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2013 saw significant changes in our Association.

Our previous CEO resigned on June first, and our colleague Duncan McNeil temporarily resigned from the Management Board to be our interim CEO. Duncan McNeil was very effective in running our organization, for which we are thankful. He resumed his board position once our new CEO, Don Sweete, was able to assume the post.

We hired six additional staff to assist in developing our product further, as well as to work with harmonization with other standardization products.

We welcomed four additional member countries, Belgium, Brunei, Chile, and Hong Kong, China, and talked with many others who are seriously considering joining our Association.

We continued building a fiscally sound business, which is now ready financially to catch up in areas where we need to accelerate our delivery of services and improve our product.

The Management Board held four face-to-face and seven virtual meetings, where valuable time was spent discussing increased member relations management and communication. We were also able to formally revise the terms of reference of the Management Board, making a number of its functions and relationships more explicit.

We have spent more time with the vendor community, holding vendor meetings during our business meeting and Implementation Showcase in Washington, DC, at the 2013 Health Information and Management Systems Society (HIMSS) meetings in Asia and, most recently, at HIMSS14 in Orlando, Florida. Vendors are an important element in implementing SNOMED CT in customer systems, and we want to support them in this task in the best way possible.

We established a recruitment committee to oversee finding, interviewing and employing a new CEO. This process concluded successfully with the hiring of Don Sweete, who took office effective January 1, 2014. In addition to having extensive experience in e-health in the government and commercial sectors, Don Sweete is knowledgeable about the Association’s objectives, having been a member of the Management Board since 2012.

The staff and management team of the Association have our deepest gratitude for their continued excellent work, their support of the Management Board’s strategic directions, and their many and varied initiatives. Thanks also to my colleagues on the Management Board, who have been a tremendous help in keeping me focused and in keeping the Association on the right track during a challenging year.

And again, last but not least, I would like to mention our collective appreciation for our Members, whose support continues to be the reason we exist.
It is a great honor in my new role as Chief Executive Officer of IHTSDO to present the 2013 Annual Activity Report to all of our Members and the stakeholders who have contributed greatly to the success of the organization. As a former member of the Management Board, I would like to express my thanks and appreciation to the board and staff for their hard work, leadership and support of the organization.

In 2013, IHTSDO continued the work of previous years to move forward our Members’ priority areas. In the content area, we worked with the Global Medical Device Nomenclature Agency (GMDNA) and completed a publication previewing technical devices. The team also worked on a review of diseases and ICD-11 to ensure clear alignment with SNOMED CT. In the area of development, the Core Problem List Subset was completed and included in the International Release.

In Implementation and Education, work was completed on a new SNOMED CT Starter Guide, while the leveraging of resources continued through the SNOMED CT Implementation Advisor Scheme, which allows Members to train skilled individuals. Additional work on the development of a Members’ browser was also carried out. Numerous achievements were accomplished in applications and architecture, including:

1) migration of Denmark to the Managed Service;
2) initiation and completion of a pilot working with the Danish National Release Center (NRC);
3) initial design and development of the Open Tooling Framework (OTF) and Road Map; and
4) stabilization of internal systems and tools to allow for more staff efficiency and productivity.

All of this was coupled with the biannual releases of the International and Spanish Editions of SNOMED CT, which were a result of ongoing process improvements.

A customer engagement program was approved and launched, representing IHTSDO efforts to introduce a new focus area. The program’s first task was to develop and launch a member country survey to provide an initial foundation with our customers that better allows us to focus our limited resources on key member needs and priority areas in an organized way.

As in previous years, IHTSDO collaboration with other organizations served to continue to highlight the importance of SNOMED CT and to build on work done to further enhance value to our stakeholders. Some examples of this collaboration included the initial work involving Logical Observation Identifiers Names and Codes (LOINC) and GMDNA to add further enhancements to our product. Also of note, IHTSDO held another successful Implementation Showcase in Washington, DC in 2013, the conference drawing over 200 attendees.

Our financial situation is healthy and the approved 2014 budget includes focus items that will ensure progress moves forward more quickly in various areas, such as completion of ICD-10 mapping, an open and transparent process for content development, the development of more scalable online educational services, the introduction of a new help desk function and the streamlining of our release processes.

In closing, I would like to thank all of our staff, member countries and the community of practice for their contributions to a highly successful year. Looking forward, 2014 will be a year of great progress and change both for the organization and also for the products and services that will be delivered to our stakeholders.

Don Sweete
CEO
In 2013, IHTSDO increased its authoring capacity dramatically, recruiting seven new terminology authors, taking the team to a total of eight. The team received training and successfully started production of new content. Further recruitment is scheduled for 2014.

The Consultant Terminologist Program continued to make important content contributions and also increased capacity, with four candidates achieving certification.

During the year, the content development process changed to become more efficient and transparent. The internal team and the consultant terminologists actively authored and addressed issues from the content tracker, and the tracker items progressed to the transition stage.

The main focus area of the internal team was to address legacy issues from the SNOMED CT International Request Submission System, or SIRS, and new requests as they arose. The team was very successful and is now in a position where new requests are dealt with in a timely manner, although there is still work to do on the historical requests. The team has continued to develop and refine workflow processes in support of the management of SIRS.

We also addressed a number of large areas of content development, specifically the redesign of the anatomical content and refinement of the laterality indicators for each site, removal of abbreviations from Fully Specified Names and the moving of non-human content to the SNOMED Veterinary Extension.
The Mapping Service is now well established and continues to deliver high quality service to its users. In 2013, the team focused on developing and embedding processes that would support the expected future increase in demands from end-users for mapping solutions. The team developed quality assurance processes to support the mapping process and also identified usable metrics.

In 2013, the mapping team published the SNOMED CT to the ICD-10 candidate baseline map. In addition to working hard to ensure that all new content added to the International Release, where in scope, had been mapped, the team reduced the existing SNOMED CT content that did not have a map. This work will be the focus of a specific project in 2014, which aims to complete all outstanding mapping work and deliver a complete SNOMED CT to ICD-10 map by the end of the year.

The team also continued to publish ICD-9CM maps, and a review of the use cases for these maps will be undertaken through consultation in 2014. In addition, a project was completed that delivered the maps to International Classification in Primary Care-2 (ICPC-2). The maps themselves will be published in early 2014.

Finally, the Mapping Service held a joint training session with the UK NRC to increase support for mapping activities within the NRC and to share resources and educational opportunities.
In 2013, we continued to produce and release the Spanish Edition of SNOMED CT. This has provided the organization with detailed knowledge and understanding of the translation process on an on-going basis.

The organization recognizes the importance of translation for its existing and prospective Members. As such, a review of member translation activity and requirements has been undertaken and planning initiated on how best to support translation endeavors in the future. The information gained through this process has allowed the organization to develop a translation strategy, which will be implemented in 2014.
In 2013, IHTSDO distributed the July 2013 and January 2014 releases of the SNOMED CT International Edition to Members. The team also distributed the Spanish Edition in April and October. In February, we released a preview of the SNOMED CT to ICD-10 map, and the map was officially baselined in the July International Edition. This was the first year IHTSDO managed SNOMED CT releases in-house. In this regard, IHTSDO would like to acknowledge the assistance of the U.S. National Library of Medicine (NLM), whose staff enabled us to deliver the ICD-10 map, and of the UK Terminology Centre (UKTC), which provided invaluable feedback on the Beta releases.

