

# **CH EPR FHIR and Cross Community Access with FHIR API**

Workshop

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## 2015 - founder ahdis

2003 - 2014 visionary AG, docbox

2002 - 2003 Ecofin Research & Consulting  
AG

1994 - 2001 SPEAG

## 2016 - Dozent

### BFH Bern, ZHAW Winterthur

Medizininformatik, Interoperabilität

## 1996 - Dipl. Inf. ETH

### ETH Zürich

HL7 FHIR® Proficient, 2023

Certified Professional - IHE Foundations,  
2022

Certified HL7 CDA Specialist, 2015

NDK eHealthcare, Nottwil, 2009

## HL7 Switzerland

Member of the board

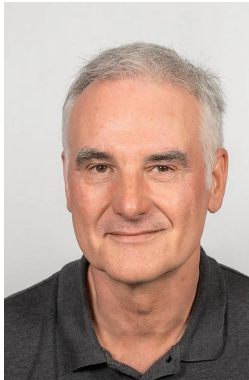
## IHE Suisse

Member since 2015

## IHE International

ITI Technical Committee Co-Chair

**Martin Smock**



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## **now - FOPH**

Working for eHealth Suisse and the FOPH in various areas of technical architecture and solutions

## **2020 - Health Solutions**

Positions at Swisscom and Post Health

## **2013 - Logistics**

Startups in the area of planning and scheduling for logistics and manufacturing

## **1999 - Universität GHS Essen**

Dr. rer. nat theoretische Physik

## **IHE Suisse**

Member of the board

## **IHE International**

ITI Technical Committee

## Agenda Workshop

- Introduction/ Welcome
- CH EPR FHIR
- Federating over communities
- Discussion

## CH EPR FHIR

FHIR API for the EPR


- Contemporary alternative for primary systems and portals to connect to the EPR
- FHIR API for Web and mobile applications based on IHE mobile Profiles (MHD, PIXm) als alternative for the IHE XDS / HL7v3 based interfaces
- Addition to the EPR ordonnances scheduled to 2025
- Usual 1 year time frame for communities to implement the specifications
- *Note:*
  - *OpenID Connect will be mandatory in Annex 8*
  - *Direct integration of native mobile apps will be legally allowed no earlier than 2028*


<https://fhir.ch/ig/ch-epr-fhir/index.html>

# CH EPR FHIR FHIR Implementation Guide

<https://fhir.ch/ig/ch-epr-fhir/index.html>

**ehealthsuisse**  
Kompetenz- und Koordinationsstelle  
von Bund und Kantonen

**CH EPR FHIR (R4)**  
4.0.1-ballot - ballot 



Home Volume 1 ▾ Volume 2 ▾ Appendix ▾ Artifacts

Table of Contents Home

This page is part of the CH EPR FHIR (R4) (v4.0.1-ballot: DSTU 4 Ballot 2) based on FHIR (HL7® FHIR® Standard) R4. This is the current published version. For a full list of available versions, see the [Directory of published versions](#)

## 1 Home

Official URL: <a href="http://fhir.ch/ig/ch-epr-fhir/ImplementationGuide/ch.fhir.ig.ch-epr-fhir">http://fhir.ch/ig/ch-epr-fhir/ImplementationGuide/ch.fhir.ig.ch-epr-fhir</a>	Version: 4.0.1-ballot
Active as of 2024-05-16	Computable Name: CHEprFhir
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### 1.1 Introduction

The national extensions documented in this implementation guide shall be used in conjunction with the definitions of integration profiles, actors and transactions provided in Volumes 1 through 3 of the IHE IT Infrastructure Technical Framework.

This implementation guide with national extensions of IHE integration profiles was authored in order to fulfil the Swiss regulations of the Ordinance on the Electronic Patient Record (EPRO, SR 816.11). The EPRO and the EPRO-DFI are published in Official Compilation of Federal Legislation (AS) (available in [German](#), [French](#) and [Italian](#)).

- Introduction
- Conformance Expectations
- Overview
- IP Statements
- Cross Version Analysis
- Dependency Table
- Globals Table

**STU Note**

This implementation guide is under an informative ballot by [HL7 Switzerland](#) until September 30th, 2024 midnight. Please add your feedback via the 'Propose a change'-link in the footer on the page where you have comments.

