AWMF Delegiertenkonferenz

Frankfurt, 15. November 2014

11. Revision der ICD

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Im Geschäftsbereich des
Bundesministerium
für Gesundheit

11. Revision der ICD

1. Ziele der 11. Revision der ICD
2. Organisation des Revisionsprozess
3. Architektur der ICD-11
4. Aktueller Stand ICD-11 (Betaversion)
5. Nächste Schritte, Beteiligung am Revisionsprozess und Zeitplan

11. Revision der ICD

Ziele

1. Kohärente Klassifikation für unterschiedliche Anwendungsbereiche
2. Internationaler Standard für Wissenschaft, Kommunikation und Information in der Medizin
3. Integration in IT-Systemumgebungen, heute und in Zukunft

Organisation des Revisionsprozesses

- Entwicklung unter drei Hauptaspekten
  - Inhaltlich (medizinisch-wissenschaftlich)
  - Strukturell (klassifikatorisch)
  - Informationstechnologisch (konzeptionell)
- Einbeziehung internationaler Expertise
  - Medizinische Fachgesellschaften, Organisationen und Interessenverbänden
  - Medizininformatik und Systementwicklung
  - Public Health, Quality and Patient Savety, Primary Care etc.
- Einbeziehung der *interessierten Öffentlichkeit*
  - Anwender aus den unterschiedlichsten Bereichen

Classifications

Family of International Classifications

Family of International Classifications network

Classification of Diseases (ICD)

Classification of Functioning, Disability and Health (ICF)

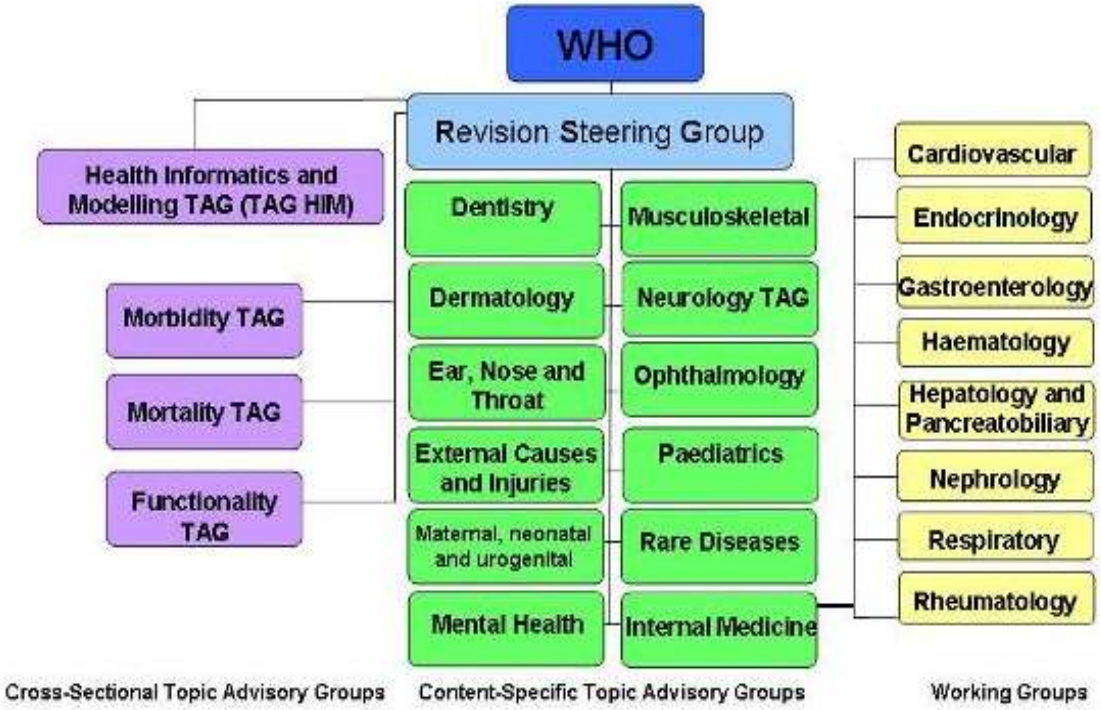
Classification of Health Interventions (ICHI)