With the addition of two senior Java developers in December 2013, the Release Services team grew from one member to three. Currently responsible for operating SNOMED CT releases, the new developers are presently working on significant enhancements to the release production and validation processes.

Based on member feedback in 2013, we entered the planning stages of an initiative to standardize the release and quality validation of the SNOMED CT International Edition. We expect to roll out a centralized release and validation service in late 2014. The service will help resolve challenges such as consistency in validating and packaging releases across the International Edition and national extensions. It will also enable IHTSDO to release SNOMED CT by clinical sub-domain, potentially on a continuing basis.
Implementation and Education

The services offered in this area cover publication, maintenance and sharing of information about SNOMED CT relevant to the support of implementation. Education services initially have focused on the SNOMED CT Implementation Advisor (SIA) scheme but will grow significantly in 2014 to include online training resources and skills assessment tests.

The SIA scheme entered its second year with an intake of six new participants. In addition to the training element, SIA assignments made a major contribution to the work program. Key outputs this year included a new SNOMED CT Starter Guide. This guide offers a good introduction to a range of foundational topics and is principally directed at people with limited knowledge of SNOMED CT. The clear outline it gives of a broad range of topics related to the terminology, however, means it can also be used as a way to refresh and update the background knowledge of more experienced users.

Another SIA assignment involved the development of revised and enhanced guidance on searching and data entry, addressing known limitations of generic search routines. This work also helped to inform development of a document that sets out requirements for SNOMED CT browsers.

Other streams of SIA work have focused on practical and technical questions related to Reference Sets (RefSets), constraints on post-coordinated expression, and binding terminology to EHR information models. These streams of work will continue in 2014.

Significant steps also were taken to enhance SNOMED CT education materials and services. A pilot, online skills assessment was developed with the support of SIA participants. In the last quarter of the year, this test, known as the SNOMED CT Challenge, was taken more than three hundred times. An outline of broad subject areas relevant to working with SNOMED CT was developed to link together the Starter Guide, the skills assessment tests and existing documentation. During the next year or two, additional education materials will be developed based on this subject index.
Customer Engagement

Last year saw the establishment of a new function to manage IHTSDO customer relationships and engagement activities. This will strengthen the customer focus in IHTSDO’s operational delivery and strategic direction to help achieve health data standards that support better healthcare, research and health information exchange. In the third quarter of the year, a comprehensive customer satisfaction survey of all existing member countries was completed. The member countries’ feedback laid the foundation for a review of IHTSDO’s delivery focus in 2014 to address the main priority areas and strengthen IHTSDO support to the member countries.

In recognition of the need to increase awareness of the benefits that can be achieved through implementation of SNOMED CT, a study was commissioned to deliver a framework for assessment of benefit realization. The conceptual framework for qualitative assessment of benefits was formulated last year and further work on approaches to benefit quantification is due to be finalized in 2014.
IHTSDO has a number of collaboration agreements that have been established in cooperation with partner organizations. The agreements have different purposes, but all focus on ensuring that SNOMED CT is interoperable with other standards to meet the needs of stakeholders, such as vendors, member countries and clinical groups. The outcome has been specific products designed to support the uptake and implementation of SNOMED CT worldwide.

The following key collaborations led to important deliverables for our stakeholders in 2013:

- **World Health Organization (WHO):** Collaboration activity continues through the work of the IHTSDO/WHO Joint Advisory Group (JAG) with strategic direction and signoff of annual work plans and monitoring of progress by the Joint Coordinating Group (JCG). The baseline release of the first set of SNOMED CT to ICD-10 maps was released, thus adopting processes agreed with the JAG. The JAG has also developed a methodology for defining how SNOMED CT works within the foundation layer of ICD-11. In addition, the first phase of reviewing the alignment between SNOMED CT and International Classification of Functioning, Disability and Health (ICF) was completed.

- **World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians (WONCA):** This joint project to complete SNOMED CT RefSets for use in general practice covering health issues and reasons for encounter were delivered along with maps to ICPC-2, which will be released in 2014.

- **ISO TC 215 Health Informatics:** IHTSDO has continued to participate in ISO TC 215 activities, contributing to any development work which may impact on the development of IHTSDO products. Participation also allows IHTSDO to have better knowledge of standards activities in other organizations which may have relevance to implementation of SNOMED CT.

- **International Council of Nursing (ICN):** ICN has developed an equivalence table between the International Classification of Nursing Practice (ICNP) and SNOMED CT for a specific set of Diagnoses and Outcome statements that was released in January 2014.

- **Regenstrief Institute:** A long-term agreement to begin cooperative work to link LOINC and SNOMED CT was signed by the Regenstrief Institute and IHTSDO. The cooperative work planned will link the rich clinical semantics of SNOMED CT to LOINC Parts and Terms, which will provide extensive coverage of laboratory tests and some types of clinical measures. It will enable LOINC and SNOMED CT to be used together in a consistent and interoperable manner.

- **European projects:** IHTSDO has continued to be involved with various European Union-funded projects: epSOS, which is coming to a close and explores cross border interoperability between electronic health systems; SemanticHealthNet, which explores interoperability of clinical and biomedical information; and Trillium Bridge, which is seeking to align the use of standards between the EU and US to enable the sharing of summary-level patient information. IHTSDO input is to advise on the use of SNOMED CT and, where applicable, provide ways for non-member countries to access relevant SNOMED CT content.

- **GMDN Agency:** Following considerable work in 2013, IHTSDO published a Medical Devices Technical preview in April 2014. The preview is in the format of a simple mapping file, and provides all GMDN content in scope with a SNOMED CT code, and also identifies the equivalent GMDN code. The aim is to receive feedback on the preview data before mid-June 2014, and then to publish a candidate baseline of the release as part the July 2014 SNOMED CT International Release.

Alongside this, IHTSDO has established a Healthcare Professionals Coordination Group, thus providing a platform that brings together IHTSDO Healthcare Professional Special Interest Groups (SIGs) to work collaboratively and share lessons learned. This group will also help in engaging with other professional groups and in developing key ways of contributing to content development, which, in turn, will assist in clinical uptake of SNOMED CT.
Throughout 2013, IHTSDO Tooling has been working towards a new platform for the tooling services IHTSDO provides to its Members and the wider community to support the SNOMED CT product lifecycle.

In parallel with the phases of new development, much of the year’s focus was on the IHTSDO Workbench, continuing the emphasis on stability and adding enhancements. April 2013 saw the release of Workbench v3.0, adding the functionality provided by the translation module, amongst other enhancements. In November 2013, v3.1 was released with enhancements identified by authors.

IHTSDO worked closely with Denmark to pilot and implement the translation functionality, leading at the end of 2013 to the first Danish Extension released via the Workbench Managed Service. The Swedish team also successfully released the Swedish Extension out of the Managed Service.

