

# MCBK Infrastructure

# MCBK Infrastructure WG 2018-2020



**Leslie McIntosh**  
Research Data Alliance

Co-Chair



**Chris Shaffer**  
University of California  
San Francisco

Co-Chair




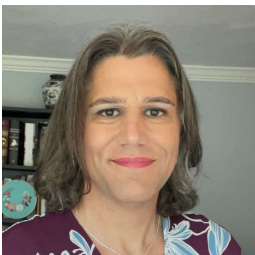
**Peter Boisvert**  
University of Michigan

MCBK Liaison

## MCBK Infrastructure: Charge

- Identify the landscape of **infrastructure stakeholders**
- Describe the **framework components** necessary to move computable biomedical knowledge from generation into practice by facilitating the testing, versioning, use, evaluation, scalability, interoperability, and dissemination of MCBK
- Develop **use cases** connecting stakeholders to framework components
- Act as a **clearinghouse** for news and events of interest to infrastructure stakeholders and the overall MCBK community

# MCBK Standards & Infrastructure WG 2021-

	<p><b>Bruce Bray</b> University of Utah</p>	<p>Co-Chair</p>
	<p><b>Jamie McCusker</b> Rensselaer Polytechnic Institute</p>	<p>Co-Chair</p>

# MCBK Standards & Infrastructure: Purpose

The Standards and Infrastructure workgroup seeks to mobilize diverse stakeholders in an ongoing and active engagement around the detailed scientific description of computable biomedical knowledge (CBK). We envision the creation and perpetuation of a robust CBK ecosystem that encourages public-private partnerships; supports open standards; generates value for users by making CBK more findable, accessible, interoperable, and reusable; highlights the limits of CBK and CBK biases; and engenders equity in the generation and application of CBK for health.

# MCBK Standards & Infrastructure: Charge

- The one charge of the Standards and Infrastructure workgroup is to identify and describe the landscape of infrastructure stakeholders; the framework components necessary to move computable biomedical knowledge (CBK) from generation into practice by facilitating the testing, versioning, use, evaluation, scalability, interoperability, and dissemination of CBK; and the use cases that connect stakeholders to framework components.
- The Standards and Infrastructure workgroup will serve as a clearinghouse for news and events of interest to infrastructure stakeholders and the overall MCBK community.
- We will engage with complementary efforts within MCBK and externally with various standards development organizations and open science initiatives (e.g. RDA, GA4GH, Chan Zuckerberg Biohub) to identify what makes it difficult for people to implement CBK right now, and to ask, “How can we make it easier?”

## White Papers

- Categorizing metadata to help mobilize computable biomedical knowledge, Alper BS, et al., DOI: [10.1002/lrh2.10271](https://doi.org/10.1002/lrh2.10271)
- Guiding principles for technical infrastructure to support computable biomedical knowledge, McIntosh LD, et al., unpublished preprint



TC LU 2550363 5

TTNU 106765 0  
22G1

MAX. GROSS 30.480 KGS  
67.200 LBS  
TARE 2.100 KGS  
4.630 LBS  
NET 28.380 KGS  
62.570 LBS  
CU. CAP. 33.2 CU.M.  
1.172 CU.FT.

PONU 009531 5  
22G1

MAX. GROSS 30.480 kg  
67.200 lb  
TARE 2.300 kg  
5.070 lb  
PAYLOAD 28.180 kg  
62.130 lb  
CUBE 33.0 cu.m  
1.165 cu.ft.