Frequently asked questions

Revision Steering Group

Share Print

ICD Revision Organizational Structure

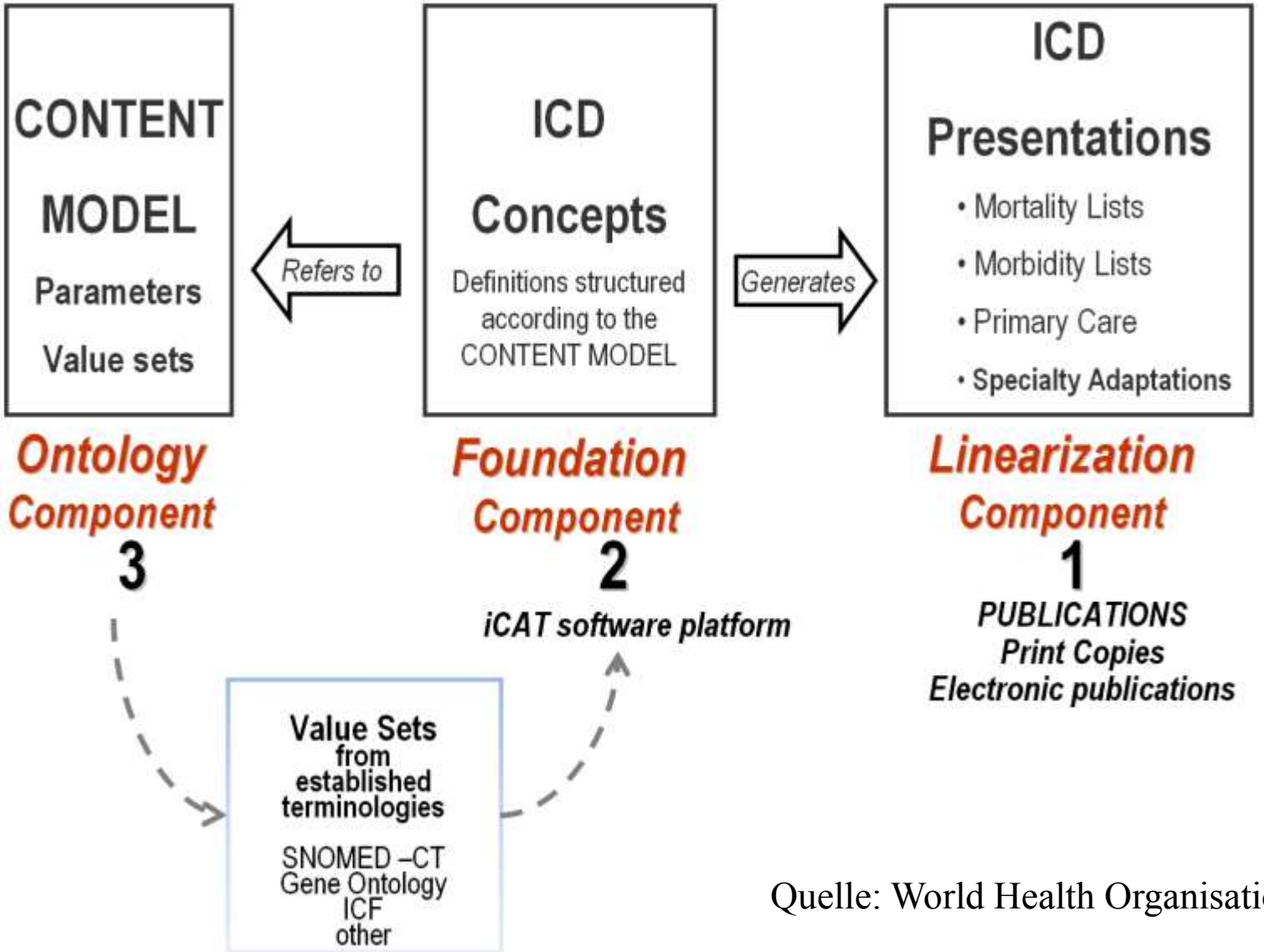


Organisation des Revisionsprozesses

ICD-11 Revision Homepage

https://sites.google.com/site/icd11revision/home

Architektur der ICD-11



Quelle: World Health Organisation (WHO)

