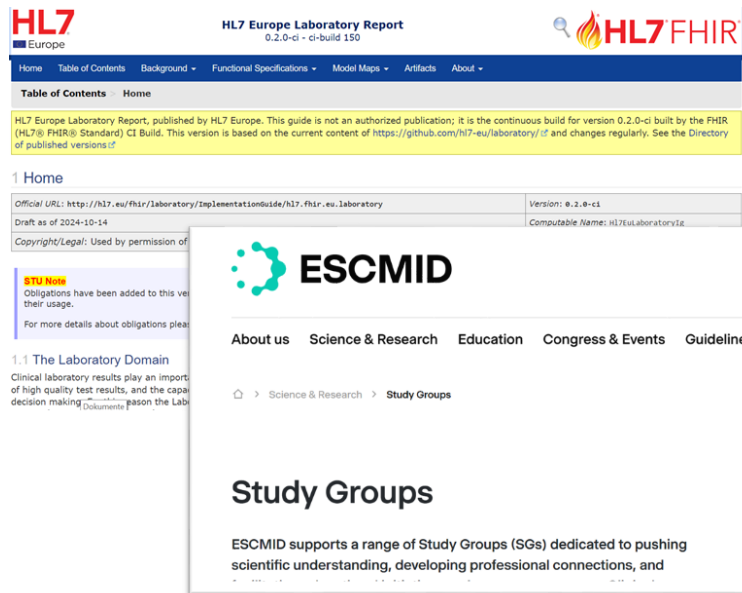
Neuanträge, die das Forschungsdatenportal für Gesundheit erreichen



Collaboration at European level

HL7 Europe Laboratory Working Group

Collaborating for the creation of a Working Group within the European Society of Clinical (ESCMID) for data interoperability



Evolution Driven by LOINC and SNOMED Collaboration



- LOINC is represented in the SNOMED CT concept model as a “LOINC Extension.”
- The shared elements of both terminologies in SNOMED CT are reflected in LOINC.
- <https://loincsnomed.org/> → <https://browser.loincsnomed.org/>
- LOINC elements are searchable using SNOMED CT logic (Expression Constraint Language).

Post-coordination in laboratory terms

- LOINC is on its way to enabling **post-coordination**
- The **methods** should be mapped to SNOMED CT

Body Weight Example

29463-7	Body weight	Mass	Pt	^Patient	Qn	(Weight Method)
8335-2	Body weight	Mass	Pt	^Patient	Qn	Estimated
3141-9	Body weight	Mass	Pt	^Patient	Qn	Measured
3142-7	Body weight	Mass	Pt	^Patient	Qn	Stated
18833-4	Body weight	Mass	Enctr^frst	^Patient	Qn	Measured
8350-1	Bodyweight*with clothes	Mass	Pt	^Patient	Qn	Measured
8351-9	Body weight*without clothes	Mass	Pt	^Patient	Qn	Measured

Weight method

- Estimated
- Measured
- Stated

<https://loinc.org/conference/dc-2024/>

- **Value sets** for methods are being created (possibly sorted by laboratory area, e.g. microbiology, or method category, e.g., immunoassays).

Working group (AG) was set up in 2021 by the Federal Ministry of Health (BMG) at the Advisory Board for Questions of Classification in Health Care (KKG) to advise on the use and **further development of LOINC and SNOMED**.

This includes in particular:

- the coordination of **changes** resulting from national and international issues
- contributions to the **translation** of LOINC into German
- the development of a Germany-specific **extension** of LOINC
- the preparation of the German position for the **European and international committees** on the further development and application of LOINC

<http://www.bfarm.de>

Thank you!

