

**HL7 FHIR adoption in
European lab systems:
A look at Sweden**

**Webinar, 13 March 2025
16.00-17.00 CET**

Online on Teams



The HL7 logo is displayed in a large, bold, red font in the top right corner of the slide. The background of the slide is a blurred laboratory setting with various glassware like flasks and beakers on a lab bench, some containing blue liquid. There are also faint, repeating watermarks of the Vecteezy logo and the word 'Vecteezy' across the image.

HL7



HL7 Europe Labs-on-FHIR webinar series

A succession of open, online educational sessions 2023-25
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 lab systems: A look at Sweden

Speaker introductions

- Presenters:
 - Daniel Karlsson, The Swedish eHealth Agency (E-hälsomyndigheten)
 - Gunnar Nordin, Equalis AB
- Panel:
 - Prof Sylvia Thun, Charité Hospital Berlin, HL7 Germany
 - Jean-Michel Polfliet, eHealth Platform (BE)
 - Giorgio Cangioli, HL7 Europe

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 lab systems: A look at Sweden

Agenda

- Welcome and introductions
- A look at Sweden:
 - Daniel Karlsson, The Swedish eHealth Agency (E-hälsomyndigheten)
 - Gunnar Nordin, Equalis AB
- Panel:
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- Discussion and Q&A
- Next steps

End

HL7 FHIR adoption in European lab systems: a look at Sweden

Daniel Karlsson (SeHA), Gunnar Nordin (Equalis AB)

EQUALIS



HL7 Sweden

Agenda

- Laboratory services and specifications
- Participation in European efforts
- What's up with FHIR
- The observation code and the NPU terminology



A brief history

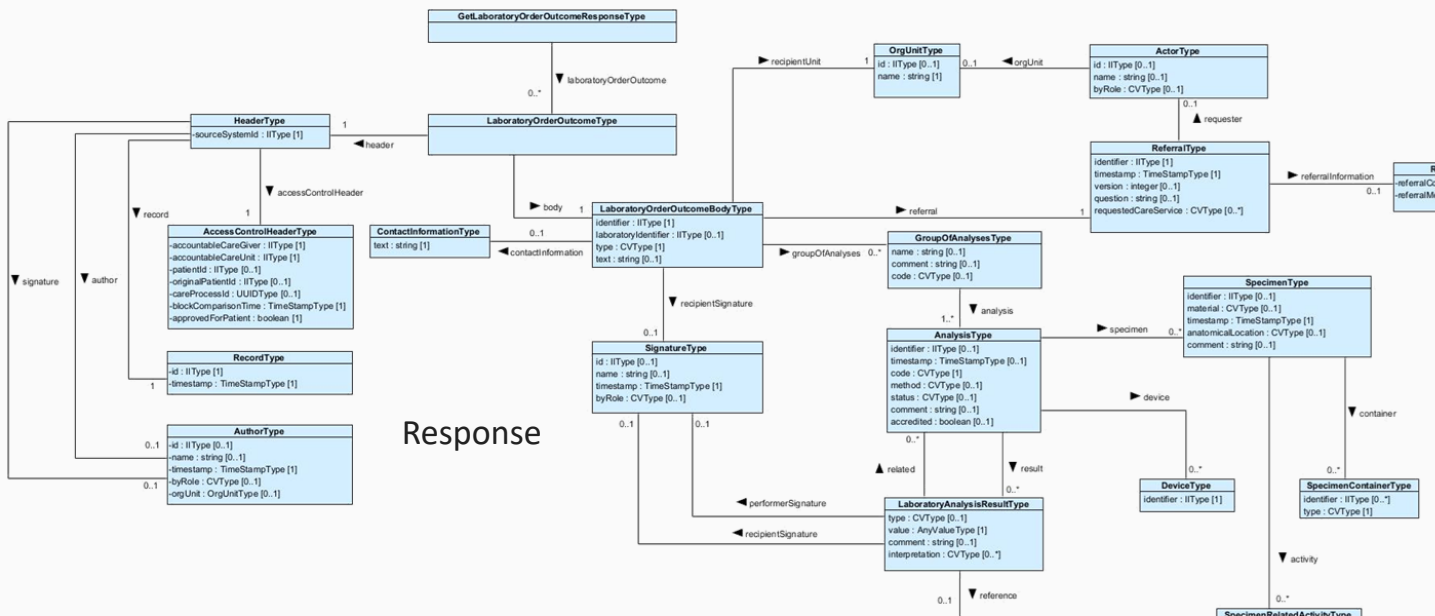
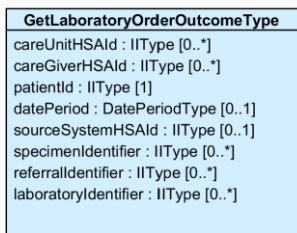
- 0 AD – Edifact
- 2009 – NPÖ (the “Swedish patient summary”) operative, Inera AB
 - Initially “clinical chemistry” results only
- 2018 – New specification (v4.0) supporting complex results in development
- 2019 – New specification implemented in 1 region
- 2020 – Covid-19
- 2025 – New guidance documentation, lab-to-lab communication