The following items are under current development:

- Cross community access [#92](#)
- mCSD additional transaction for Feed [#158](#)
- Audit Examples together with IUA and adapted to EPR requirements [#186](#)

[Significant changes, open and closed issues.](#)

**Download:** You can download this implementation guide in [NPM format](#) from [here](#).

### 1.2 Conformance Expectations

The key words *MUST*, *MUST NOT*, *REQUIRED*, *SHALL*, *SHALL NOT*, *SHOULD*, *SHOULD NOT*, *RECOMMENDED*, *MAY*, and *OPTIONAL* in this document are to be interpreted as described in [\[RFC2119\]](#).

This implementation guide uses **Must Support** in StructureDefinitions with the definition found in [Appendix Z](#). This is equivalent to the IHE use of **R2** as defined in [Appendix Z](#).

## **CH EPR FHIR**

### Use Cases

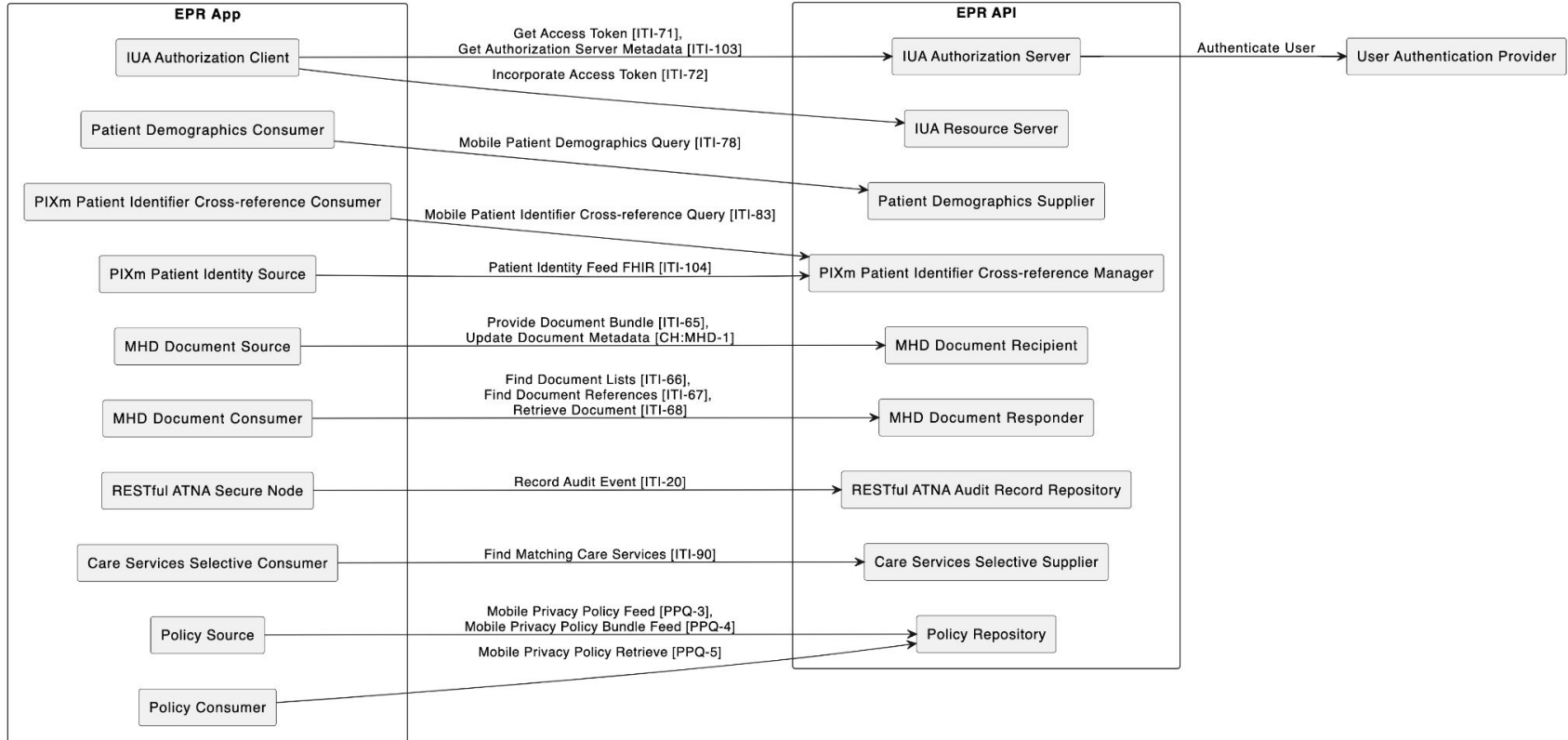
The scope of this extension covers all document management use cases:

1. Client authentication and authorization
2. User authentication and authorization
3. Read data and documents from the EPR
4. Write data and documents to the EPR
5. Manage patient privacy policies
6. Read and write health provider data
7. Read and write ATNA Audit Trails

<https://fhir.ch/ig/ch-epr-fhir/index.html>

# CH EPR FHIR - IHE Actors and Transactions

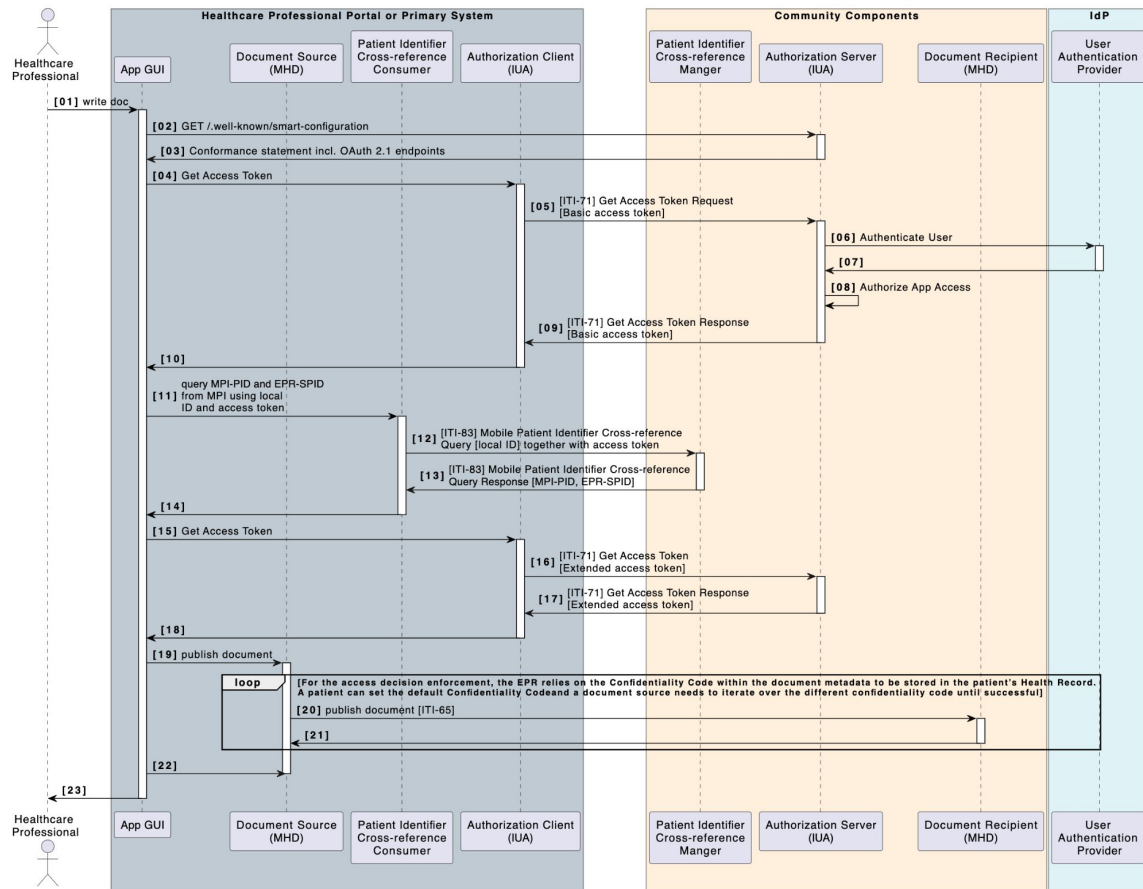
Profiles, actors and transactions covered in this national extension