In the latter half of the year, Tooling began looking forward to an Open Tooling Framework platform for the future growth of services offered by IHTSDO. This is expected to bear fruit during 2014 and beyond, providing online services for Members and the community, covering areas such as RefSet Management functionality and Map Tooling.

Internally, the Tooling group has introduced new tools to the organization and the community, including the use of Trello, the Family Practice/General Practice (FP/GP) RefSet Field Test and the “SNOMED in Action” mini-site, while also kicking off work to review the design and structure of the IHTSDO website.
In May, at the request of the Management Board, IHTSDO initiated a Quality Management System (QMS) project. The QMS concept originates with ISO 9001, which describes a process approach to continual improvement. Processes are documented, followed, maintained and improved. Although IHTSDO does not intend to seek ISO certification at this time, it is trying to comply with the ISO standards to the greatest extent possible.

The QMS was unveiled in mid-December in a seven-week pilot stage. It included information on what QMS is and how it would be maintained, IHTSDO organizational structure, human resources policies, content development processes, documentation on the delivery of SNOMED CT, a description of event planning, forms and templates, and much more. During the pilot, staff members submitted 13 items of feedback and 48 change requests.

A post-pilot survey of IHTSDO staff members showed wide understanding of what the QMS is and why it is important. Overall, respondents were pleased with the progress and several offered constructive criticism that was subsequently addressed.

In February 2014, the QMS team worked on adding content and updating the look of the site. Version 1.0 was released on March 3, 2014.

The QMS is primarily for internal use but is publically available at ihtsdo.org/qms.
Standing Committees

Content Committee
Implementation and Innovation Committee
Quality Assurance Committee
Technical Committee
2013 was marked by the successful completion of the transition process of content development from the College of American Pathologists to full in-house development by internal IHTSDO staff. Moving to an internal content development management process enhances IHTSDO’s volume capacity, accelerates response to member countries’ content changes and development requests, and reduces expenses. The transition required a big expansion in personnel, with seven new terminologists being hired.

The new content development team enabled release of the first internally developed update in July 2013. As planned, both updates to SNOMED CT were released on schedule in July 2013 and January 2014. There were 1,114 new concepts with 4,145 new descriptions in the July 2013 release, and 2,224 new concepts with 5,242 new descriptions in the January 2014 release. New additions this year to the International Releases included the Example Problem List Subset and the Medical Devices Technology Preview. Two releases of the Spanish translation were also produced on schedule in 2013.

An important milestone in 2013 was reaching an agreement on SNOMED CT and LOINC cooperation with the Regenstrief Institute. This agreement will enable collaboration with LOINC and enrich SNOMED CT with highly used laboratory and diagnostic content. Planning has been conducted for content development resulting from this agreement, and two terminology authors have been recruited to work in this domain.

The development of substances and medicines codes was another important project in 2013. Work to finalize the Pharmaceutical/Biologic Product concept model continued, and two terminology authors with a substantial pharmacology background were recruited and started working on developing substances and medicines content.

The FP/GP Project was successfully completed and its results were reported. In 2013, the Content Committee had discussions on the Allergy project, the Canadian Vaccines model, the Anatomy project, and the Microbiology laboratory results reporting project. SIG and project groups also reported to this committee. The Diagnostic Imaging Editorial Policy was also discussed and approved by the committee.
The Implementation and Innovation (I&I) Committee provides advice to IHTSDO management and staff on a range of topics relevant to implementation of IHTSDO terminology products and services. The scope of the committee includes enabling effective adoption, technical implementation and deployment of SNOMED CT through education, training and documentation. In addition, the committee actively encourages research and innovation to demonstrate and deliver benefits from practical use of SNOMED CT.

During 2013, the committee met monthly by teleconference and held two face-to-face meetings. I&I Committee members contributed to the progress of various work items in the implementation and education work streams. Feedback on interim and draft deliverables has been particularly valuable this year. Additionally, many activities planned for 2014 arise from initial proposals and outlines developed by the committee to fill gaps it identified in current work. The committee also supported plans for an increase in educational activities to meet the needs of a growing community of new IHTSDO Members.

The value of committee input arises from the knowledge, enthusiasm and varied experience of current I&I Committee members. The perspectives offered include those of national strategic bodies, health provider institutions, researchers, software architects and commercial vendors of products and services that use SNOMED CT. This diversity is further complemented by a geographic spread, with committee members currently drawn from seven countries. This mix of viewpoints continues to lead to new insights into innovative approaches to advance the mission of IHTSDO in relation to implementation of SNOMED CT.
The IHTSDO Quality Assurance Committee (QAC) met regularly throughout 2013, including two face-to-face meetings as part of IHTSDO business meetings. QAC’s efforts focused on the following areas:

- **IHTSDO Quality Framework:** The QAC provided advice and guidance in a number of areas, including the Mapping Service, which has produced a set of metrics covering the lifecycle of mapping from training to production, enabling the team to monitor and change practice, as well as to report key performance indicators.

- **Policy development:** A second version of the Deprecation Policy was consulted on and, following update, will progress to being approved in the first half of 2014.

- **Risks and Issues Management:** This area has been implemented, and QAC has consequently outlined an approach to Critical Incidence Management that will be developed in 2014.

- **Advice on QMS:** QAC will provide advice and governance as the IHTSDO QMS system is put in place and will have a continued role as it moves into full implementation.

- **Quality Assurance (QA) of SNOMED CT:** With the transition of SNOMED CT to in-house production, the QAC’s role in assuring content has become more important. A subgroup, with input from other standing committees, is advising the Head of Content Development on aspects of quality across the development life cycle, including management of QA rules, quality metrics for measuring aspects of development, ways of reviewing major content changes before release, and QA of the Spanish translation.
The IHTSDO Technical Committee’s purpose is to support the mission of IHTSDO by advising on all issues related to the technical framework and technology platform required for the development, maintenance and implementation of SNOMED CT and its related standards and specifications.

Organizations using SNOMED CT require guiding frameworks and effective tools, as well as a set of implementation-ready specifications and information on harmonization with other health and technology-related standards. The Technical Committee is an expert reference group providing advice to the IHTSDO Management Board as a formal functionary within the governance structure, and directly to the organization’s officers and contracted suppliers.

During 2013, the Technical Committee held regular working meetings, supplemented by a rich ongoing discourse throughout the year. The Technical Committee also participated in a joint meeting with the I&I Committee in Washington, DC, where a number of joint areas of interest were discussed, with working groups formed to progress necessary work items. Further inter-committee meetings are planned based on the success of this meeting.

A number of key work items for IHTSDO have progressed through the committee throughout the year, including:

- the Diagramming Guidelines; work on Concrete Domains to support medications management;
- the Uniform Resource Identifier (URI) Specification;
- input to the deprecation policy for RF1;
- definition of a query syntax speciation for SNOMED CT;
- new items for consideration, including RF2 Complex Map Pattern specifications;

as well as proposals to review a number of existing specifications, including Compositional Grammar.