MSKU 769 753 0  
22G1

MAX. GROSS 30.480 KG  
67.200 LB  
TARE 2.170 KG  
4.780 LB  
PAYLOAD 28.310 KG  
62.420 LB  
CUBE 33.2 M<sup>3</sup>  
1.170 FT<sup>3</sup>

MRKU 734 355 6  
22G1

MAX. GROSS 30.480 KG  
67.200 LB  
TARE 2.170 KG  
4.780 LB  
PAYLOAD 28.310 KG  
62.420 LB  
CUBE 33.2 M<sup>3</sup>  
1.170 FT<sup>3</sup>

SUDU 769689 9

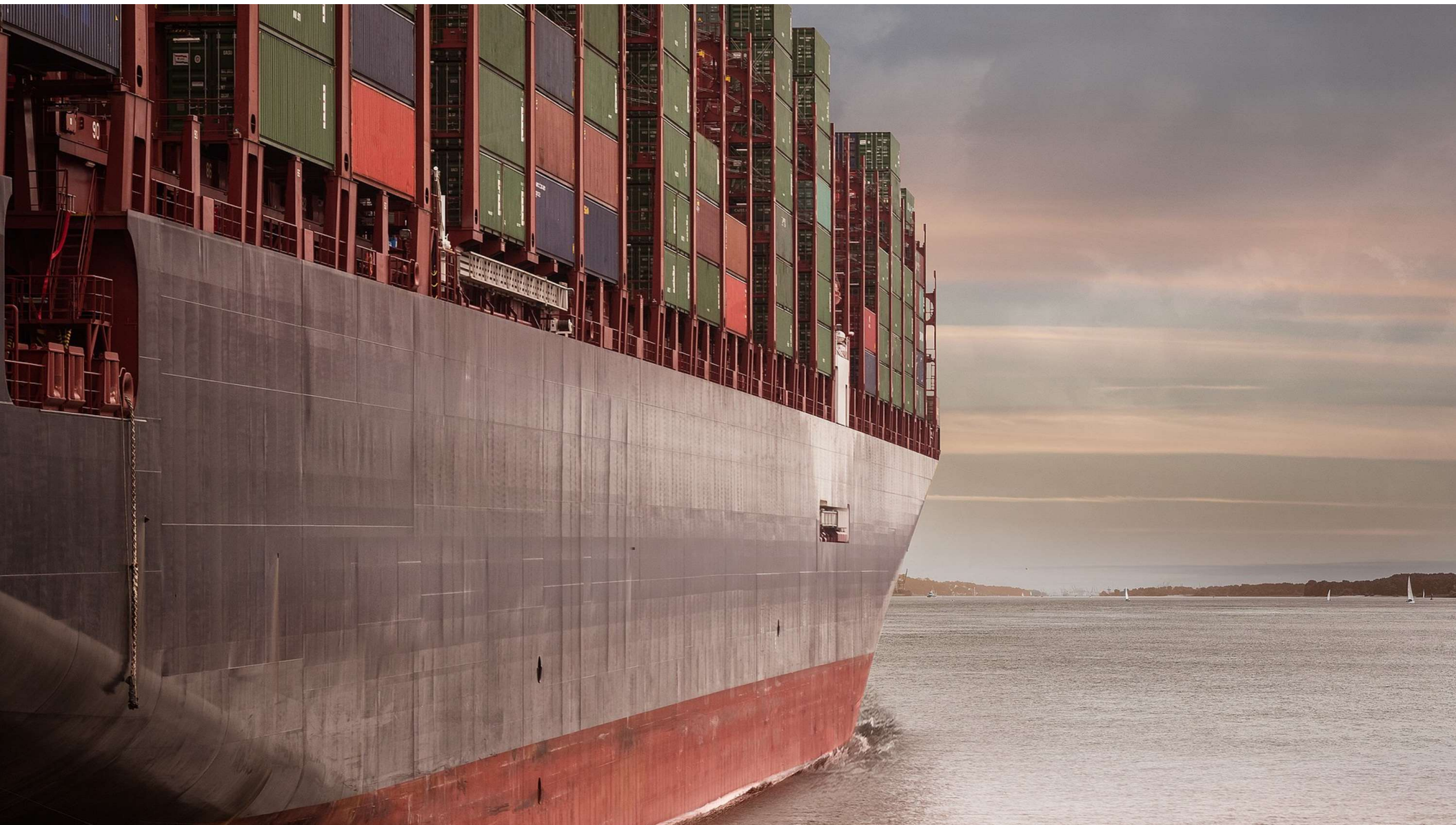
TC

MAX. GROSS  
TARE  
NET  
CU. CAP.