Architektur der ICD-11

Foundation Component

- Enthält alle Entitäten zu Krankheiten, Störungen und sonstige Konzepte
  - **Content Modell** legt die Struktur der Entitäten fest
  - **Verlinkungen** zu anderen Begriffssystemen
- Bildet die Beziehungen zwischen den Entitäten ab
  - **Logisches Netzwerk** von Konzepten
  - Child-Entitäten können **ein** oder **mehrere** Parent-Entitäten aufweisen (sog. **Multi-Parenting**)

➢ WHO: Repräsentiert das gesamte ***Universum*** der ICD

Datei Bearbeiten Ansicht Chronik Lesezeichen Extras Hilfe

ICD-11 Beta Draft

apps.who.int/classifications/icd11/browse/f/en

ICD-11 Beta Draft (Foundation)

[Log In]

Last Update: Nov 13

Search [Advanced Search] Foundation Linearizations Contributions Info

- ICD-11 Beta Draft
  - Infectious diseases
  - Neoplasms
  - Diseases of the blood and blood-forming organs
  - Disorders of the immune system
  - Endocrine, nutritional and metabolic diseases
  - Conditions related to sexual health
  - Mental and behavioural disorders
  - Sleep-wake disorders
  - Diseases of the nervous system
  - Diseases of the eye and adnexa
  - Diseases of the ear and mastoid process
  - Diseases of the circulatory system
  - Diseases of the respiratory system
  - Diseases of the digestive system
  - Diseases of the skin
  - Diseases of the musculoskeletal system and connective tissue
  - Diseases of the genitourinary system
  - Pregnancy, childbirth and the puerperium
  - Certain conditions originating in the perinatal and neonatal period
  - Developmental anomalies
  - Symptoms, signs, clinical forms, and abnormal clinical and laboratory findings, not elsewhere classified
  - Injury, poisoning and certain other consequences of external causes
  - External causes of morbidity and mortality
  - Factors influencing health status and contact with health services
  - Codes for special purposes
  - Extension Codes
  - Traditional Medicine conditions - Module I (Note: This is a provisional title for ICD-11 Beta Phase)

ICD-11 Beta Draft

Welcome to the ICD-11 Browser

You can browse the ICD-11 proposed content here

If you wish to participate in the Beta Phase please register or sign-in here. Registering will provide you additional functionality such as accssing print materials, commenting, making change proposals, receiving notifications, etc.

Caveats

ICD-11 Beta draft is:

- **NOT FINAL**
- updated on a daily basis
- It is **not approved** by WHO
- **NOT TO BE USED** for CODING except for agreed FIELD TRIALS

Related Information

More information on ICD-11 Beta Phase

What to expect, when and how?

Known concerns about the ICD-11 Beta Phase

For more information about how to use the ICD-11 Browser, please see the User Guide

For more questions, please contact icd@who.int

Office

Datei Bearbeiten Ansicht Chronik Lesezeichen Extras Hilfe

ICD-11 Beta Draft

apps.who.int/classifications/icd11/browse/f/en#/http://id.who.int/icd/entity/542147910

ICD-11 Beta Draft (Foundation)

[Log In]

Last Update: Nov 13

Search [Advanced Search]