# CH EPR FHIR Use Cases

## 4.6.3 User Access from an integrated Primary System to publish documents



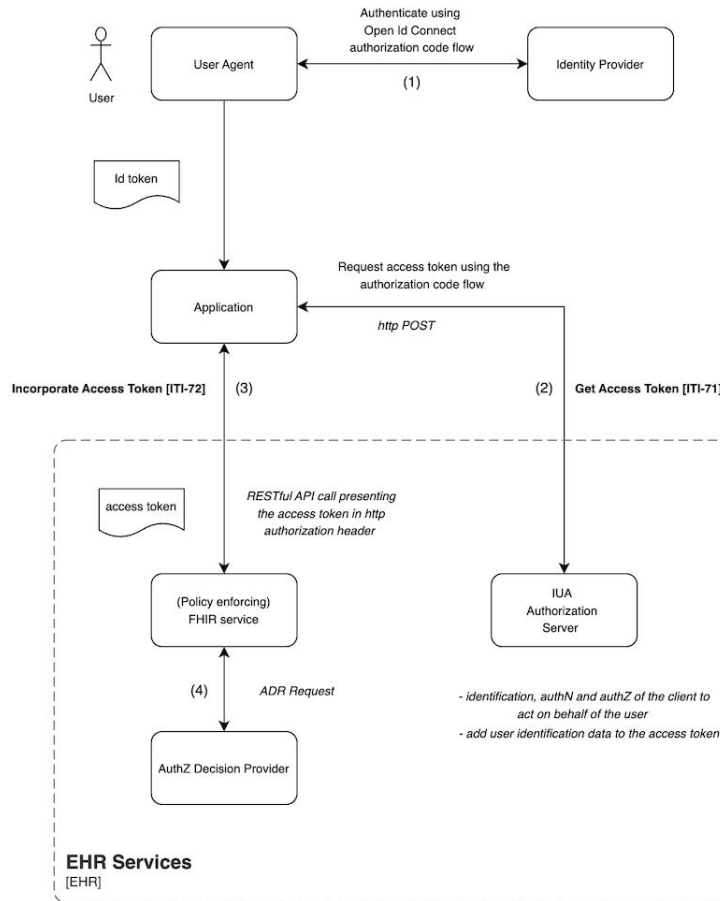
## IUA

IUA covers the following use cases in the EPR:

- OAuth based client identification, authentication and authorization for web and mobile apps
- Identification, authentication and authorization of SMART on FHIR components
- Conveying user identity attributes in the access token required for policy enforcement
- Conveying attributes of technical user required for policy enforcement (added in 2024)

<https://fhir.ch/ig/ch-epr-fhir/iti-ia.html>

# IUA



<https://fhir.ch/ig/ch-epr-fhir/iti-ia.html>

# IUA

Analogy to XDS and XUA:

- The IUA authorization server covers several roles formerly splitted in XDS with XUA
  - Identify and authenticate the client, which in XDS is done via mTLS node authentication
  - Provide an access token enriched with the user identification data required for AuthZ, which in XUA is done by the User Assertion Provider actor
- The IUA authorization server adds the possibility for the user to restrict client authorization to specific scopes

<https://fhir.ch/ig/ch-epr-fhir/iti-iaa.html>



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### 3.3 Mobile Patient Demographics Query [ITI-78]

This section describes the national extension for the Swiss EPR to the [Mobile Patient Demographics Query \[ITI-78\]](#) transaction defined in the IUA profile published in the IHE IT Infrastructure Technical Framework Trial Implementation "Patient Demographics Query for mobile".

- Scope
- Actor Roles
- Referenced Standards
- Messages
- Security Consideration

#### 3.3.1 Scope

The Mobile Patient Demographics Query is used by an app in the Swiss EPR to query with demographics parameters for a patient participating in the Swiss EPR.

#### 3.3.2 Actor Roles

**Actor:** Patient Demographics Consumer

**Role:** Requests a list of patients matching the supplied set of demographics criteria (example: ID or Name) from the Patient Demographics Supplier. The Patient Demographics Consumer populates its attributes with demographic information received from the Patient Demographics Supplier.

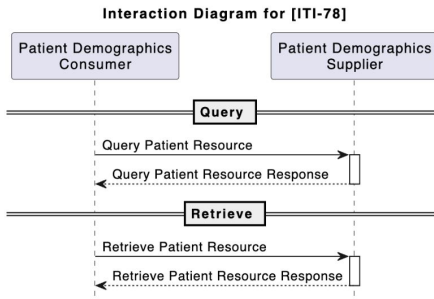
**Actor:** Patient Demographics Supplier

**Role:** Returns demographic information for all patients matching the demographics criteria provided by the Patient Demographics Consumer

#### 3.3.3 Referenced Standards

1. [Patient Demographics Query for mobile \(PDQm\) Rev. 2.4.0](#)
2. This PDQm Profile is based on Release 4 of the emerging [HL7® FHIR®](#) standard.