The Technical Committee has maintained a strong interest and participation in formational thinking for the OTF. The role of the Technical Committee in supporting effective technical governance for the OTF is a key issue for discussion and resolution in the first half of 2014.
In October 2013, IHTSDO held its third SNOMED CT Implementation Showcase in Washington, DC.

The two-day event offered a broad scope of presentations and tutorials, carefully chosen by a selective review of submissions. The resulting program provided an excellent opportunity for attendees to interact with SNOMED CT implementers from around the world. Many sessions were full to capacity, as presenters shared their first-hand knowledge of the benefits, challenges and lessons learned from a variety of implementations. Abstracts and presentations from this event are available from the IHTSDO website at ihtsdo.org/showcase_index.

In conjunction with the presentation streams, attendees also had an opportunity to visit vendors at the Implementation Showcase exhibition, an area that featured SNOMED CT-enabled software solutions and poster presentations of implementation experiences.

More than 230 people attended the Showcase, which was an increase in numbers from Stockholm 2012 and most encouraging considering the event coincided with the official US federal government shutdown. Feedback from attendees, speakers and exhibitors was very positive, confirming this as the key annual event in the IHTSDO calendar. Building on these prior successes, plans for the 2014 Implementation Showcase in Amsterdam, the Netherlands are already well underway.
IHTSDO had the privilege of presenting the 2013 Award for Excellence to Kristina Bränd Persson of Sweden, who has worked diligently to ensure that IHTSDO operates on a foundation of solid values and principles. To get the job done, she has always shown serious commitment, contributing with her knowledge, time and energy to help make IHTSDO a highly dependable platform for successful international collaboration.

Representing both a WHO collaborating centre and a SNOMED CT NRC, Kristina has also played an important role in the collaboration between IHTSDO and the WHO. Especially her expertise in classification and her insider knowledge about what is important to both organizations have helped them work together to a greater degree.

As co-chair of the Member Forum, Kristina was an important driver in consolidating the forum as a valid contributor to the organization. In addition, initially as a General Assembly member and later as a Management Board member, she always worked conscientiously to represent the views of Members and their needs from an operational perspective.

Kristina’s inclusive approach works to ensure that others have the opportunity to contribute to meetings and collaborations. Leading by example, she demonstrates the importance of valuing other cultures, in particular by encouraging native English-speakers to talk slowly and to avoid possibly problematic fixed expressions that hinder comprehension by non-native speakers. Kristina recognizes that the importance of this work should not be underestimated in an international organization such as IHTSDO.

Kristina’s combined endeavors on behalf of IHTSDO help to propel it forward toward even higher standards, while remaining accessible to all Members. We at IHTSDO are proud of her achievements and grateful for her continued efforts.
National Reports

Australia  Belgium  Brunei  Canada  Czech Republic  Chile  Denmark  Estonia  Hong Kong  Iceland  Israel  Malaysia  Malta  New Zealand  Poland  Slovakia  Slovenia  Singapore  Spain  Sweden  United Kingdom  United States of America  Uruguay
Australia

**Strategic Directions**
Implementation will remain the priority for 2014, with significant engagement with vendors and users in the acute care sector and vendors in the primary care sector. The focus is on medications management, together with recording adverse reactions using both native and mapped approaches. These activities and our releases will be supported by additional guidance material, as well as conformance and compliance requirements. After a tremendous effort over previous years, 2014 will see the production release of Australian Medicines Terminology (AMT) v3, with the subsequent deprecation of AMT v2. Tooling activities will include a production version of an internally developed editing tool for AMT and SNOMED CT-AU, as well as a demonstrator showing terminology in action. Also planned is the development and initial deployment of an external education strategy.

**Achievements**
The focus of 2013 was driving implementation, which involved partnering with others, including vendors and jurisdictions, to work towards specific implementation activities. Activity on AMT saw the release of the evaluation Beta version in February, the commencement of a mapping service as well as the regular monthly releases. SNOMED CT-AU was released in May and November, the November release including collaboratively developed RefSets to support recording of allergies and adverse reactions.

**Affiliate Licensees**
Australia currently has 741 Affiliate Licensees, comprising organizations and individuals, 121 of which were added in 2013.

**Representatives**
General Assembly Kate Ebrill
Member Forum Dion McMurtrie, Cathy Richardson

**National Release Center**
National e-Health Transition Authority (NEHTA)
nehta.gov.au

Belgium

**Strategic Directions**
The Canada Health Infoway Standards Collaborative (SC) functioned based on a strategic decision by the Belgian government, Belgium became a Member of IHTSDO in September 2013, joining a global effort to develop, maintain and enable the use of SNOMED CT in healthcare systems.

In joining IHTSDO, the Belgian Federal Public Service of Health, Food Chain Safety and Environment will make SNOMED CT available nationally for use in EHRs, health research and other applications. Users of the terminology will also have access to new resources as they are developed.

**Achievements**
Belgium has developed an e-health roadmap for 2013-2018, in which an important strategy is the adoption of SNOMED CT as the main health system’s clinical terminology.

The strategic goal to use SNOMED CT in the entire Belgian healthcare system is still in the initial planning stages and a schedule is set to be determined in 2014. Efforts to work on translation and limited implementations are gaining momentum.

**Affiliate Licensees**
Belgium plans to award Affiliate Licensees in the coming months to hospitals, local vendors and others.

**Representative**
General Assembly Arabella D’Havé
Member Forum Arabella D’Havé

**National Release Center**
Federal Public Service of Health, Food Chain Safety and Environment
health.belgium.be
Canada

Strategic Directions
The Canada Health Infoway Standards Collaborative (SC) functions as the central point of coordination for health information standards in Canada. The SC provides support to HL7, ISO/TC215, LOINC/Regenstrief, IHE, DICOM and IHTSDO, through a harmonized model to Canadians.
An SC priority is to further our SNOMED CT Adoption Strategy based on delivering products and services necessary to enable adoption in Canada. In the coming year, SC will continue to support SNOMED CT implementation by:
• Developing content that supports the Communicable Disease and Immunization Management for Public Health Surveillance Solutions;
• Delivering education and training to enhance SNOMED CT expertise in Canada, including the development of a clinical terminology certification program; and by
• Providing implementation support to help further interoperability.

Achievements
In 2013, Canada continued to deliver a comprehensive suite of SNOMED CT tools, products and services to our clients. Highlights included:
• Releasing the first SNOMED CT Canadian Extension;
• Launching a SNOMED CT Request for Change (RFC) Tool, Infoway Request Management System (InfoRMS), to better manage RFCs from our clients;
• Increasing participation in our SNOMED CT Education and Training Program;
• Using SNOMED CT in a Public Health Surveillance Solution, which resulted in the ability to manage vaccine inventories by specificity (e.g. generic and trade names) and to accurately forecast immunizations; and
• Using SNOMED CT to support microorganism reporting in a large provincial lab information system.

Affiliate Licensees
Canada currently has 600 Affiliate Licensees.

