Speaker: SNOMED Promises to Change HIM Practice

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by Kathy Brouch, RHIA, CCS

How will SNOMED CT change the way health information is managed? An educational session captured the basic concepts that HIM professionals need to know.

It's important to understand the Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT) because it is increasingly being used globally in electronic health records, said Ellen Ryske, MBA, director of operations at SNOMED International.

During "How SNOMED CT Will Affect Health Information Management," Ryske emphasized that HIM professionals need to become part of the adoption of SNOMED CT in their organizations. She challenged her listeners to add clinical terminology-including SNOMED CT-expertise to their skill sets.

SNOMED CT Elements and Components

SNOMED has three key elements, Ryske said: concepts, descriptions, and relationships. Concepts are a unit of thought where a unique identifier has been assigned; they are the foundation of SNOMED CT. Examples include findings, diseases, substances, body structure, and social context. Descriptions are the terms or text for the concept, which has a unique fully specified name, preferred term or the name in common use, and optional synonym(s). Hierarchies relationships organize concepts, whereas role or attribute relationships link concepts.

Additional SNOMED CT components include subsets, cross mappings, a developer's toolkit, and technical and user documentation. Currently available mappings include SNOMED to ICD-9-CM, ICD-10, and ICD-O. A user's group meets yearly to learn about new applications relating to SNOMED CT and to share ideas and implementation experiences.

Putting SNOMED CT into Perspective

Every concept has its own identifier. Ryske pointed out that concept identifiers are unique codes that will not change. Therefore, if a SNOMED code is entered into a patient record, the meaning is "future proof." The codes do not have embedded meaning and digit restrictions. As a result, even if the knowledge about a concept changes, the SNOMED code remains the same.

Ryske also noted that in a concept-based terminology, each concept represents a unit of meaning that has one or more language terms that can describe the concept. This allows flexibility of expression and language to adapt to real-life use.

She also explained the use of SNOMED CT and existing coding schemes: "Classification schemes are used by management for administrative services, while a clinical terminology is used by clinicians for patient care." Therefore, Ryske added, it is important to remember that a classification by nature takes a certain portion of information about the healthcare encounter and collapses it into one or just a few codes. With a clinical terminology, the full description of the clinical circumstances of the healthcare situation is coded.

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