- Developed together with the laboratories

Laboratory specification v4

- Developed as a national specification mapped to a national RIM
- Main use case microbiology and antibiograms – i.e. complex results

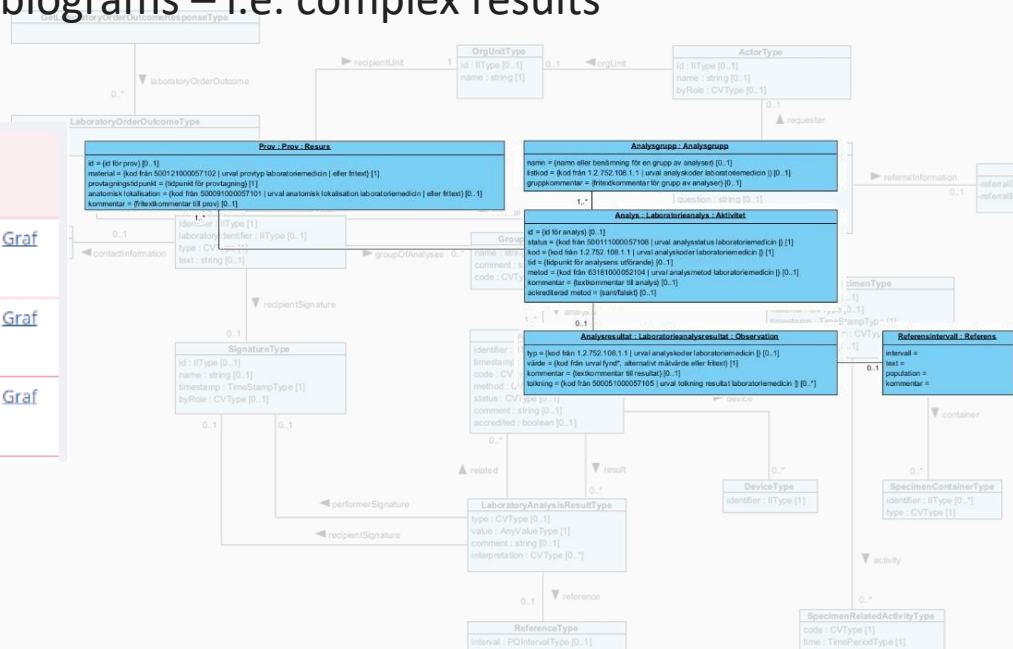
Request



Laboratory specification v4

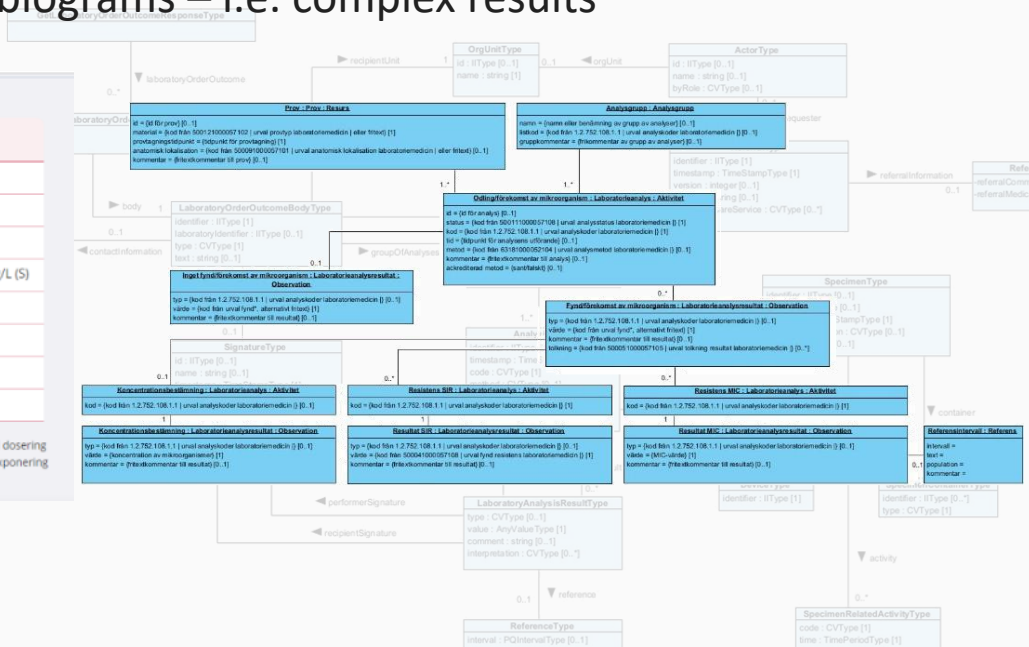
- Developed as a national specification mapped to a national RIM
- Main use case microbiology and antibiograms – i.e. complex results

Analys	Resultat och kommentarer	
B—Hemoglobin (Hb)	154 g/L *	Graf
Referensintervall: 117-153	Vidimerat: Gustav Welander 2018-06-15	
B—Neutrofila granulocyter	4.7 x10E9/L	Graf
Referensintervall: 1.7-8	Vidimerat: Gustav Welander 2018-06-15	
B—Leukocyter	7.9 x10E9/L	Graf
Referensintervall: 3.5-8.8	Vidimerat: Gustav Welander 2018-06-15	



Laboratory specification v4

- Developed as a national specification mapped to a national RIM
- Main use case microbiology and antibiograms – i.e. complex results



SKRIV UT

RESISTENSBESTÄMMNING

Substans	Fynd 1	Fynd 2
Betalaktamasresistenta pc	S	
Cefotaxim		S
Cefuroxim		S
Ciprofloxacin (MIC)		0,24 mg/L (S)
Fusidinsyra	S	
Gentamicin	S	S
Klindamycin	S	
Sulfametoxazol+Trimetoprim		S

S: Mikroorganismen är känslig för den här substansen vid normal dosering
 I: Mikroorganismen är känslig för den här substansen vid ökad exponering
 R: Mikroorganismen är resistent mot den här substansen

Slutsvar

Provtagningsstid
2022-01-04 00:00

Svaret skickat till
Kirurgmottagning Gävle

SÅR/SKREKT ODLING 1

Om provet
Provmaterial: sårsekret
Lokalisation: höger fot

Analys	Resultat och kommentarer
Referensinterval	* markerar resultat utanför referensintervallet ⓘ
Sår- Bakteriecodning (2 resultat)	Växt av <i>Staphylococcus aureus</i> (Fynd 1) Svar ej vidmerat
	Växt av <i>E. coli</i> (Fynd 2) Svar ej vidmerat