maerskline.com

maerskline.com



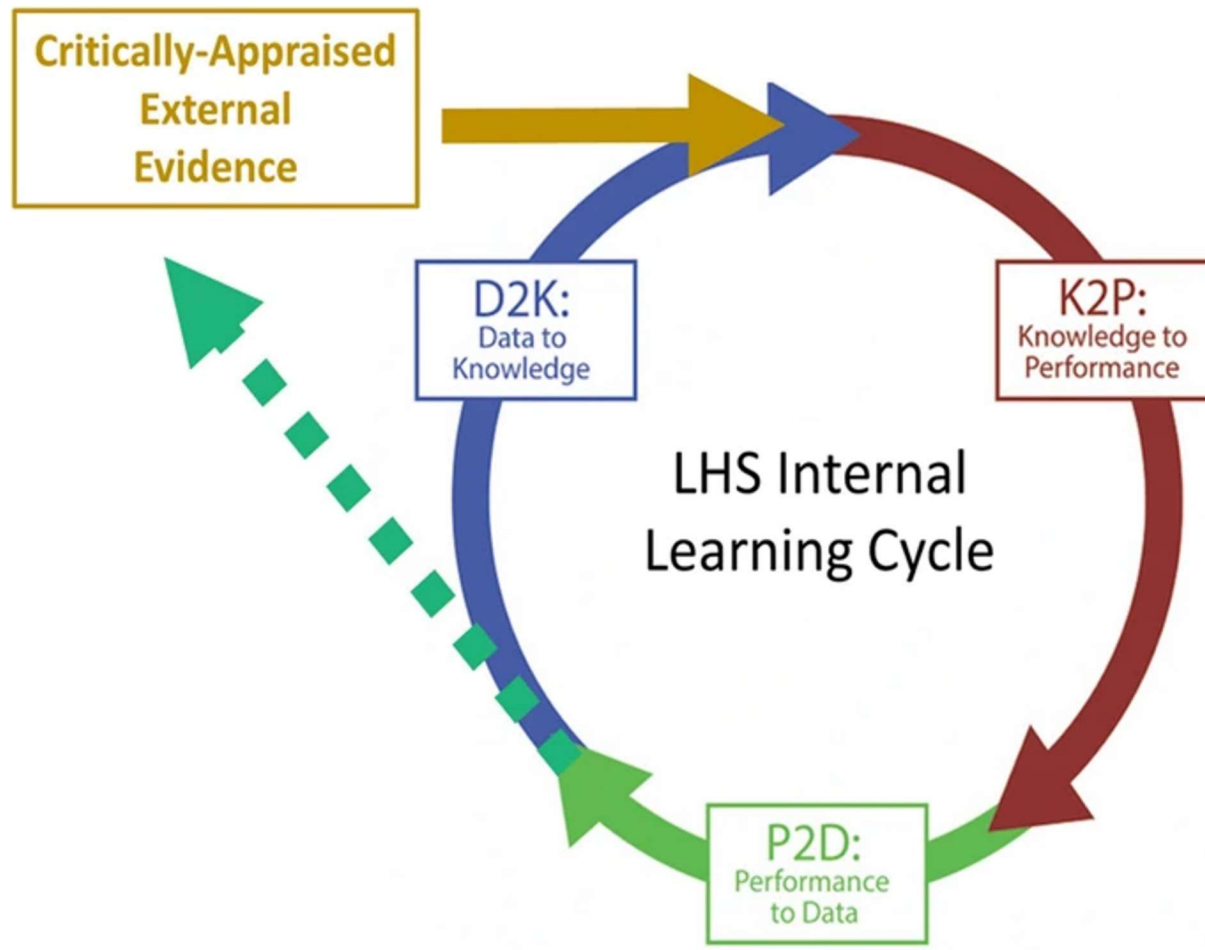












# Infrastructure Principles

1. Promote interoperable systems for data and knowledge
2. Encapsulate knowledge objects and systems in an environment of accessibility and openness
3. Enable stable, trustworthy knowledge representations that are human and machine readable