Foundation | Linearizations | Contributions | Info

- Malignant neoplasm of pancreas
  - Adenocarcinoma of pancreas
    - Ductal adenocarcinoma of pancreas
    - Acinar cell carcinoma of pancreas
    - Mixed acinar-ductal carcinoma of pancreas
    - Mixed acinar-neuroendocrine-ductal carcinoma of pancreas
    - Mixed ductal-neuroendocrine carcinoma of pancreatic
    - Mucinous cystic neoplasm with an associated invasive carcinoma of pancreas
    - Pancreatoblastoma
    - Serous cystadenocarcinoma of pancreas
    - Solid-pseudopapillary neoplasms of pancreas
  - Neuroendocrine neoplasms of pancreas
    - Neuroendocrine tumours of pancreas
    - Neuroendocrine carcinoma of pancreas
    - Insulinoma
    - Glucagonoma
    - Gastrinoma
    - VIPoma
    - Somatostatinoma
    - Other neuroendocrine tumour of pancreas
- Malignant neoplasms of other and ill-defined digestive organs
- Malignant neoplasms of respiratory and intrathoracic organs
- Malignant neoplasms of skin
- Malignant neoplasms of peripheral nerves and autonomic nervous

Malignant neoplasm of pancreas

Parent(s)

- Malignant neoplasms of digestive organs
- Neoplasms of pancreas

ICD-10 : C25

Definition

A primary or metastatic malignant tumor involving the pancreas. Representative examples include carcinoma and lymphoma.

Narrower Terms

- Carcinoma of islet cell of pancreas
- Malignant tumour, islet cell of pancreas

Body Site

- Entire pancreas (body structure)
- Pancreatic structure (body structure)

Causal Mechanisms

- Malignant neoplasm, primary (morphologic abnormality)
- Malignant neoplastic disease (disorder)

Etiology Type

- Neoplastic disease (disorder)

Architektur der ICD-11

Linearizations

- Vollständige Teilmenge der Foundation Component für einen spezifischen Anwendungsfall (**use case**)
- Alle Entitäten (**stem codes**) sind klar gegeneinander abgrenzbar (**mutually exclusive**)
- Jede Entität hat **eine** originäre Parent-Entität, kann aber an verschiedenen Stellen angezeigt werden

➢ *Stellt eine **hierarchische*** Klassifikation dar

Architektur der ICD-11

- **Prä-Koordination:** So wenig wie möglich, soviel wie nötig
  - V.a. für die internationale unikausale Mortalitätskodierung (Grundleiden bei Todesfällen)
  - Fortschreibung von Zeitreihenanalysen zur Mortalitätsstatistik

- **Post-Koordination:** zusätzliche Spezifität, wenn nötig
  - V.a. für die Morbiditätskodierung
  - Kombination mehrerer Primärkodes
  - Kombination mit den Erweiterungskodes des sog. ***X-Chapters*** (e**X**tension Codes)

➢ ***Joint Linearization for Mortality and Morbidity Statistics (JLMMS)***

Datei Bearbeiten Ansicht Chronik Lesezeichen Extras Hilfe

ICD-11 Beta Draft - Joint Li...

apps.who.int/classifications/icd11/browse/l-m/en#/http%3a%2f%2fid.who.int%2ficd%2fentity%2f1663659989

ICD-11 Beta Draft (Joint Linearization for Mortality and Morbidity Statistics)

[Log In]