European projects

- Sweden participated in the X-eHealth project's laboratory task
 - Contribution of experiences from the laboratory services implementation, including value sets for laboratory orders and results.
- Continues in eX-eHealth through HL7 Europe and Xt-EHR



119371008Sabscess
122552005artärblod
119295008aspirat
430268003benbit
119359002benmärg
430238007bihålesekret
258415003biopsi
119297000blod
258482009blåsekret
258446004bronksektret
309176002bronkiellt borstprov
258607008BAL-vätska
122609004bronsköljvätska
119328004bröstmjolk
258587000buffy coat
309201001bukvätska
258448003bursavätska
258450006cerebrospinalvätska
258451005cervixsektret
57931000052101cervixsektret i urin
258499005cough swab
472929000CVK-spets
119360007dialysvätska
258566005DNA
440500007dry blod spot
1003705007dränagespets
258455001dränagevätska
119351004erythrocyter
119339001feces
309502007foster
119373006fostervatten
447103002främmande kropp
119341000galla
258438000glaskropp
258580003helblod
57921000052103helblod, EDTA
258485006hornhinna, skrapprov
446952006hudskrap
258503004hudyta
119326000hår
732976006hörselgång
119303007isolat
258444001kamarvätska
122554006kapillärblod
119312009kateterspets
440473005kontaktliins
122572000kräkning
421261003ledvätska

HL7 EU FHIR Laboratory IG

- Currently HL7 FHIR is not in routine use for laboratory
- HL7 Sweden working group on Laboratory and HL7 FHIR
 - Region Skåne, Västra Götaland for historic results from legacy systems using the HL7 EU FHIR IG
 - Issues found are reported to HL7 Europe
- HL7 FHIR and Inera AB laboratory services
 - Logical mapping to HL7 EU specification to assess compatibility, EHDS requirement
 - Future: Technical mapping to allow HL7 FHIR to be used alongside current specification



Credit

- Rebecca Ceder, Inera AB
- Oskar Thunman, Inera AB
- Mats Olofsson, Region Skåne
- Rasmus Bergfors, Region Skåne





EHDS Logical Information Models, published by Xt-EHR. This guide is not an authorized publication; it is the continuous build for version 0.1.0 built by the FHIR (HL7® FHIR® Standard) CI Build. This version is based on the current content of <https://github.com/Xt-EHR/xt-ehr-common/> and changes regularly. See the [Directory of published versions](#)

Content

Detailed Descriptions

Mappings

XML

JSON

TTL

13.41.1 Logical Model: Laboratory observation model

Official URL: https://www.xt-ehr.eu/specifications/fhir/StructureDefinition/EHDSLaboratoryObservation	Version: 0.1.0
Draft as of 2025-03-12	Computable Name: EHDSLaboratoryObservation

C.11 - EHDS refined base model for Observation performed by laboratory

Usage:

- Use this Logical Model Profile: [Laboratory observation model](#), [Laboratory report body model](#), [Observation model](#) and [Patient summary body model](#)
- Refer to this Logical Model Profile: [Appointment model](#)

13.41.1 Logical Model: Laboratory observation model [↗](#)

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C.11 - EHDS refined base model for Observation performed by laboratory

Usage:

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13.41.1.1 Formal Views of Profile Content

