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[Hospital or System Name] 's Evaluation of LOINC Mapping Process Report

Hospital Description

1. General description of the types of hospitals that are in your system:

Hospital Name	Type of Hospital *	# of Beds	Teaching/non	Other Descriptors

* Is it a community hospital, children's hospital, specialty hospital, or specify type if other?

Hospital Resources

2. What technical or other resources were utilized during participation in this project?

3. Were any new resources needed to fulfill the requirements of this project?

Yes No If yes, please explain:

4. Personnel involved in this project: titles, tasks, and number of hours spent:

Personnel Title	Task performed	Number of Hours

Data Compilation

5. What process steps were needed to perform the data requirements of this project? (Please state in order of occurrence as a brief outline.)



6. What issues were encountered in complying with data requests?

	Barriers	How was it resolved	Lessons learned
Staff			
Technological			
Fiscal			
Other commitments during certain times of year			
Other issues			

LOINC Mapping

7. Did you use LOINC before this pilot project? Yes No

8. Approximate total number of hours spent to create the data catalog.

9. What process steps were needed for your staff to perform the LOINC mapping requirements of this project? (Please state in order of occurrence as a brief outline.)

10. What issues, challenges or barriers were encountered in standardizing data elements?

	Any Barriers	How was it resolved	Lessons learned
Staff			
Technological			
Lab data			
Other issues:			

11. Did you benefit from consultations with 3M's during LOINC mapping? Yes No
If yes, please explain.

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12. Do you think that you could have completed the LOINC mapping in-house without the help of an expert?

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13. What advice would be useful to other states in understanding/employing LOINC?

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Communication Tools

14. Describe the communication processes

	Emails	Conference Calls	Face-to-face Meetings
Were they efficient and useful?			
Recommendations & suggestions for providing more effective communication			

Transmission of Data

15. Were issues encountered during data transmission? Yes No (If yes, please describe the issues and state how they were resolved.)

16. Please state any feedback regarding uploading the data: Tab separated value format versus other.

17. Would you have preferred using HL7 to transfer the data? Yes No If yes, why?

18. Please complete this sentence: "My experience in the LOINC mapping process was..."

19. In the future, would you consider standardizing your entire data element into LOINC? Yes No If yes, why?

20. Describe key characteristics that led to your successful participation.

Thank you for your feedback and time.