# Knowledge Infrastructure Requirements

for Computable Biomedical  
Knowledge (CBK)

**Bob Greenes**

*ASU and Mayo Clinic*

**Carl Lagoze**

*University of Michigan*



# What do we mean by CBK?

Based on evolution of the goals of clinical decision support (CDS), this includes:

- Some traditional kinds of knowledge artifacts
- Some newer notions that rely on views or analyses of data to support cognitive processes

Raises the question of distinctions among data, information, and knowledge...

# Traditional CBK resources types

- ▶ ECA rules
  - ▶ ON **event** IF **condition** THEN **action**
  - ▶ Alerts and reminders
- ▶ Order sets
- ▶ Documentation templates
  - ▶ Structured forms
  - ▶ Structured reports
- ▶ Infobutton manager requests
- ▶ Care process models
  - ▶ Guidelines
  - ▶ Protocols

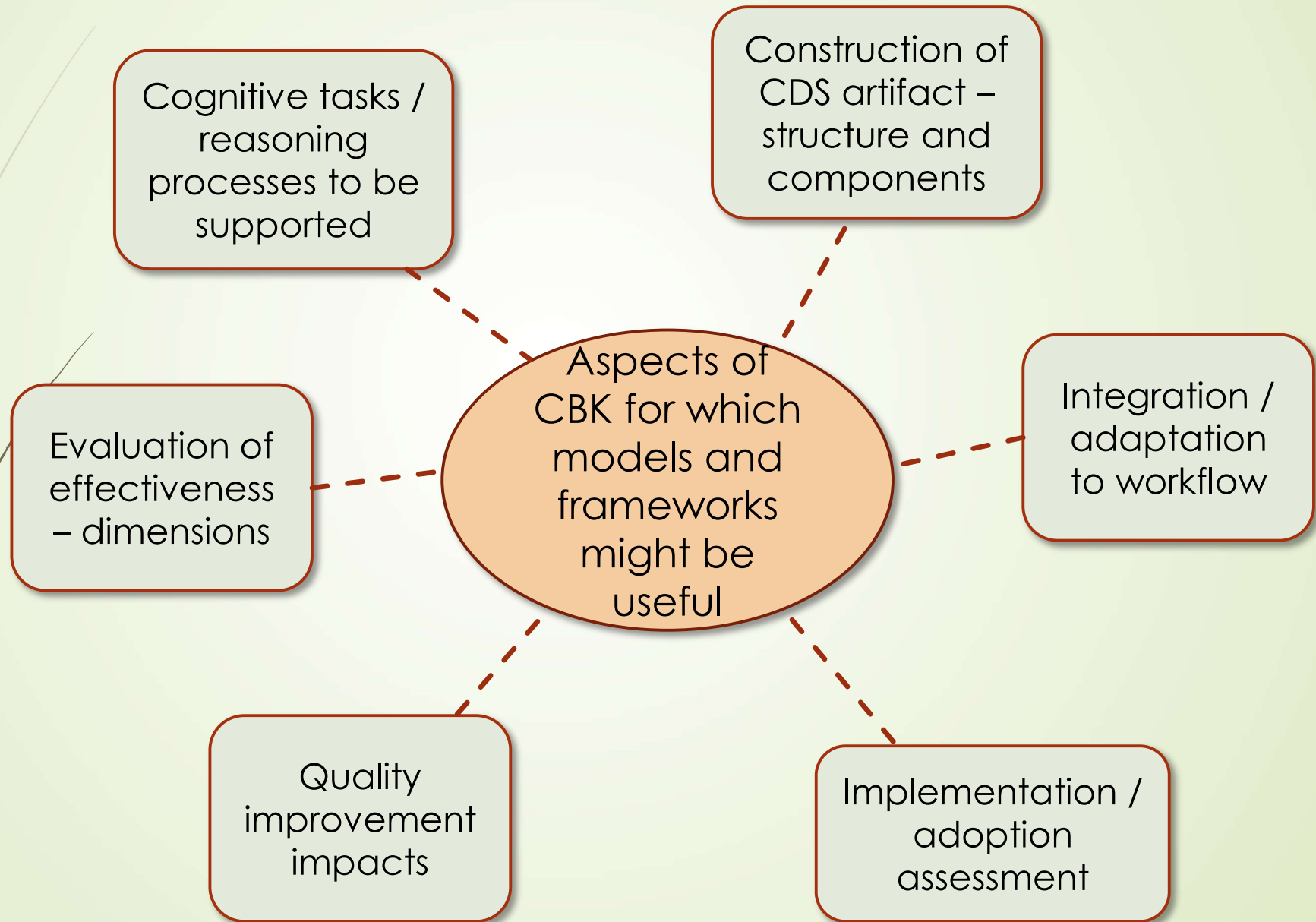
# Some non-traditional CBK types

- Quality measures
  - As reports
  - As dashboards showing outliers
  - As indicators for attention re: current patient
- Process models, expanded
  - Business process models
  - Workflow models
    - BPMN, CMMN, DMN
- Projections
  - Predictive models
  - “Patients like mine” analyses