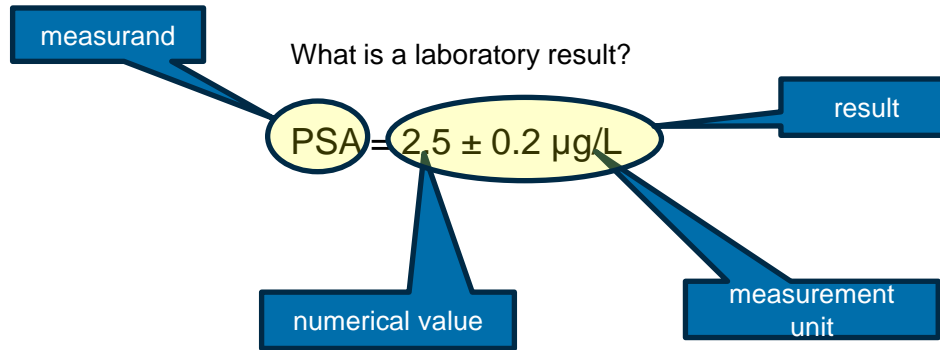
Description of Profiles, Differentials, Snapshots and how the different presentations work.

Key Elements Table	Differential Table	Snapshot Table	Statistics/References	All
Name	Flags	Card.	Type	Description & Constraints
EHDSLaboratoryObservation		0..*	EHDSObservation	
observationDate[x]		1..1	dateTime	C.10.1 - Observation date
observationDateDateTime			dateTime	
observationDatePeriod			Period	
observationCode		1..1	CodeableConcept	C.10.2 - Observation code Binding Description (No ValueSet): (preferred): LOINC, NPU
observationName		1..1	string	C.10.3 - Observation name
observationOriginalName		0..1	string	C.10.4 - Observation original name
observationMethod		0..1	CodeableConcept	C.10.5 - Observation method Binding Description (No ValueSet): (preferred): SNOMED CT

Used in many other countries

Used mainly in Denmark, Norway and Sweden

The observation code



The measurand is the "quantity intended to be measured"

What is observed

The observation code

Two different coding systems for measurands – LOINC and NPU

Both terminologies are based on the same principle:

Measurands are described by three major axes;

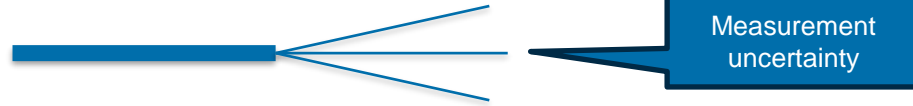
system, component, and kind-of-property

The LOINC system allows **different units** for each measurand and LOINC code

The NPU system precoordinates the **measurement unit** in the NPU code

The observation code

PSA = 5.0 µg/L ± 0.5 µg/L



Different standardizations used for the same measurand

PSA (IS 96/170)

PSA (IS 17/100) = 5.0 µg/L ± µg/L 0.5 µg/L

PSA (Hybritech)



Supporting information as metadata for how the observation is made

Specimen type

Tube

Anatomical location

Method

Equipment

Calibration

Patient condition

Test name (procedure)

.....

.....

To reduce "measurand uncertainty" some metadata are pre-coordinated in the LOINC codes while other metadata are pre-coordinated in the NPU codes.

This is the main difference between the LOINC and NPU coding systems!

Xt-EHR treats metadata as supporting information, to be post-coordinated with Snomed CT.

Both LOINC and NPU-terminologies will be incorporated in the Snomed CT platform.

Further mapping possibilities to be explored.

Thank you

Daniel Karlsson (SeHA), Gunnar Nordin (Equalis AB)

EQUALIS



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Head of Standardization Team @ eHealth Platform

Belgian Public Institution

HL7-be Co-chair

DIGIRELAB - Project Facilitator

FHIR Labo Result in the Belgian ecosystem





Giorgio Cangioli

- Co-facilitator of the HL7 EU Laboratory Report FHIR IG
- eHMSEG STF Architecture WG chair
- xShare Tech Specs WP leader
- Technical Lead, Board member HL7 Europe
- Board, TSC, AEC member at HL7 International



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Next steps

- Slides and recording on www.HL7.tv, notification to all registered attendees
- Join HL7 at the next WGM in Madrid, 10-16 May 2025
<https://info.hl7.org/may-2025-wgm>





Thank you!