Representatives
General Assembly Dennis Giokas
Member Forum Shari Dworkin

National Release Center
Canada Health Infoway
infoeway-inforoute.ca

Chile

Strategic Directions
Our goal is to implement terminology services intended for use by the entire public health system, which accounts for 80% of the health system as a whole. Work is currently being carried out to design this project. SNOMED CT will be available in customized software, offering refined lists of concepts and the capability of capturing errors and new terms. A central server and mirror servers in various regions will be used to do this. Terminologies will be delivered through this system, but they will be maintained centrally at the Ministry of Health.

Achievements
SNOMED CT was legally defined as Chile’s reference terminology in 2013 and preparations for the terminology services project were initiated. We have developed a national pharmaceutical terminology and a National Extension, including relevant documents to be used not only for EHRs but also by related organizations for logistics and commercial purposes. Several organizations have contacted the team to show an interest in collaboration.

Affiliate Licensees
No Affiliate Licenses have as yet been awarded.

Representatives
General Assembly Alejandro Mauro
Member Forum Alejandra Lozano

National Release Center
Health Informatics Office, Ministry of Health
ocis.cl
Denmark

Strategic Directions
There is a growing interest and understanding in Denmark of the possibilities for using SNOMED CT. Two of the five Danish regions have chosen a common EHR system, Epic. In connection with this, they have shown interest in knowing more about SNOMED CT, and the Danish NRC expects to be involved in delivering to the implementation. On the municipal level, the Danish municipalities are planning to use parts of SNOMED CT for the terminology in their healthcare systems.

Development of the Danish drug terminology is expected to move forward in 2014 in the following ways:

• Danish drug data will be added to SNOMED CT in a Danish Drug Extension;
• The new IHTSDO pharmacy model, which includes strength, will be implemented in the drug terminology, making Danish trade products fully defined;
• Establishment of a national allergy register containing SNOMED CT allergy codes is expected to start in 2014; and
• A number of knowledge databases – Max Dose, Risk Situation, Interactions Database and medicin.dk (drug information site) – will start using SNOMED CT substance codes.

In connection with the above, the NRC will continue to focus on areas where SNOMED CT can be an asset to the solutions. The NRC will also continue translating new international content, creating new concepts in the Danish Extension, and adding synonyms where relevant.

The NRC will also continue to focus on education, both on the basics of SNOMED CT and at a higher level, for example, regarding the creation of RefSets, content and the use of release files in RF2.

Achievements
In 2013, the Danish NRC worked with IHTSDO to test the Workbench translation module and to release the Danish Extension in RF2. The NRC now uses the Workbench for its terminology development, maintenance and release.

Affiliate Licensees
Denmark has 29 Affiliate Licensees, six of which were issued in 2013.

Representatives
General Assembly Flemming Christiansen
Member Forum Palle G. Petersen, Camilla Wiberg Danielsen

National Release Center
National e-Health Authority
ssi.dk/snomedct/en

Estonia

Strategic Directions
SNOMED CT will be of primary focus in Estonia in 2014-2015. Although some Affiliate Licensees currently use SNOMED CT with their own translations, the overall aim is to begin implementing and using SNOMED CT nationally, an important step in engaging the parties required to achieve successful implementation. The extent to which SNOMED CT will be translated and implemented is currently under evaluation.

In 2014, we also plan to conduct wider discussions on SNOMED CT implementation options in order to select the most suitable alternative. These steps will enable us to compile a more detailed implementation plan.

Achievements
In 2013, the need to implement and translate SNOMED CT centrally in Estonia was put on the agenda as a key point, despite the fact that no SNOMED CT translations had been carried out during the year. Two analyses completed in 2013 provide the impetus for further progress in this direction.

The first analysis presents an overview of the experiences of other regions in Estonia and their implementation of SNOMED CT, thus supplying useful input to Estonia’s nationwide implementation plan. The second analysis explains the potential benefits of implementing SNOMED CT and includes a description and breakdown of the various SNOMED CT implementation options suitable for the Estonian context.

SNOMED CT and its application are of significant interest within the field of pathology. According to the Estonian Society of Pathologists, implementing SNOMED CT throughout Estonia would be of substantial benefit to the field.

Affiliate Licensees
Estonia has nine Affiliate Licensees, one of which was issued in 2013.

Representative
General Assembly Pille Kink
Member Forum Pille Kink

National Release Center
Estonian eHealth Foundation
e-tervis.ee
Strategic Directions

Hong Kong, China is developing a territory-wide, patient-oriented EHR sharing system. Since standard terminology is the foundation for supporting the development of this interoperable EHR, we are building a standard terminology, the Hong Kong Clinical Terminology Table (HKCTT), to ensure shared health data can be accurately interpreted, and thus be used to improve healthcare delivery and optimize workflow. The aim is to build HKCTT by integrating international terminologies commonly used in Hong Kong, including SNOMED CT. In addition to being made available for use in EHRs, public health research and other applications, HKCTT will be mapped to SNOMED CT and made available to end-users via online or offline means, and through incorporation into end-user software applications. Hong Kong, China will also develop and maintain content that is specific to the needs of the territory-wide EHR.

Achievements

Since joining IHTSDO in 2013, Hong Kong, China has mapped local pathology terms to SNOMED CT. For medicines terminology, it has completed the direct mapping of substances and qualifier concepts to SNOMED CT, with the aforementioned concept types in the local data mapped directly or post-coordinated to SNOMED CT. For pharmaceutical products, the initial mapping exercise has been completed and at least one third of the local virtual therapeutic moiety concepts have been mapped directly to SNOMED CT. The NRC is working on post-coordinating the rest of them or maintaining them as a set of local extensions in the coming year. The mappings will be implemented in 2014. Hong Kong, China has also post-coordinated the local diagnosis and procedure terms to SNOMED CT and invited an overseas SNOMED CT expert to validate the post-coordinated work. In addition, it has developed guidelines on post-coordination to ensure data consistency.

Affiliate Licensees

Hong Kong, China has four Affiliate Licenses, all of which were issued in 2013.

Representative

General Assembly Vicky Fung
Member Forum Vicky Fung

National Release Center

Hong Kong Hospital Authority
ha.org.hk

Iceland

Strategic Directions

The eHealth policy in Iceland includes the implementation of an integrated EHR at a national level, which is securely accessible to authorized professionals at point of care. Furthermore, it allows people in the general public access to their own health data. This is achieved by integration of regional databases and the development of a national patient portal. The application, combined with information from the national prescription database, provides physicians with a much better overview of healthcare provided to their patients. Hence, this supports increased patient safety and quality of healthcare. Current plans to improve clinical documentation and national reporting include the implementation of a standardized terminology for X-ray diagnostics, documentation of symptoms, and physical examination. The product of a national collaboration between the responsible partners for classifications and terminologies, these plans are in coherence with future EHR development plans at a national level.

Achievements

A nationwide surveillance system on communicable diseases for the office of the Chief Epidemiologist of Iceland has been in use for some years. Recently, the system was updated to allow for real-time reporting on communicable diseases. SNOMED CT terminology is utilized in the system to ensure correct registration of pathogens. Another milestone includes the launching of real-time data collection to the nationwide hospital discharge registry of the Directorate of Health. Furthermore, all prescription drugs are reported to a nationwide prescription database, which is now updated in real-time and can provide practicing physicians direct access to their patients’ prescriptions. This access, along with up to 70% of all drug prescriptions currently being delivered electronically, will support increased patient safety and surveillance of drug prescriptions.

