

1. Convene, take roll, review records and plan next meeting(s)
  - a. 11:00 a.m. Central Time.  
[Meeting ID and access code: 817-393-381](#); call +1 (571) 317-3131
  - b. Roll; *Reminder - put site after your name in [GoToMeeting](#) preferences*  
GPC\_[DevTeams](#) represented? KUMC\*, UIOWA\*, MCW\*, MCRI\*, UNMC\*, UTHSCSA\*, UTSW\*, MU\*, IndianaU\*, Utah\*, Allina\*, Intermountain\*
    - i. Today's scribe: **Intermountain**
  - c. Comments on the agenda? (ref [SoftwareDev#tracking](#)) On [last week's notes? \(#12\)](#)  
[Recent tickets opened/closed](#) - FYI (i.e. not intended for discussion)
    - i. *None this week*
  - d. Next meeting(s): **Mar 31**; scribe: **MCW**
    - i. Note [scribe rotation](#) appendix
2. Datavant / [PPRL](#)
  - a. Protocol is intended to be shared with local IRBs - link is broken, Brian to send to GPC Dev listserv: [done Tue. Mar 10](#). Done; thanks.
3. COVID-19: goal: i2b2 refresh 2x/week
  - a. RW: interest in ACT and PCORnet community... synergistic efforts.  
Overall, need to look at sites who could do rapid update of COVID 19 subpopulation into specific CDM or I2B2 instance. Most importantly to look at ability to populate and refresh data.
  - b. RW: I forwarded [PCORnet Response to COVID-19](#) to gpc-dev and gpc-pi.  
*COVID19 Healthcare Worker Registry and Trial SC.pptx* attachment is slides about a healthcare workers registry AND randomized trial chloroquinone (and other related med) **Russ** will learn more in a meeting at noon today
    - i. PCORNET asked for nominations for leads in this effort: ICU Director, KUMC, and Jim McClay is willing to help lead as HC stakeholder. Need Healthcare stakeholder and Methods Expert.
  - c. Opportunities to fund supplemental work in developing subsets???
    - i. Example: Predictors of need for mechanical ventilation.  
Mei and Song drafting a response to get a cohort started.
  - d. RW got a message from Platt about a possible FDA sentinel effort; Surveillance
  - e. NCI supplemental funding around COVID
    - i. EC: something leveraging PCORNet would look stronger

- f. JRC: in covid cohort identification - Should Scott and I share data standards relative to ICD, LOINC etc. to ensure we're pulling the same thing out of our EHRs?
  - i. AB: were you on the [i2b2 AUG COVID-19 Workgroup](#) call? Are you talking about the tables from S. Murphy?  
JRC: no; we (UNMC?) have our own Epic-specific codes
  - ii. RW: i think the inclusion criteria are clear from [missed]
  - iii. DC: are you talking about where to get things in CLARITY?  
JRC: that and ensuring the build team is mapping to the correct standards  
DC: hospital build team changes seem like a multi-month effort at KUMC, so we (medical informatics) may have to employ ad-hoc methods for now
  - iv. Susan: perhaps each of our sites should look at what we've got in our systems
  - v. Alex S.: we looked in the MCW EHR and found some old SARS testing code is being used for SARS-CoV-2 tests
  - vi. **JRC: I'll send something to gpc-dev**
- g. Alex/MCW: IRB... excludes prisoners... exception?  
RW: ACT ... obfuscated. PCORnet... covered nationally[?]  
DC: DROC meeting tomorrow is a better venue for regulatory matters?  
RW: perhaps, but there may be a waiver for public health [as opposed to human subjects research] coming from CDC.
- h. Around the table... Apr 1 target from PCORnet
  - i. KUMC - aiming for 2x/week for a covid cohort working on I2B2 subset. expect to have CDM version this week. Focus on providing data now. only refreshing COVID cohort.
  - ii. UIOWA - No ACT at IOWA. CDM: perhaps refresh 1/wk. April 1 milestone? Could bring it up but data will lag.
    - 1. EC: is an i2b2 datamart essential?  
DC: I don't see any other way to participate in ACT. For a PCORnet CDM, any method is acceptable
  - iii. MCW - We can do a weekly COVID19 subset, evaluating if we can do more often 4/1 milestone YES (more to come, meeting this afternoon)