Last Update: Nov 13

Search [Advanced Search] Foundation Linearizations Contributions Info

- Malignant neoplasms of digestive organs
  - 2C80 Malignant neoplasms of oesophagus
  - 2C81 Malignant neoplasms of oesophagogastric junction
  - 2C82 Malignant neoplasms of stomach
  - 2C83 Malignant neoplasms of duodenum
  - 2C84 Malignant neoplasms of jejunum and ileum
  - 2C85 Malignant neoplasms of appendix
  - 2C86 Malignant neoplasms of colon
  - 2C87 Malignant neoplasms of rectosigmoid junction
  - 2C88 Malignant neoplasms of rectum
  - 2C89 Malignant neoplasms of anus and anal canal
  - Malignant neoplasms of liver and intrahepatic bile ducts
  - 2D00 Malignant neoplasm of gallbladder
  - 2D01 Malignant neoplasm of perihilar bile duct
  - 2D02 Malignant neoplasm of biliary tract, cystic duct
  - 2D03 Malignant neoplasm of biliary tract, distal bile duct
  - 2D04 Malignant neoplasm of ampulla of Vater
  - 2D05 Malignant neoplasms of other and unspecified parts of biliary tract
  - 2D06 Malignant neoplasm of pancreas
    - 2D06.1 Adenocarcinoma of pancreas
    - 2D06.2 Neuroendocrine neoplasms of pancreas
      - 5A20.32 Zollinger-Ellison syndrome
    - 2D06.Y Other specified malignant neoplasms of pancreas
    - 2D06.Z Malignant neoplasm of pancreas, unspecified
  - 2D07 Malignant neoplasms of other and ill-defined digestive organs

2D06.1 Adenocarcinoma of pancreas

Parent

2D06 Malignant neoplasm of pancreas

Show all ancestors up to top

Definition

An adenocarcinoma which arises from the exocrine pancreas. Ductal adenocarcinoma and its variants are the most common types of pancreatic adenocarcinoma.

All Index Terms

Hide index terms

- Adenocarcinoma of pancreas
- malignant exocrine neoplasm
- Adenocarcinoma of islet cell of pancreas
- Ductal adenocarcinoma of pancreas ⇒
- Acinar cell carcinoma of pancreas ⇒
- Mixed acinar-ductal carcinoma of pancreas ⇒
- Mixed acinar-neuroendocrine-ductal carcinoma of pancreas ⇒
- Mixed ductal-neuroendocrine carcinoma of pancreatic ⇒
- Mucinous cystic neoplasm with an associated invasive carcinoma of pancreas ⇒
- Pancreatoblastoma ⇒
- Serous cystadenocarcinoma of pancreas ⇒
- Solid-pseudopapillary neoplasms of pancreas ⇒

Type 1	Type 2	Type 3
Severity	**Main Condition** (types)	**History of**
Temporality (course of the condition)	Reason for encounter/admission	**Family History of**
Temporality (Time in Life)	Main Resource Condition	Screening/Evaluation
Etiology	**Present on Admission**	
Anatomic detail Topology Specific Anatomic Location	**Provisional** diagnosis	
Histopathology	**Diagnosis confirmed by**	
Biological Indicators	**Rule out / Differential**	
Consciousness		
External Causes *(detail)*		
Injury Specific (detail)		

X-Chapter – Extension Codes

Aktueller Stand ICD-11 (Betaversion)

- Abschluss der Direkteingabe durch **Content specific** Topic Advisory Groups (**TAG**)
- **Erste Konsolidierung** des Contents ist erfolgt (WHO)
- **Definitionen** zu Entitäten, aktuell zu ca. 75 % vorhanden
- Erstes **Mapping** zwischen ICD-10 und ICD-11 Kategorien (Foundation Component)
- Bereitstellung erster **Stability Analysis** durch WHO
- Release von sog. **Frozen Beta Versions** durch WHO
  - Nächstes Release: Dezember 2014
  - **Annotation Document** (Hinweise zur Architektur und bekannte Probleme, Begründungen zur Neuordnungen)
  - Transcoding Tables ICD-10 / ICD-11 Betaversion
  - Coding Guidlines
  - Print-out Versions, inkl. Band 3 (Alphabetisches Verzeichnis)

Nächste Schritte, Beteiligung am Revisionsprozess und Zeitplan

- Integration avisierter Überarbeitungspakete einzelner **Content specific TAGs** bis Ende 2014
  - Zukünftige Eingabe von Vorschlägen dann nur noch über allgemeines Vorschlagstool
- Behebung von **Linearization Errors** und **Duplicates**
  - Überprüfung der Granularität der Hierarchieebene etc.
- Erste Reviews der sog. ***cross-sectional*** **TAGs Morbidity** und **Mortality** aus klassifikatorisch struktureller Perspektive
- Überarbeitung des **Bands 2** (Regelwerk) der ICD
  - Deutlich erweiterter Umfang, v.a. für Morbidität