Affiliate Licensees

No Affiliate Licenses have been issued as yet.

Representative

General Assembly Lilja Sigrún Jónsdóttir

National Release Center

Directorate of Health
landlaeknir.is
Israel

**Strategic Directions**
The Israeli Ministry of Health (MOH) is investigating the options to implement SNOMED CT in the Israeli health system. While the strategic decision to use SNOMED CT was taken during 2012, the way to implement it has not yet been decided. Currently, the MOH is evaluating the option to use SNOMED CT in the national health information exchange network while mapping each organization’s proprietary terminology to SNOMED CT. The goal for 2014 is to make a decision and plan the implementation. There are no plans to translate SNOMED CT into Hebrew as there is no need to do so.

**Achievements**
During 2013, the Israeli MOH evaluated various terminology servers to find a tool to be implemented in our health system to organize several terminologies, including SNOMED CT.

The MOH defined the needs from a terminology server but an appropriate tool has not yet been selected.

**Affiliate Licensees**
Israeli currently has six Affiliate Licensees, all of which were issued by MOH in 2013.

**Representative**
General Assembly Nachman Ash
Member Forum Nachman Ash

**National Release Center**
The Israel Ministry of health
health.gov.il

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Lithuania

**Strategic Directions**
At the start of 2014, Lithuania initiated national projects in an effort to complete the translation and translation quality assurance of the majority of 40,000 concepts by year’s end. At the same time, it also began moving through the various SNOMED CT projection and development phases, to be completed by the close of 2015. In the second half of 2014, the pilot project SNOMED CT utility will be launched together with the polyclinic Centro Poliklinika.

**Achievements**
A selection process took place in 2013 to choose 40,000 SNOMED CT concepts, at which time the main implementation priorities were added due to various practicalities and national e-health project requirements, such as the Telecardiology Project and MedVAIS. Future priorities are likely to be: primary care, cardiology, encoded cancer checklists, translation of attribute relationships, and supplementation of subsets for the quality assurance. We also implemented the main SNOMED CT translation procurement procedures and signed contracts with suppliers in 2013.

**Affiliate Licensees**
Lithuania currently has 17 Affiliate Licensees. No additional Affiliate Licenses were issued in 2013.

**Representatives**
General Assembly Normantas Ducinskas
Member Forum Martynas Bieliauskas, Kristina Aputyte

**National Release Center**
Lithuanian Library of Medicine
lmb.lt
Malaysia

Strategic Directions
The Ministry of Health (MoH) Malaysia immediately began planning its approach for developing and implementing SNOMED CT after becoming an IHTSDO Member. The decision was made to try and meet the needs of clinicians and health managers interested in using SNOMED CT for clinical and secondary data analysis. There is the belief that providing early results within the first one or two years after adopting SNOMED CT will encourage a high level of buy-in from stakeholders. As a result, MoH proposed the development of two local RefSets, which will be implemented in an EHR environment to create a SNOMED CT coded database for further analysis.

Achievements
Malaysia’s NRC held its first workshop in February 2013, which was attended by a senior representative of IHTSDO. The cardiology and oncology head of service was also present at the workshop, along with respective team members, who jointly made the decision to focus on terminology used in the respective clinical patient registry. The government-owned research and development company MIMOS was also invited due to its interest in ontology and information and communications technology expertise. Based on further discussions, MIMOS offered to develop a proof-of-concept system to enable existing EHR to be coded into the SNOMED CT called Medical Terminologies Localization and Codification (MTLC).

Current projects involve 1) creating opportunities for training staff in authoring SNOMED CT terminology using IHTSDO Workbench; 2) finalizing the cardiology and oncology RefSet for local use; 3) partnering with MIMOS to develop MTLC and verification of data produced; 4) data analysis using the SNOMED CT; and 5) formally establishing an NRC. Future projects will involve distributing the approved RefSets and working with vendors to implement and use SNOMED CT.

Representatives
General Assembly Md. Khadzir Sheikh Ahmad
Member Forum Ismat Mohd Sulaiman, Ahmad Syukri Jamalu-din

National Release Center
Health Informatics Centre, Planning Division, Ministry of Health Malaysia
moh.gov.my

Malta

Strategic Directions
During 2014, the eHealth Office in Malta’s Ministry for Health will continue to evaluate the feasibility of implementing SNOMED CT on a wide basis in government health information systems, with a view to achieving better structuring of personal health data and more standardization in health record keeping. This work is at the proof-of-concept stage.

The national language, Maltese, is in wide and continuous use among the Maltese population. Malta’s second official language, English, remains the standard in health documentation, so there is no plan to translate SNOMED CT into Maltese.

Achievements
During 2013, the eHealth Office continued to work on mapping locally-used health data concepts to SNOMED CT using a mix of controlled vocabularies and free text analysis. The outcome of this project feeds into new information systems currently under development. A subset of SNOMED CT concepts continued to be actively used in the context of the epSOS project, in which Malta has been an active participant.

Affiliate Licensees
Two new Affiliate Licenses were issued in 2013, one to a private organization and another to a private individual. Malta now has four Affiliated Licensees.

Representative
General Assembly Hugo Agius Muscat
Member Forum Hugo Agius Muscat

National Release Center
eHealth Office, Office of the CIO, Ministry for Health
ehealth.gov.mt
The Netherlands

Strategic Directions
Heightening awareness of SNOMED CT remains one of the most important activities of the NRC team. Our direction of focus is the implementation of terminology and code systems and the use of SNOMED CT in particular. Creating cross-maps between SNOMED CT and the Dutch code systems is currently one of the most useful approaches for coping with translation issues. The code systems for billing purposes in the Netherlands will be the first to be mapped to SNOMED CT. The National IT Institute for Healthcare (Nictiz) emphasizes that mapping is only a temporary, in-between step on the way to using SNOMED CT in EHR systems and for generating billing and statistical information.

Achievements
The introduction of SNOMED CT Terminology Explorers in 2013 helped raise awareness inside some domains, which led to the need for more tooling for composing RefSets. Using ART-DECOR open source tooling proved to be successful and it was also used for information and communication standards. The combination of terminology and code systems provides new opportunities for further implementation in the Netherlands.

New Zealand

Strategic Directions
SNOMED CT implementation efforts are presently directed towards emergency care. This year, ambulance officers will begin using an electronic patient report form, i.e. a touch screen application on a tablet computer, to capture SNOMED CT coded clinical impressions and treatment descriptions. A structured care summary will be copied at transfer of care to the hospital emergency department, where new information systems are becoming SNOMED CT enabled, and to the general practitioner. SNOMED CT perfectly supports the fast-paced demands of emergency care and the need for interoperability. With over 400,000 people receiving treatment from ambulance services every year, hospital and community services and the accident compensation and injury prevention industry will face volumes of quality data never before available, and they will want to invest in their own systems to take advantage of this.

