WHO-FIC NETWORK MEETING

Tokyo, Japan
16-22 October 2005

Proposed Criteria for Update, Special Clinical Topics and Revision

Criteria for Updates –

T*aken from Update Reference Committee - Committee structure, work programme and membership - 5th October 2004*

Minor change

Includes:

- Correction or clarification of existing index entry that only changes the code assignment to a code within the same three-character category.
- Enhancements to the tabular list or index (such as the addition of an inclusion term to an existing code; the addition of an exclusion note; the duplication of an existing index entry under another main term).
- Change to a code description that enhances the description rather than changes the concept.
- Change to a rule or guideline that does not affect the integrity of morbidity or mortality data collections.
- Correction of a typographical error.

Major change

Includes:

- Addition of new code.
- Deletion of code.
- Movement of a code to another category or chapter.
- Change to an existing index entry that changes the code assignment from one three-character category to another three-character category (movement of terms).
- Change to a rule or guideline that affects the integrity of morbidity or mortality data collections.
- Introduction of a new term into the index.

Update cycle

Tabular list: Every three years for major changes, annually for minor changes

Index: Annually for changes that do not impact on the structure of the tabular list.

Updates to ICD-10

Minor ICD-10 updates accepted each October at the annual Network meeting are posted the following year to the ***WHO*** website before implementation in January of the year following posting.

Major ICD-10 updates accepted each October at the Heads of Centres meeting are posted the following year to the ***WHO*** website before implementation in January of the year designated as major.

Does the Committee agree with these criteria?

Criteria for Special Clinical Topics

Historically, the URC membership at the annual WHO-FIC meeting identifies a clinical subject as one that requires extensive review and resources that are beyond the scope of the URC and the WHO- secretariat.
At the October 2004 meeting held in Reykjavik, four centres and the WHO agreed to tackle some of these subjects. ON February 7, 2005, a teleconference was held between these four Centres, the WHO and the chair and secretariat of the URC to determine purpose, process and reporting structures. Papers on each of these subjects will be presented in the ICD Plenary sessions and should inform this discussion.

The following criteria for special clinical topics were proposed at the February 7, 2005 teleconference - -

- change of concept/definition of the code - moving the code from one chapter to another
- requires in-depth research/analysis/expert input and consensus
- changes in ICD-10 conventions, e.g. dagger/asterisk rule
- modifications to specialty classifications, e.g. ICD-0-3
- incorporating clinical specialists tools into ICD, e.g. sleep disorders
- varied interpretations of the code definition, includes – defining the original intent of the code

Are these criteria valid? Should we add others?

Criteria for Revision

At this point in time, specific criteria to distinguish between Updates and Special Clinical Topics versus Revision do not exist. It is anticipated that the presentations of the Special Clinical Topics and other papers in the ICD Plenary sessions will inform this discussion.