- iv. MCRI not on ACT. may need to write ad hoc ETL against the data warehouse for this. 1 Apr not likely
- v. UNMC not onboarded ACT. can do monthly refresh CDM and I2B2, but not more frequently. Mine real time data lab and path: could do daily. Already creating an internal cohort so will check whether they can utilize that.
  - 1. JRC: just diagnoses seems to miss a lot of opportunities; what data do we want about this cohort?  
Dan: the narrow data are just to identify COVID 19 cohort. Then yes, we want meds and all the rest: We want all the PCORnet tables for this cohort, and for i2b2, all the ACT stuff.
- vi. UTHSCSA - Depends on source systems. Will be linking with them to see how often we can get refreshes. We're negotiating monthly refreshes, will be trying to see about weekly for clinic data, however it is uncertain how often we could get hospital data.
  - 1. used ACT (new, COVID19) ontology in a quick preliminary search, ~15 possible patients, needs to be done on non-obfuscated dates to make sure.
  - 2. Have cohort-characterization app that can highlight patterns of abnormal labs, procedures, and co-diagnoses that are characteristic of the COVID patient-set once we're sure that's what it is.
- vii. UTSW Looking at the LAB test results. Working on it. Getting scripts ready to pull from Clarity. 4/1 : something, perhaps I2B2 instance.
- viii. MU Issues to refresh that frequently. Identify patients data warehouse feasible. Refreshing data ???
- ix. U Utah Rachel: at first, create cohort broadly: can refine as we go. (?) . ACT 1x/wk feasible. Reed may refresh entire ACT database. For CDM, COVID 19 subset of CDM. Still planning.

- x. Allina unclear how to comply given current data processing strategy. Narayna is out in India. Meeting to evaluate next steps. In process of connecting to ACT.
- xi. Indiana Question on monthly versus weekly refresh. Data already lagging from source. I2B2 loaded monthly. Evaluating more frequent update. Thinking to do full load, then isolate cohort data.
- xii. Intermountain - how much effort we can muster is a question, given other demands in the enterprise - patient care, logistics. [clinical collaborator... missed?] competing research effort; perhaps we can work together. Getting more fresh than 1 month looks challenging. Expect to know more next week.
  - 1. Maybe PCORNet would slip the deadline on the Apr refresh?

**Stephanie will inquire.**

- 4. *Meeting adjourned; remaining items postponed.*
- 5. i2b2 metadata for medications in the Nebraska Lexicon (#411)
- 6. Milestone: [tumor-reg-18](#)
  - a. [#739 HERON NAACCR ETL outdated by v18](#) - alpha / beta testing
- 7. P.s. Trac user accounts: [avallejo@mcw.edu](mailto:avallejo@mcw.edu). **DC to help.**

[wash your hands ...](#)

## Appendix: Scribe Rotation

[DevTeams](#): KUMC, UIOWA, MCW, MCRI, UNMC, UTHSCSA, UTSW, MU, IU, Utah, Allina, Intermountain

- 1. [Allina 10 Dec](#)
- 2. [MCW 17 Dec](#)
- 3. [KUMC Jan 14](#)
- 4. [UTSW Jan 21](#)
- 5. [UNMC Jan 28](#)
- 6. [UTHSCSA Feb 4](#)
- 7. [MU 11 Feb](#)
- 8. [IU 18 Feb](#)

9. [Utah 25 Feb](#)
10. [Ulowa 3 Mar](#)
11. [Marshfield 10 Mar](#)
12. [Intermountain 24 Mar](#)