➢ Weiterhin tägliche Updates der ICD-11 Betaversion

Nächste Schritte, Beteiligung am Revisionsprozess und Zeitplan

- Neuen **Vorschlagstools** wurde online gestellt, basiert auf der tagesaktuellen ICD-11 Betaversion
  - Kommentierung und Eingabe von Änderungs- und Ergänzungsvorschlägen
- Eröffnung des wissenschaftlichen **Review-Prozesses**
  - **Interessenbekundung** an Dr M. Meri Robinson Nicol (robinsonm@who.int) kurzfristig erbeten
- Bereitstellung von **Field Trials** Protocolls durch WHO
  - Interessenbekundung an die WHO
  - Bei Aufnahme von Field Trials, Information an DIMDI erbeten
  - Erweiterung der WHO-Protokolle um spezifische Anforderungen/Fragestellungen in Deutschland notwendig

DIMDI medizinwissen

http://apps.who.int/classifications/icd11/browserthenextgeneration/propo

ICD11 Beta Draft

Signed in as: Can Celik | Profile | Log Out

Proposals

Search [Advanced Search]

Browse Admin Info

Filter: Foundation

- Proposals Home
  - Infectious diseases
    - Infectious diseases by infectious agent
      - Infections due to Bacteria
        - Infections due to Vibrio
          - Infections due to Vibrio cholera
            - Cholera due to Vibrio cholerae
            - Vibrio vulnificus as the cause of diseases classified to other chapters
            - Food-borne Vibrio parahaemolyticus intoxication
        - Infections due to Salmonella
        - Infections due to Shigella
        - Infections due to Escherichia
        - Infections due to Campylobacter
        - Infections due to Enterobacter
        - Infections due to Helicobacter
        - Infections due to Mycobacterium
        - Infections due to Yersinia
        - Infections due to Francisella
        - Infections due to Bacillus
        - Infections due to Brucella
        - Infections due to Burkholderia

Show Proposals of descendant entities

Proposal List (attached to 'Infections due to Vibrio cholera')

Content Enhancement Propsal — Edit
Changes: Title. 2013-Mar-28 - 16:09

Add New Entity Proposal — Edit
test 2013-Apr-17 - 08:46

Create a New Proposal

- Content enhancement proposal
- Propose adding a new entity (as a child of the current)
- Propose deleting the current entity
- Propose complex hierarchical changes

Proposal List

Filter

- Show all Proposals
- Show only my Proposals

Sort

- Sort by date (newest first)
- Sort by date (oldest first)

List of Proposals

Cholera syndrome

Content Enhancement Proposal
Changes: Title, Definition.
2014-Oct-06 - 10:59
M. Meri Robinson Nicol

Acne and acneform reactions to drugs and poisons

Add New Entity Proposal
Anabolic steroids may be responsible for severe exacerbations of acne. For Dermatology linearization only Title Acne resulting from anabolic ste...
2014-Oct-05 - 16:47
Robert Chalmers

Functional nausea and vomiting

Add New Entity Proposal
Agreement was reached between Gastroenterology WG, Paediatric TAG and Neurology TAG for the concept of 'cyclic vomiting syndrome' to be double parente...
2014-Oct-05 - 06:57
Julie Rust

Other complications of surgical and medical care, not elsewhere classified

Add New Entity Proposal
There is currently no entity referring directly to anaesthesia as a cause of complications other than in relation to other conditions (pregnancy etc)....
2014-Oct-04 - 13:50
James Palmer

Failed or difficult intubation

Content Enhancement Proposal
Changes: Definition.
2014-Oct-04 - 13:31
James Palmer

Keratosis lichenoides chronica

Complex Hierarchical Changes Proposal
This is a rare disease of adults. It is attributed to the Paediatric TAG as well as Dermatology. This is inappropriate and the attribution should b...
2014-Oct-03 - 10:34
Robert Chalmers