#### 3.3.4 Messages



- needs IUA basic access token
- max 5 query results

# PDQm

## Mobile Patient Demographics Query [ITI-78]

<https://fhir.ch/ig/ch-epr-fhir/iti-78.html>

### 3.3.4.1.3 Message Example

Query for a patient with name Muster and

```
GET [base]/Patient?name=Muster&bi
Accept: application/fhir+json
traceparent: 00-0af7651916cd43dd8
```

Example response to above query

Tracecontext for all transactions

<https://fhir.ch/ig/ch-epr-fhir/iti-78.html>

```
{
  "resourceType": "Bundle",
  "id": "PDQm-QueryResponse",
  "meta": {
    "profile": [
      "http://fhir.ch/ig/ch-epr-fhir/StructureDefinition/ch-pdqm-querypatientresourcereponse"
    ]
  },
  "type": "searchset",
  "total": 1,
  "link": [
    {
      "relation": "self",
      "url": "http://example.com/fhir/Patient?birthdate=1995-01-27&name=Muster"
    }
  ],
  "entry": [
    {
      "fullUrl": "http://example.com/fhir/Patient/FranzMuster",
      "resource": {
        "resourceType": "Patient",
        "id": "FranzMuster",
        "text": {
          "status": "generated",
          "div": "<div xmlns='http://www.w3.org/1999/xhtml'><a name='Patient_FranzMuster'> <
        }
      },
      "identifier": [
        {
          "system": "urn:oid:2.999.5.6.7",
          "value": "value of MPI-PID"
        }
      ],
      {
        "type": {
          "coding": [
            {
              "system": "http://terminology.hl7.org/CodeSystem/v2-0203",
              "code": "MR"
            }
          ]
        }
      },
      "system": "urn:oid:2.16.756.888888.3.1",
      "value": "8734"
    }
  ]
}
```

# PIXm

## [ITI-83] Mobile Patient

## [ITI-104] Patient Identity

## Feed FHIR

<https://fhir.ch/ig/ch-epr-fhir/iti-83.html>  
<https://fhir.ch/ig/ch-epr-fhir/iti-104.html>



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### 3.4 Mobile Patient Identifier Cross-reference Query [ITI-83]

This section describes the national extension for the Swiss EPR to the [Mobile Patient Identifier Cross-reference Query \[ITI-83\]](#) transaction defined in the IUA profile published in the IHE IT Infrastructure Technical Framework Trial Implementation "Patient Identifier Cross-referencing for mobile".

- Scope
- Actor Roles
- Referenced Standards
- Messages
- Security Consideration

#### 3.4.1 Scope

The Mobile Patient Identifier Cross-reference Query is used by an app in the Swiss EPR to query with the local identifier the MPI and get the corresponding MPI-PID and the EPR-SPID identifier for the patient.

#### 3.4.2 Actor Roles

**Actor:** Patient Identifier Cross-reference Consumer

**Role:** Queries the Patient Identifier Cross-reference Manager for the MPI-PID and EPR-SPID.

**Actor:** Patient Identifier Cross-reference Manager

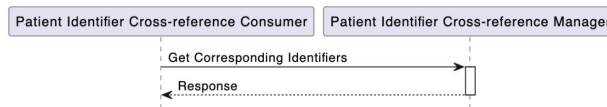
**Role:** Resolves the local ID sent with the request to the MPI-PID and EPR-SPID.

#### 3.4.3 Referenced Standards

1. [Patient Identifier Cross-referencing for mobile \(PIXm\)](#), Rev. 3.0.3 
2. This PIXm Profile is based on Release 4 of the emerging [HL7® FHIR®](#)  standard.

#### 3.4.4 Messages

##### Interaction Diagram for [ITI-83]



##### 3.4.4.1 Get Corresponding Identifiers message

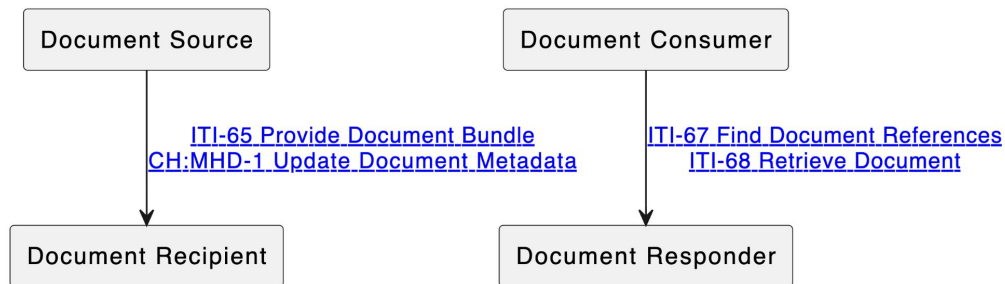
###### 3.4.4.1.1 Message Semantics

The message semantics is the same as defined in [2:3.83.4.1.2](#)  with a restriction on the targetSystem query Parameter:

```
GET [base]/Patient/$ihe-pix?sourceIdentifier=[token]&targetSystem=[uri]{&_format=[token]}
```