Achievements
The National Health IT Board invested in a project at Nelson Hospital to build and test a SNOMED CT RefSet for emergency care. Other emergency departments around the country implementing SNOMED CT will follow this lead.

The NRC does not translate SNOMED CT directly into Dutch, but it does enable users to interface with SNOMED CT in Dutch, in addition to supporting various solutions to accommodate that. Domain experts can add translations to the RefSets they create. The NRC actively supports the mapping of SNOMED CT to other code systems, such as the Dutch version of ICD-10.

Affiliate Licensees
The Netherlands added 14 Affiliate Licensees in 2013, for a current total of 51.

Representatives
General Assembly Lies van Gennip
Member Forum Jos Baptist

National Release Center
National IT Institute for Healthcare
nictiz.nl

The two New Zealand ambulance services agreed on a subset of the emergency care RefSet for coding clinical impressions and ambulance procedures. Work began to create HL7 Clinical Document Architecture templates to represent the ambulance care summary, using SNOMED CT coding.

Affiliate Licensees
Six Affiliate Licenses were issued in 2013, bringing New Zealand's total to 49.

Representatives
General Assembly Stewart Jessamine
Member Forum Tracy Thompson, Alastair Kenworthy

National Release Center
Ministry of Health
health.govt.nz
Poland

**Strategic Directions**
The NRC plans to conduct a tender, select a contractor and translate at least part of SNOMED CT into Polish in 2014.

**Achievements**
We have prepared and collected all of the documents necessary to carry out a smooth translation process.

**Affiliate Licensees**
None

**Representatives**
General Assembly Marcin Węgrzyniak
Member Forum Marta Buraczynska

**National Release Center**
National Centre for Health Information Systems (CSIOZ)
csioz.gov.pl

Singapore

**Strategic Directions**
The Singapore Drug Dictionary (SDD), which is built on the SNOMED CT ontology, is the preferred drug dictionary of the Singapore eHealth ecosystem. It will be implemented in public healthcare institutions for the exchange of information pertaining to ordering, dispensing and purchasing medication. Private healthcare organizations are encouraged to adopt SDD as well, to support medication information exchange.

**Achievements**
Adoption of SNOMED CT is making progress within the public healthcare sector.

**Affiliate Licensees**
Singapore added two new Affiliate Licensees in 2013 for a current total of 36.

**Representatives**
General Assembly Low Cheng Ooi
Member Forum Cheong Yu Chye, Reymond Wilaisono

**National Release Center**
MOH Holdings Pte Ltd
mohh.com.sg
Spain

Strategic Directions
In 2014, Spain’s SNOMED CT goals include development of formal ontologies for clinical safety, deployment of terminology services for the National Health System (NHS) and support for quality efforts regarding e-prescription national nomenclature and RefSets. Also of central importance is the development of new software tools for improving production processes of the Spanish Extension and continued validation of archetypes and terminology binding for modeling EHR components and user interface implementation elements.

Our organization expects considerable improvement and tangible progress concerning the use of SNOMED CT assets within the NHS and the National Health System’s Digital Health Records Project (HCDSNS).

Achievements
2013 activities focused on supporting development of the Spanish Drug Extension and related ontological models. We succeeded in initiating publication of the Extension and ensuring sustainable maintenance. In addition, more than 30 related specific Subsets for different clinical variables within the HCDSNS content models were published. We also completed the Extension for semantic standardization of HCDSNS dataset variables (elements for registry and observable entities). Translation efforts involved the inclusion of new descriptions for more than 1,500 terms in the Spanish of Spain (es-ES) Extension. Ongoing translation work represents a strategic approach to ensuring adequate use and clinical acceptability of SNOMED CT within the NHS.

Affiliate Licenses
In 2013, 105 new Affiliate Licenses were awarded, representing a 38% increase compared to 2012. The current number of Affiliate Licensees is 273, comprising public administrations, vendors, researchers and other individuals.

Representatives
General Assembly Arturo Romero Gutiérrez
Member Forum Gonzalo Marco Cuenca

National Release Center
Ministry of Health, Social Services and Equality msssi.es

Sweden

Strategic Directions
The ongoing formalization of communication with Swedish users of SNOMED CT has meant the establishment of reference groups from different health and social care sectors. One important step to cementing this interaction was the first annual forum for the users of eHealth resources provided by the National Board of Health and Welfare (NBHW), held in March 2014. Over the course of the year, the NRC will mainly focus on user support and training stakeholders.

The NBHW has been commissioned to further develop the decision-making support doctors use to determine appropriate sickness benefits for patients. The project is studying if and how SNOMED CT might be able to play a role in this.

Achievements
The task of developing a national source for reasons for prescribing a medicine, with SNOMED CT serving as the foundation for the terminology, has begun and is expected to continue in 2014. Integration of SNOMED CT concepts into national clinical guidelines published by the NBHW has been initiated, starting with breast cancer care guidelines. Other clinical areas will follow. The project on how to use SNOMED CT in the data reported to national clinical quality registries is ongoing, and the NBHW now has responsibility for providing methodological and training support to the working group, which consists of terminologists from several county councils.

Affiliate Licenses
Sweden has 215 Affiliate Licensees, 40 of which were issued in 2013.

Representatives
General Assembly Anna Adelöf (2013), Henrik Moberg (2014)
Member Forum Lotti Barlow, Erika Ericsson

National Release Center
National Board of Health and Welfare socialstyrelsen.se/nationellehalsa/snomed-ct
**United Kingdom**

**Strategic Directions**
Clinical applications incorporating SNOMED CT continue to be deployed into all healthcare sectors. For example, over three million electronic prescription messages are transacted monthly using SNOMED CT.

Focus for activity in 2014 is as follows:
- Increasing the number of SNOMED CT deployments, with increased use in data extractions for local and national reporting;
- Supporting clinician analysis;
- Enabling data sharing across healthcare organizations to support integrated patient care.

The UKTC is responsible for managing and distributing the UK Edition of SNOMED CT, with additional products and services to support implementation. The UK Clinical Edition is released every six months and UK Drug Extension is released every four weeks. UKTC runs a help desk for user enquiries and an online request portal for new UK Edition concepts and terms.

**Achievements**
Shared electronic patient records remain a strategic milestone. A key enabler for migrating primary care to SNOMED CT is the Read codes to SNOMED CT mapping tables, which the Royal College of General Practitioners and the British Medical Association Joint GP IT Committee have now formally endorsed. Inclusion of SNOMED CT is required in information standards considered for national approval. Webinars introducing SNOMED CT have been delivered to over 250 people from across 12 different countries. Sessions for organizations undertaking implementation, as well as introductory analytics sessions, were held and are an area for further development. Online education continues to be developed, and an up-to-date list is available on our Training, Resources and Forums webpage.

The UK Edition is now available in both RF1 and RF2 formats, with around 75,000 UK clinical concepts and 300,000 UK drugs.

**Affiliate Licenses**
The United Kingdom has 1,500 Affiliated Licensees.

**Representatives**
General Assembly Sally Greenway  
Member Forum Denise Downs

**National Release Center**
The UK Terminology Centre systems.hscic.gov.uk/data/uktc

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**United States of America**

**National Activities**
SNOMED CT is the sole standard for problem lists, one of the required standards for procedures in US government EHR certification criteria for 2014, and the proposed standard for quality measure value sets in several domains.

