

IHE-RO HIS Committee Conference Call

May 08, 2018 – 11:00 am EST

Conflict of Interest Statement

The AAPM relies heavily on the volunteer efforts of its Members and friends to conduct the business of the Association. In certain roles, volunteers will from time to time have access to sensitive information that must be held confidential, or may be in a position to advocate for policy that could influence the business or professional affairs of others. It is expected that volunteers will at all times hold the best interests of the AAPM as paramount while doing AAPM-related work. Any situation in which a volunteer has a real or perceived obligation, loyalty or personal interest that is plausibly in conflict with the interests of the AAPM shall be formally disclosed in advance or as soon as it arises. While the existence of a real or perceived conflict of interest must be disclosed, it does not necessarily disqualify a volunteer from service. A volunteer in a conflicted situation should consider recusing him/herself from part or all of an activity so as to not cast doubt on the credibility of the AAPM work product. Intentional abuse of a volunteer position within the AAPM for the benefit of the volunteer or any third party is unacceptable and subject to sanctions as stipulated in the [AAPM's Code of Ethics](#).

IHE-RO HIS Committee Leadership

Rishabh Kapoor

Attendance:

Scott Hadley	Ulrich Busch	Rishabh Kapoor	Harold Beunk	Jeff West
Jill Moton	Mark Phillips			

Points Discussed:

- Reviewed the minutes from the IHE-RO TC meeting in Feb.
- Radiation Dose Element Standardization:
 - o Scott reviewed the responses from the vendors and academic hospitals on the dose elements that are most useful to be shared from the RO-IS to HIS. The google sheet with the responses was shared with this group.
 - o Scott will update the group on the topic at our next call.
- Discussion on the cancer staging systems and the use of defined codes as opposed to free text. Jeff will forward the codes to group for consideration.
- The prescription message content does not handle multiple treatment sites. Note for Tucker to create the treatment site sequence which can contain multiple treatment sites and prescription sequence.
- Discussion to review the ICD-O and ICD -10 codes for treatment site definition. Currently it is listed as a free-text element but the committee recommended that it should be a universally accepted coded element.
- Review the draft profile document based on the TC minutes at our next call in June.

Next call: June 12, 2018 at 11:00 AM EDT.