# MHD

## Mobile Health Documents

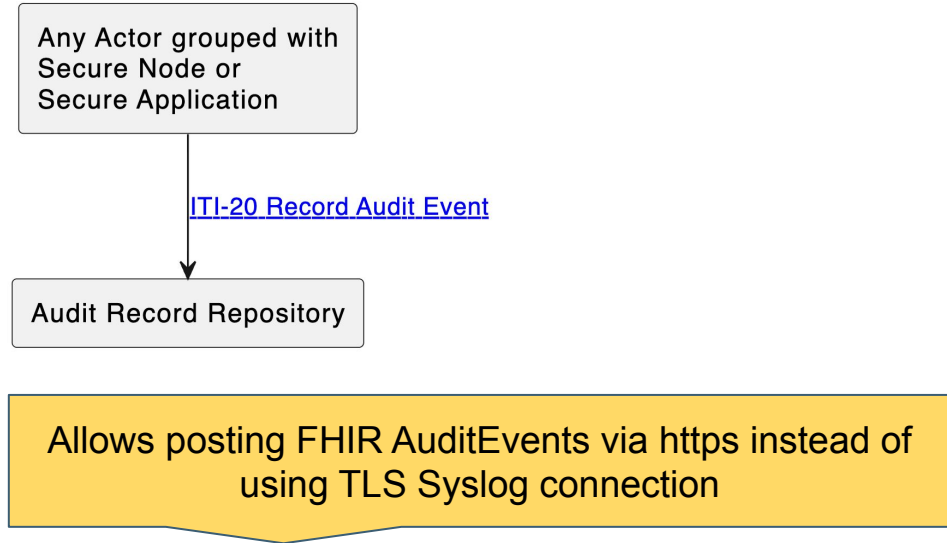


- No more grouping with XDS on FHIR, but requires comprehensive metadata
- National Extension: Update Document Metadata