**Achievements**
In 2013 the US focused on adoption of the 2014 Electronic Health Record (EHR) certification criteria required to achieve Meaningful Use of EHRs and the migration to ICD-10-CM and ICD-10-PCS. The NLM continued providing free access to the required vocabulary standards (including SNOMED CT), applications, and related tools that can be used to meet these criteria. In addition, work continued on promoting clinical and translational usage of standards already adopted for routine healthcare. NLM submitted over 1,200 SNOMED CT change requests to the IHTSDO in 2013 to support these initiatives; roughly 630 were accepted. In 2013 NLM:
- Published for the first time the US Edition of SNOMED CT (composed of the International Release of SNOMED CT and the US Extension to SNOMED CT) as the official source of SNOMED CT for use in US healthcare systems;
- Expanded the available mappings from ICD-9-CM to SNOMED CT (both procedure and diagnosis codes) to support the transition from the use of legacy ICD-9-CM codes to SNOMED CT.

**Affiliate Licenses**
The NLM has 15,860 Unified Medical Language System licensees, of which 12,540 are American and 3,320 are international.

**Representatives**
General Assembly Betsy L. Humphreys  
Member Forum Vivian A. Auld, Steve P. Emrick

**National Release Center**
U.S. National Library of Medicine  
nlm.nih.gov
National Activities
Uruguay is developing an e-health governance initiative called Salud.uy, and implementation of the national EHR project is part of its strategy. One of the initiative’s goals is to make controlled vocabulary available for this project by implementing terminology services.

Uruguay is planning to use, at a minimum, the following SNOMED CT hierarchies: procedures, events and pharmaceutical products. Local codifications will be mapped to the SNOMED CT terminology. This process will help increase familiarity with SNOMED CT and its applications. With regard to the Spanish release, we are identifying and developing tools that allow users to navigate SNOMED CT concepts and to become familiar with the descriptions and relations in the Spanish release. Academics, physicians and researchers are interested in using the terminology.

Finally, Uruguay is heading a regional project sponsored by the Inter-American Development Bank for terminology services.

Achievements
2013 achievements include:
• Agreement document for national distribution of the SNOMED CT releases
• First technical approach to SNOMED CT with the support of Spain’s Ministry of Health
• Awarding of Affiliate Licenses
• Participation in IHTSDO working group meetings, IHTSDO business meetings and the SNOMED CT Implementation Showcase in Washington, DC

Affiliate Licenses
Six Affiliate Licenses were awarded in 2013.

Representatives
General Assembly Jorge Forcella
Member Forum Pablo Orefice, Fernando Portilla

National Release Center
Agesic
agesic.gub.uy

Additional Members

Brunei
National Release Center
Ministry of Health
moh.gov.bn

Czech Republic
National Release Center
Coordination Center for Departmental Medical Information Systems
ksr.zis.cz

Republic of Slovenia
Representative
General Assembly Matic Meglič
Member Forum Matic Meglič

National Release Center
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Slovak Republic
Representative
General Assembly Pavol Rieger

National Release Center
National Health Information Center
nczisk.sk

Before publication in 2014, Portugal and India had become IHTSDO Members.
The financial and business processes of IHTSDO must ensure a sustainable and robust organization capable of responding to stakeholder requirements. The 2013 audit was unanimously approved by the General Assembly on April 30, 2014.

### Income Statement January 1 – December 31, 2013

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<thead>
<tr>
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<tbody>
<tr>
<td>Membership fees</td>
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<td>Voluntary contribution fees</td>
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<td>Other income</td>
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<td>Amortization, SNOMED CT IP</td>
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<td><strong>Expenditures</strong></td>
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<td>Tax on profit/loss for the year</td>
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<td><strong>Profit/Loss for the Year</strong></td>
<td><strong>1,068,722</strong></td>
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Acronyms Used

AMT Australian Medicines Terminology
DICOM Digital Imaging and Communications in Medicine
EHR Electronic Health Records
FP/GP Family Practice/General Practice
GMDNA Global Medical Device Nomenclature Agency
HCDSNS (Spain’s) National Health System’s Digital Health Records Project
HIMSS Health Information and Management Systems Society
HKCTT Hong Kong Clinical Terminology Table
HL7 Health Level Seven
ICD International Classification of Diseases
ICF International Classification of Functioning, Disability and Health
ICN International Council of Nursing
ICNP International Classification of Nursing Practice
ICPC-2 International Classification in Primary Care-2
IHE Integrating the Healthcare Enterprise
IHTSDO International Health Terminology Standards Development Organisation
I&I Implementation and Innovation
Infoway Request Management System
ISO International Organization for Standardization
ISO TC International Organization for Standardization Technical Committee
JAG (IHTSDO/WHO) Joint Advisory Group
JCG (IHTSDO/WHO) Joint Coordinating Group
LOINC Logical Observation Identifiers Names and Codes
MIMOS (no longer an acronym; a Malaysian government-owned research and development company)
MOH or MoH (depending on country preference) Ministry of Health
MTLC (Malaysian) Medical Terminologies Localization and Codification
NBHW (Swedish) National Board of Health and Welfare
NEHTA (Australian) National e-Health Transition Authority
NHS (Spain’s) National Health System
Nictiz (Netherlands) National IT Institute for Healthcare
NLM U.S. National Library of Medicine
NRC National Release Center
OTF Open Tooling Framework
QA Quality Assurance
QAC Quality Assurance Committee
QMS Quality Management System
RefSet Reference Set
RF Release Format
RFC Request for Change
SC (Canada Health Infoway) Standards Collaborative
SDD Singapore Drug Dictionary
SIA SNOMED CT Implementation Advisor
SIG Special Interest Group
SIRS SNOMED CT International Request Submission System
UKTC UK Terminology Centre
URI Uniform Resource Identifier
WHO World Health Organization
Wonca World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians
List of Contacts

IHTSDO Management Board

John Van Beek, Chair  
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Jeremy Thorp  
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Andrew M. Wiesenthal, MD, SM  
Julian Zelingher, MD, MSc, MPH

NICTIZ, The Netherlands  
Health and Social Care Information Centre, UK  
National E-Health Transition Authority, Australia  
Ministry of Health, Social Services and Equality, Spain  
NHS, England  
CSC, UK  
PumpCo, UK  
Health and Social Care Information Centre, UK  
National Board of e-Health, Denmark  
Deloitte Consulting, USA  
Clalit Health Services, Israel

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David Markwell  
Jane Millar  
Kulvip Nijjar  
Kent Spackman  
Robert Turnbull  
Liara Tutina

Chief Executive Officer  
Customer Relations Lead EMEA  
Head of Applications and Architecture  
Head of Human Resources  
Head of Content  
Head of Education and Implementation Facilitation  
Head of Collaboration  
Head of Finance  
Head of Terminology  
Head of Delivery  
Customer Relations Lead AsiaPac