
**Health informatics — Service
architecture (HISA) —**

**Part 2:
Information viewpoint**

*Informatique de santé — Architecture de service —
Partie 2: Point de vue de l'information*



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ISO copyright office
CP 401 • Ch. de Blandonnet 8
CH-1214 Vernier, Geneva
Phone: +41 22 749 01 11
Email: copyright@iso.org
Website: www.iso.org

Published in Switzerland

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Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights. Details of any patent rights identified during the development of the document will be in the Introduction and/or on the ISO list of patent declarations received (see www.iso.org/patents).

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation of the voluntary nature of standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT), see www.iso.org/iso/foreword.html.

This document was prepared by Technical Committee ISO/TC 215, *Health informatics*, in collaboration with the European Committee for Standardization (CEN) Technical Committee CEN/TC 251, *Health informatics*, in accordance with the Agreement on technical cooperation between ISO and CEN (Vienna Agreement).

This second edition cancels and replaces the first edition (ISO 12967-2:2009), which has been technically revised. The main changes compared to the previous edition are as follows:

- use of terms, definitions and concepts from ISO 13940:2015 (Contsys), with textual alignment throughout the document including figures, to the extent possible and beneficial;
- reference to further standards, such HL7®;
- updates to the Bibliography.

A list of all parts in the ISO 12967 series can be found on the ISO website.

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at www.iso.org/members.html.

Introduction

The ISO 12967 series provides guidance for the description, planning and development of new systems as well as for the integration of existing information systems, both within one enterprise and across different healthcare organizations through an architecture integrating the common data and business logic into a specific architectural layer (i.e. the service architecture), distinct from individual applications and accessible throughout the whole information system through information services, as shown in [Figure 1](#).

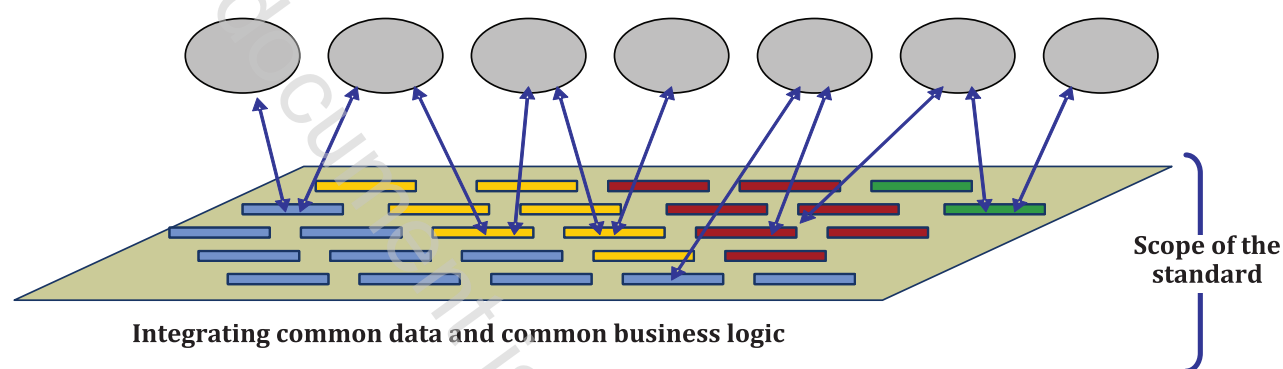


Figure 1 — Scope of the ISO 12967 series

The overall architecture is formalized according to ISO/IEC 10746 (all parts) and is therefore structured through the following three viewpoints.

- a) Enterprise viewpoint: specifies a set of fundamental common requirements at enterprise level with respect to the organizational purposes, scopes and policies that should be supported by the information and functionality of the service architecture. It also provides guidance on how one individual enterprise (e.g. a regional healthcare authority, a large hospital or any other organization where this model is applicable) can specify and document additional specific business requirements, with a view to achieving a complete specification, adequate for the characteristics of that enterprise.

Enterprise viewpoint is specified in ISO 12967-1.

- b) Information viewpoint: specifies the fundamental semantics of the information model to be implemented by the service architecture to integrate the enterprise's common data and to support the enterprise requirements formalized in ISO 12967-1. It also provides guidance on how one individual enterprise can extend the standard model with additional concepts needed to support local requirements in terms of information to be put in common.

Information viewpoint is specified in this document.

- c) Computational viewpoint: specifies the scope and characteristics of the information services that should be provided by the service architecture for allowing access to the common data as well as for the execution of the business logic supporting the enterprise processes identified in the information viewpoint and in ISO 12967-1. It also provides guidance on how one individual enterprise can specify additional information services needed to support local specific requirements in terms of common business logic to be implemented.

Computational viewpoint is specified in ISO 12967-3.

ISO 12967-1:2020, Annex C includes an explanation of ISO 23903:—¹⁾ and its relevance in regard to the ISO 12967 series, for integration with other International Standards such as ISO 13940.

1) Under preparation. Stage at the time of publication: ISO/DIS 23903:2020.

Health informatics — Service architecture (HISA) —

Part 2: Information viewpoint

1 Scope

This document specifies the fundamental characteristics of the information model implemented by a specific architectural layer (i.e. the service architecture) of the information system to provide a comprehensive and integrated storage of the common enterprise data and to support the fundamental business processes of the healthcare organization, as defined in ISO 12967-1.

The information model is specified in this document without any explicit or implicit assumption on the physical technologies, tools or solutions to adopt for its physical implementation in the various target scenarios. The specification is nevertheless formal, complete and non-ambiguous enough to allow implementers to derive an efficient design of the system in the specific technological environment that will be selected for the physical implementation.

This document does not aim at representing a fixed, complete, specification of all possible data that can be necessary for any requirement of any healthcare enterprise. It specifies only a set of characteristics, in terms of overall organization and individual information objects, identified as fundamental and common to all healthcare organizations, and that is satisfied by the information model implemented by the service architecture.

Preserving consistency with the provisions of this document, physical implementations are allowed extensions to the standard information model in order to support additional and local requirements. Extensions include both the definition of additional attributes in the objects of the standard model, and the implementation of entirely new objects.

Also, this document specification is extensible over time according to the evolution of the applicable standardization initiatives.

The specification of extensions is carried out according to the methodology defined in ISO 12967-1:2020, Clause 7.

2 Normative references

There are no normative references in this document.

3 Terms and definitions

For the purposes of this document, the following terms and definitions apply.

ISO and IEC maintain terminological databases for use in standardization at the following addresses:

- ISO Online browsing platform: available at <https://www.iso.org/obp>
- IEC Electropedia: available at <http://www.electropedia.org/>