# RESTFuI ATNA

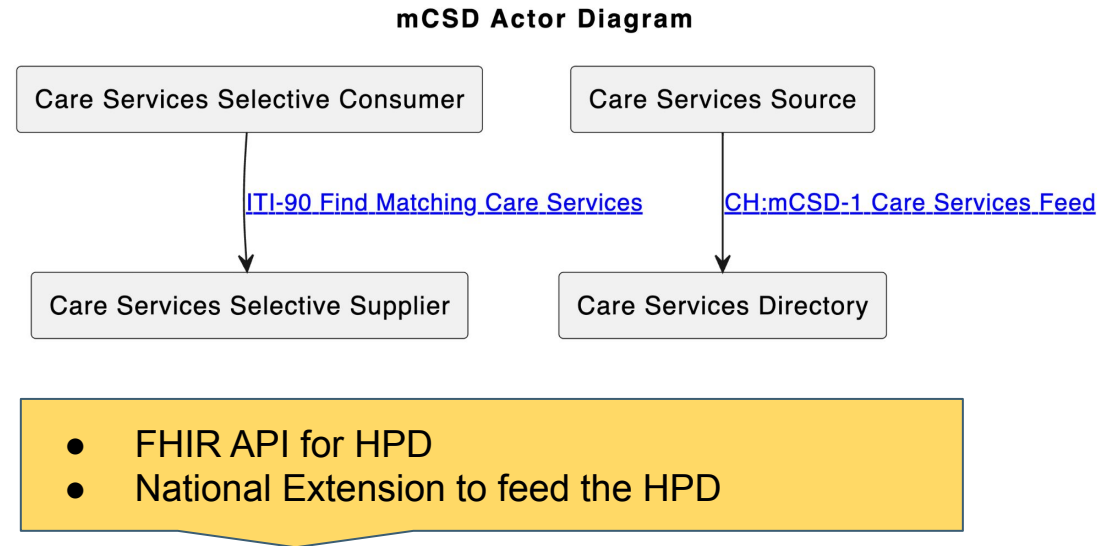
Query and Feed supplement



<https://build.fhir.org/ig/ehealthsuisse/ch-epr-fhir/iti-restful-atna.html>

# mCSD

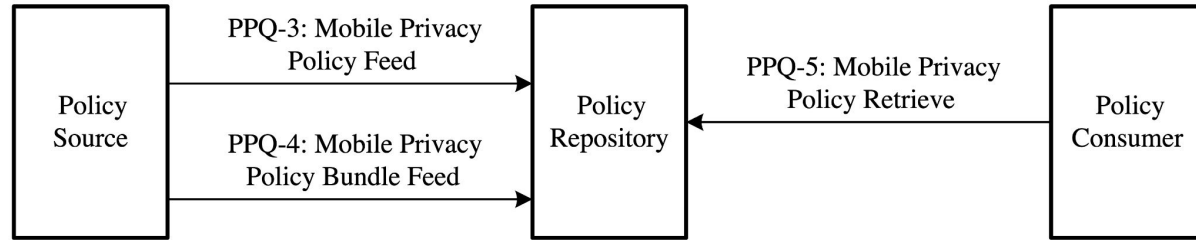
## Mobile Care Services Discovery



<https://build.fhir.org/ig/ehealthswiss/ch-epr-fhir/iti-mcsd.html>

## CH:PPQm

Privacy Policy Query for Mobile



PPQm integrated into CH EPR FHIR

## CH EPR FHIR

Out of scope

- IUA and MHD: Image Sources as technical user [#177](#)

<https://fhir.ch/ig/ch-epr-fhir/index.html>

# CH EPR FHIR

## Open issues

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## Agenda Workshop

- Federating over communities

## Federation

- FHIR core framework does not explicitly address the challenge of cross community communication
- Thus there are several possible solutions how to manage access to documents in a cross community environment like the EPR

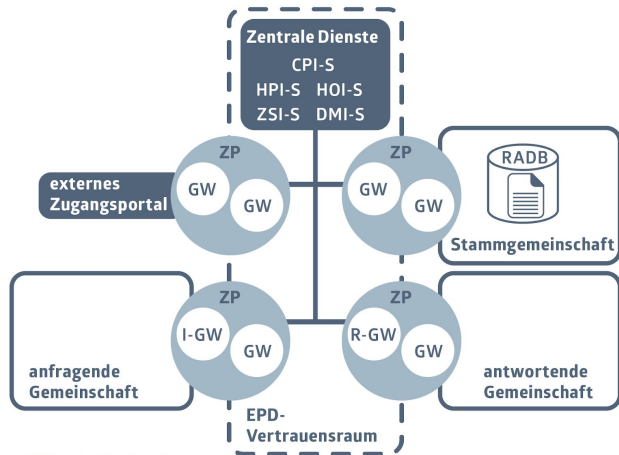
<https://fhir.ch/ig/ch-epr-fhir/iti-iaa.html>

## Federation

- In a cross community scenario the challenge is to make the documents available for requesting clients connected to a single community only!
- Since remote Document Responder actors respond the remote URL of the document, which is typically not accessible by the clients Document Consumer actor, since this would require the client to be registered in all remote communities.



# Cross Community Access with FHIR API



A) Every community offers a FHIR API and a client queries all communities

... too complicated, EPR App or primary system should not need to handle multiple communities