Cleft hard palate

Content Enhancement Proposal
Changes: Definition. Deletes: Synonym.
2014-Oct-02 - 18:11
Karsten K.H. Gundlach

Infections due to Babesia
Infections due to Acanthamoeba
Infections due to Naegleria
Infections due to Sarcocystis
Infections due to Helminths
Infestations due to Parasites
Infections due to Algae
Infections due to Prions
Infectious diseases by clinical syndrome
Neoplasms
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
Endocrine, nutritional and metabolic diseases
Mental and behavioural disorders
Sleep disorders
Diseases of the nervous system
Diseases of the eye and adnexa
Diseases of the ear and mastoid process
Diseases of the circulatory system
Diseases of the respiratory system
Diseases of the digestive system
Diseases of the skin
Diseases of the musculoskeletal system and connective tissue
Diseases of the genitourinary system
Pregnancy, childbirth and the puerperium
Certain conditions originating in the perinatal period
Developmental anomalies
Symptoms, signs, clinical forms, and abnormal clinical and laboratory findings, not elsewhere classified
Injury, poisoning and certain other consequences of external causes
Dimensions of injury
Injuries to the head
Injuries to the neck
Injuries to the thorax
Injuries to the abdomen, lower back, lumbar spine

Content Enhancement Proposal

Infections due to Babesia

Title

Infections due to Babesia

Definition

Babesiosis is a tick-borne malaria-like zoonotic infection caused by intraerythrocytic protozoan parasites of the Babesia genus. The clinical signs and symptoms of babesiosis are related to the parasitism of RBCs by Babesia. Fever, hemolytic anemia, and hemoglobinuria may result from Babesia infection. As with malaria, RBC fragments may cause capillary blockage and/or microvascular stasis, explaining liver, splenic, renal, and CNS involvement. As with malaria, cells of the reticuloendothelial system (RES) in the spleen remove damaged RBC fragments from the circulation. RBC destruction results in hemolytic anemia. Testing addition Babesiosis may also be transmitted via blood transfusion.

Diff Mode

Babesiosis is a tick-borne malaria-like zoonotic infection caused by intraerythrocytic protozoan parasites of the Babesia genus. ~~Humans are opportunistic hosts for Babesia when bitten by nymph or adult ticks.~~ The clinical signs and symptoms of babesiosis are related to the parasitism of RBCs by Babesia. Fever, hemolytic anemia, and hemoglobinuria may result from Babesia infection. As with malaria, RBC fragments may cause capillary blockage and/or microvascular stasis, explaining liver, splenic, renal, and CNS involvement. As with malaria, cells of the reticuloendothelial system (RES) in the spleen remove damaged RBC fragments from the circulation. RBC destruction results in hemolytic anemia. Testing addition Babesiosis may also be transmitted via blood transfusion.