Prof. Dr. Sylvia Thun

Director of Digital Medicine and
Interoperability

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10117 Berlin

www.bihealth.org

References

<https://www.medizininformatik-initiative.de>
<https://www.ina.gematik.de/>
<https://www.bfarm.de/>
<https://build.fhir.org/ig/hl7-eu/laboratory/index.html>
<https://mio.kbv.de/>
<https://www.kbv.de/>
<https://loincsnomed.org/>
<https://forschen-fuer-gesundheit.de/>

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Stefan Sabutsch



■ Work

- 2023 – CEO / CTO, ELGA GmbH, Vienna
- 2010–2022 ELGA GmbH, Head of "Standards & Usability"
- 2005–2010 Lecturer for Medical Information Systems
University of Applied Sciences Joanneum Graz
- 2000-2005 Head of Office Graz, GWI AG
(Laboratory Information Systems)

■ Standardization

- President / Chair HL7 Austria since 2007
- President / Chair DICOM Anwendergruppe Austria since 2017
- Head of SNOMED National Release Center since 2019

■ Education: Doctoral studies in Biology

- **Contact:** stefan.sabutsch@elga.gv.at



Emmanuel Helm



■ Work

- 2023 – ELGA GmbH, Head of "Standards"
- 2020–2022 Assistant Professor for Medical Informatics
University of Applied Sciences Upper Austria, Hagenberg
- 2010-2019 Researcher for Medical Informatics
University of Applied Sciences Upper Austria, Hagenberg

■ Standardization

- Board Member and TC Co-Chair DICOM
Anwendergruppe Austria since 2017
- Active Member or Chair in several HL7 Austria WGs

■ Education: Doctoral studies in Informatics

■ Contact: emmanuel.helm@elga.gv.at





Alexander Henket

Interoperability Specialist



alexander.henket@nictiz.nl

Over 25 years of experience

Interoperability Specialist at Nictiz, competence centre for digital information management in healthcare

Active member of HL7 Netherlands, HL7 Europe and HL7 International

Member of IHE NL

PUSKÁS, Zsolt Péter MSc, MBA

e-Health expert, ESZFK

Member of CEO's advisory board of ESZFK

Since 2011: member of designer team of Hungarian National e-Health Infrastructure (EESZT)



ESZFK: Health Informatics Service and Development Centre Nonprofit Ltd (*Egészséginformatikai Szolgáltató és Fejlesztési Központ Nonprofit Kft.*)

Hungarian state-owned nonprofit company, under the supervision of the Ministry of Interior

Operator and developer of EESZT, the national e-health platform of Hungary

responsible for central health informatics services, and further central services (29/2022 (31.I.) *Government Decree on central health informatics services*)

EESZT: Hungarian National e-Health Infrastructure

(Elektronikus Egészségügyi Szolgáltatási Tér)

- Cloud-based platform, running since November 1, 2017
- 20.000+ connected healthcare provider (6000+ GP, 3000+ pharmacies, 400+ in- and outpatient institutes, National Ambulatory Service, 12.000+ private HCPs) – both public and private sector
- Regulated by law
- 200+ connected IT solutions
- 5,5 million+ Client Gateway registrations, 3,4 million+ downloads of mobile app (*EgészségAblak – „HealthWindow”*)
- ePrescription, Central Event Catalogue, Electronic Health Record (EHR), eProfile, eReferral, patient consent management, publication of central registries and terminologies etc.
- 3,5 billion+ healthcare records, 700 million+ care events, 800.000+ ePrescriptions/day (>99%)