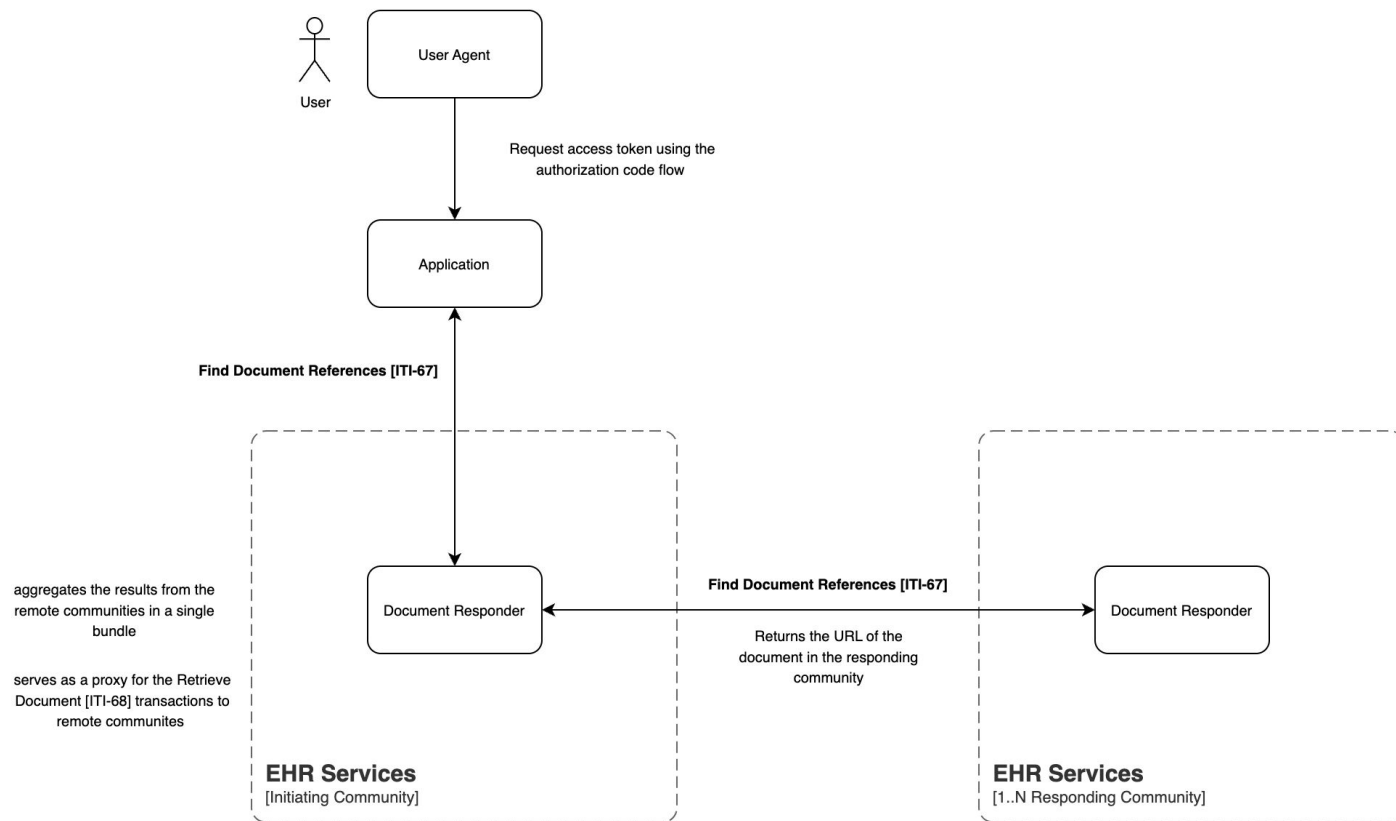
B) Community aggregates query using IHE XC (Cross Community) Profiles as of today

... first attempt in earlier CH EPR mHealth version, challenge IUA (OAuth) / XUA (SAML2) and limited to documents

C) Community aggregates, needs FHIR API endpoints from other communities

FHIR API for Client the same for all FHIR Resources  
=> FHIR Multidomain

# Federation

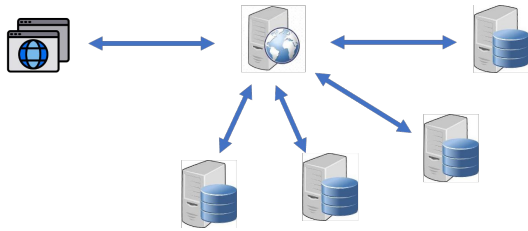


## HL7 FHIR Multi-domain HIE Architecture

- Gemini-Project (Joint IHE und HL7 International Initiative)
- Project Kickoff: Monday May 8, 2023 at WGM+
- Konsistente Usage of the FHIR-API in a scenario with multiple domains
- Zulip Stream:

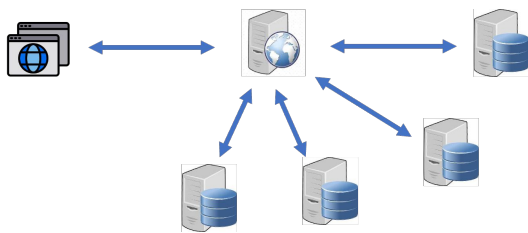
<https://chat.fhir.org/#narrow/stream/428828-Multi-domain-environments>

## Intermediary Pattern



- Authenticating the user
- Combining the search results
- Managing Search Synchronisation
- Routing the follow up queries to the correct server

## Intermediary Pattern



- How to implement intermediary?
  - FHIR Gateway
- or
  - Reverse Proxy with HTTP Forward Header?

(limitation for resource access, no aggregation support)

## **Workshop**

Open Discussion about experiences with FHIR API over multiple domains.

**Q & A**



## Contact



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