AGREE DISAGREE

Synonym

~~Piroplasmosis~~ AGREE DISAGREE

babesiasis

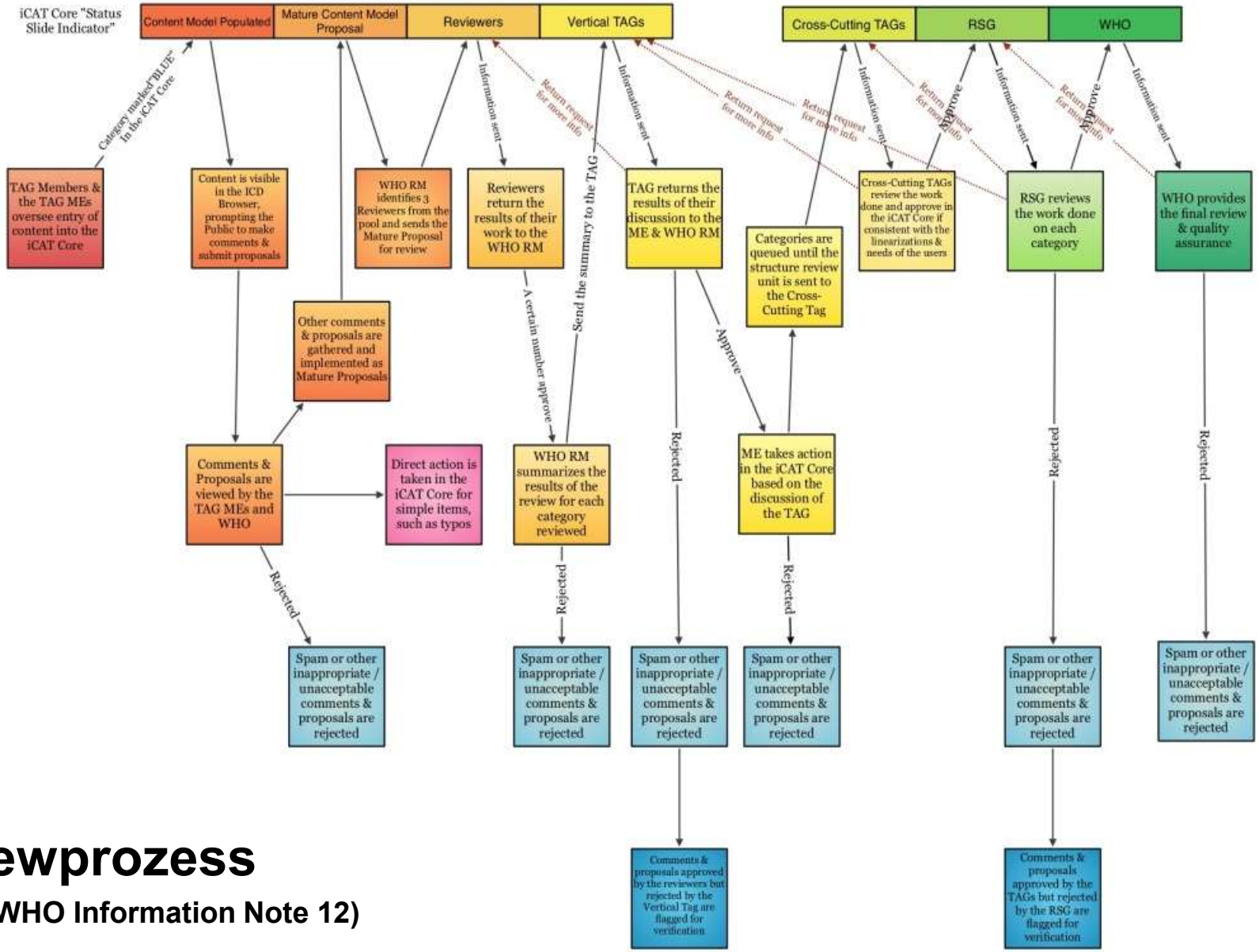
infection by babesia

infection; babesia

piroplasma; infection

babesiosis

new synonym AGREE DISAGREE



Reviewprozess

(Quelle: WHO Information Note 12)

Nächste Schritte, Beteiligung am Revisionsprozess und Zeitplan

Aktueller Zeitplan der WHO

- Betaversion **Ende 2014** als Ausgangspunkt für
  - Review-Prozess
  - Vorschlags- und Kommentierungsverfahren
  - Field Trials
- Verbesserungsvorschläge/Korrekturen werden kontinuierlich eingearbeitet
- Abschließende Anpassung und Konsolidierung unter Berücksichtigung der Ergebnisse der Field Trials Ende **2016**
- Verabschiedung durch World Health Assembly (WHA) **2017** geplant
- Implementierung ab **2018** möglich

Nächste Schritte, Beteiligung am Revisionsprozess und Zeitplan

Bei Fragen zum Revisionsprozess:

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KKG-Workshop zur ICD-11-Revision

Vielen Dank für Ihre Aufmerksamkeit!