

## **Renal Association and Renal Information Exchange Group SNOMED renal subset review group: remit and organisation**

### **Constitution**

- 1 A group will be established by the Renal Association (RA) in collaboration with the Renal Information Exchange Group (RIXG) to advise their parent bodies and through them, the UK Terminology Centre (UKTC) on all aspects of SNOMED CT codes relevant to all aspects of the practice of nephrology in the UK within the NHS.
- 2 The group will report to the RA's Clinical Affairs Board at least twice a year (probably December & June) at a time agreed with the CAB and the UKTC bearing in mind the deadline for editorial changes (January & July) and the bi-annual publication schedule of the UKTC in April & October.
- 3 Membership will be by secondment from and recommendation by the parent bodies and will always include representation from the UKTC.  
The group may invite recognised experts to provide an opinion or to join the group for a limited period or for the duration of a specified project.  
The group may invite interested trainees to join and to participate in the work of the group.  
The Chair of the group will be appointed by a panel comprising the President and Clinical Vice-President of the RA, two elected members of the RA's Executive Committee, and the Chair of RIXG. This appointment will follow a call for expressions of interest which will be issued by the RA and disseminated to all members of the RA and to other interested parties including the Kidney Quality Information Partnership. The Chair will serve for a period of 3 years, with possibility to renew for a further term of up to 3 years. A replacement Chair will be elected 12 months before the serving Chair demits office and will shadow the Chair during this period.
- 4 The group will conduct its work by email and teleconferences where possible. Where physical meetings are required, they will be tagged on to other meetings where appropriate to minimise the environmental impact and cost. Members' expenses will be borne by the members' parent organisations.
- 5 The group should invite comments from people with a legitimate interest in renal medicine (qv) under the headings:
  - a) missing codes
  - b) ambiguous codes
  - c) existing codes that should be in the renal subset
  - d) codes that should be retired from the renal subset or from SNOMED-CT
  - e) codes with an inappropriate description in SNOMED CT  
eg their: links, lineage, attributes status, fully defined term, definition (is, has a, laterality, has parts), synonym, finding site, qualifier, (severity, episodicity, clinical course), morphology, aetiology, consequences, spelling, cross mapping to other coding systems, additional characteristics or position in a sub type hierarchy and anything else they consider relevant.
- 6 Liaise with coding groups established by other specialties to ensure that there is no overlap or different advice being sent from different specialties to the UKTC
- 7 Maintain an up to date entry in the current version of the file held by UKTC and describing all the approved SNOMED subset groups in the UK:  
doc1\_UKTCsnomedCTSubsetOverview\_Current-en-GB\_GB1000000\_<yyyymmdd>.pdf