HL7 FHIR adoption in European health systems: the case of Germany

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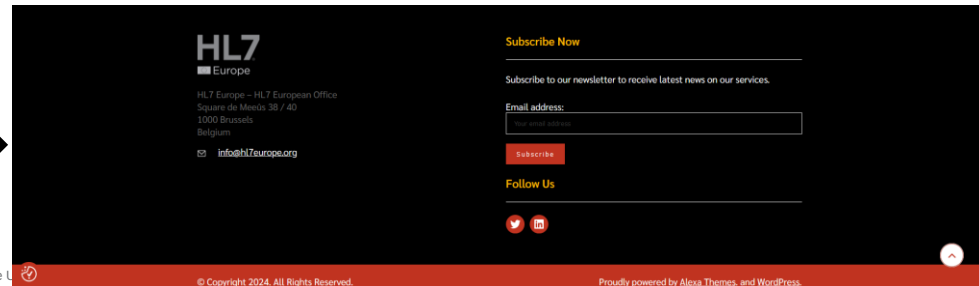
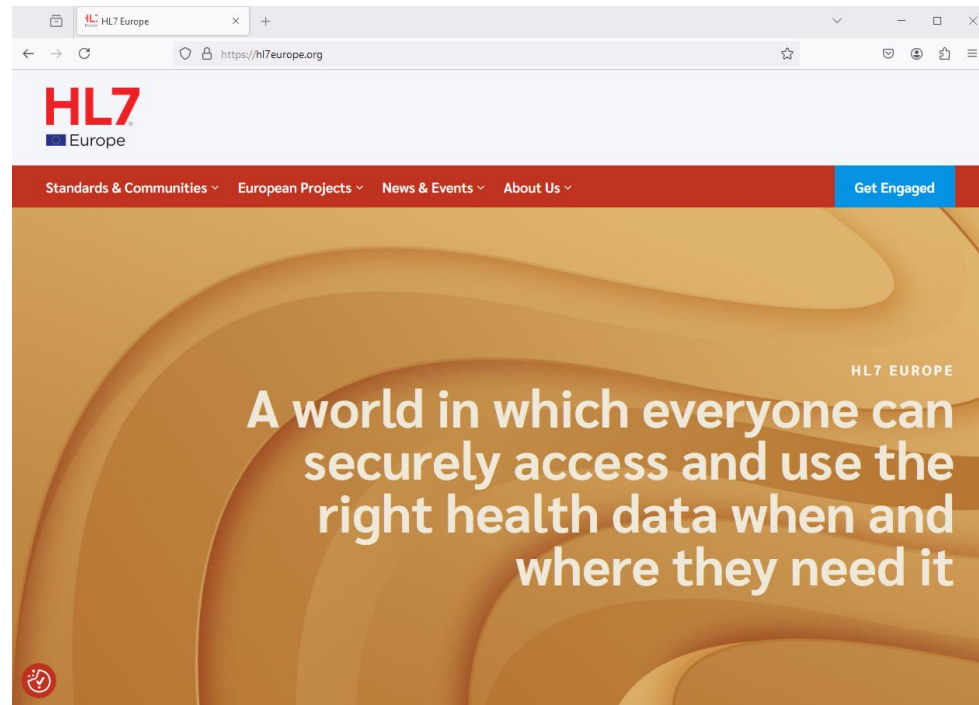
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Next steps

- Slides and recording on www.HL7.tv, notification to all registered attendees
- ... and

New HL7 Europe website

- www.hl7europe.org
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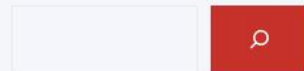
Driving Digital Health Forward: HL7 Europe and IHE-Europe Strengthen Their Collaboration to Enhance Interoperability



Integrating
the Healthcare
Enterprise



Brussels, 12 November 2024 — The European Health Data Space (EHDS) signifies a new era of data accessibility and exchange within the European Union, presenting an unprecedented opportunity for Member States to elevate healthcare standards. Recognising the pivotal role of the EHDS, HL7 Europe and IHE-Europe have jointly embarked on a unified mission to optimise their organisation's support for this endeavour. Central to this initiative are regular meetings with the leadership of both organisations to ensure best alignment.



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Brussels, 12 November 2024 — The European Health

HL7 FHIR adoption in European health systems: the case of Germany

Agenda

- Welcome and introductions
- Prof Sylvia Thun, Charité Hospital Berlin, HL7 Germany
- Panel:
 - Stefan Sabutsch, Emmanuel Helm, ELGA (AT)
 - Alexander Henket, NICTIZ (NL)
 - Zsolt Puskás, ESZFK (HU)
- Discussion and Q&A
- Next steps

Thank you!