# Some non-traditional CBK types - 2

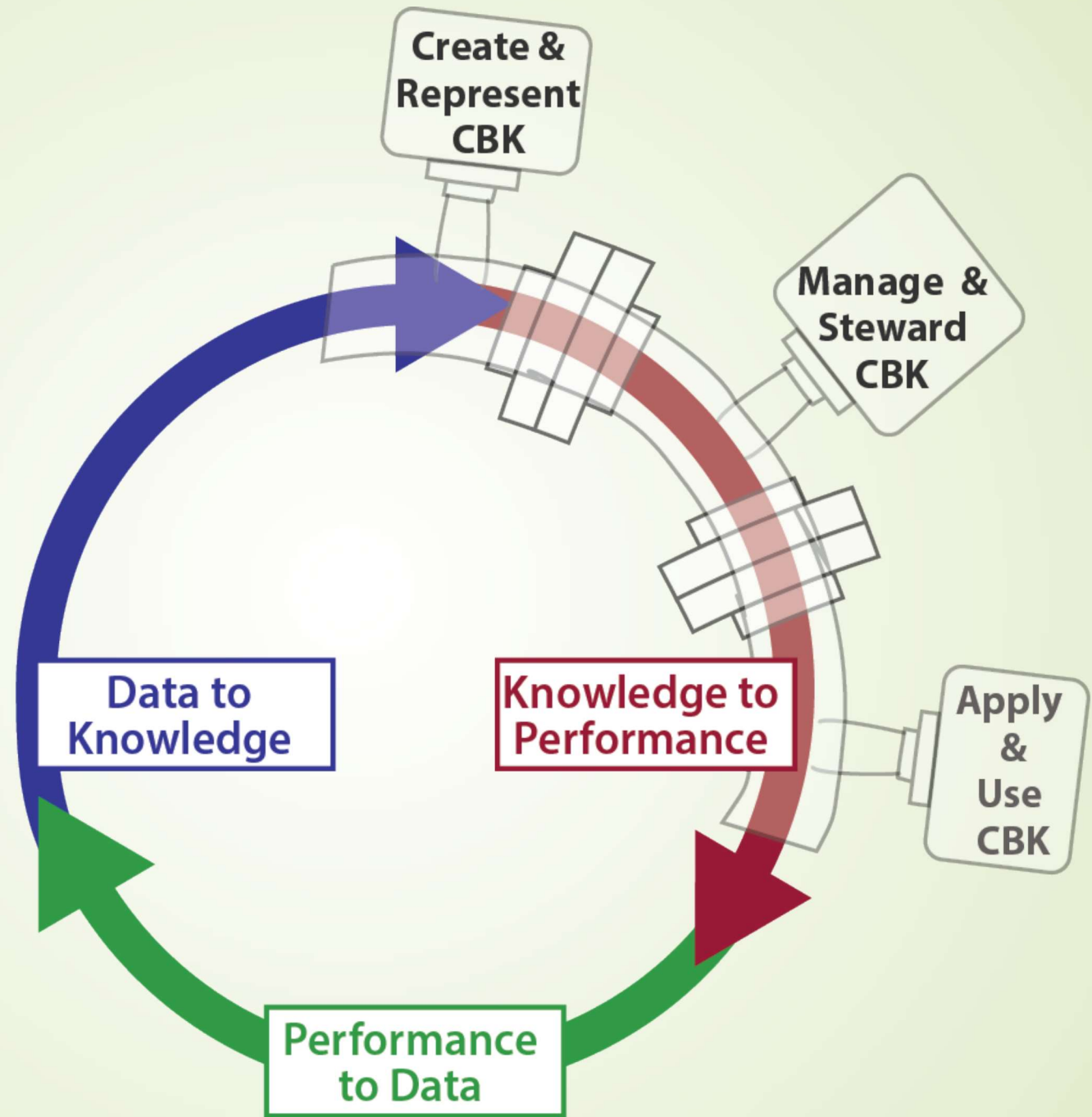
- ▶ Context-based focusing
  - ▶ Analogous to GPS navigation
    - ▶ Situation, setting, workflow activity, patient problems, provider skills/expertise
    - ▶ Activity within app
- ▶ Semantic relations among data
  - ▶ conditions ⇔ observations ⇔ actions
    - ▶ In any direction
  - ▶ Trends of associated data over time
    - ▶ e.g., lab findings varying as med choices and doses are altered
  - ▶ Suggesting associations to consider for assessments/plans

# Some perspectives that may need to be accommodated



# What do we mean by infrastructure?

- ▶ Recognizing the huge variety of CBK and its potential use, we are seeking to define a set of general capabilities common to all:
  - ▶ to support the various stages of:
    - ▶ creating and representing knowledge
    - ▶ managing and stewarding knowledge
    - ▶ applying and using
    - ▶ capturing experience
- ▶ Why?
  - ▶ To make it easier to archive, update, share
  - ▶ By individual organizations with much CBK
  - ▶ Across organizations, nationally, internationally



# STAGE 1: CBK Creation & Representation

## ➤ Creation

- The generation of the knowledge
  - human-intensive sources
  - EBM/literature-based approaches
  - data analytics

## ➤ Representation

- Use of formal methods to encode concepts, attributes, relations
  - Individual to the type of knowledge
- Many standards exist in this space
  - Terminologies/taxonomies
  - Ontologies
  - KNART models
  - Work flow models
- Not clear whether they exist yet for predictive models and analytics



# STAGE 2: CBK Management & Stewardship

- This includes several functions
  - Curation
  - Assigning metadata
  - Updating, versioning, purging
- Principles of knowledge FAIRness seem to apply primarily to this stage

# Knowledge FAIRness

- ▶ Findable
  - ▶ relies on metadata adequately capturing
    - ▶ the content domains
    - ▶ type of artifact
    - ▶ appropriate settings for use
    - ▶ provenance and derivatives
- ▶ Accessible
  - ▶ authentication, authorization, rights management
  - ▶ availability for retrieval
- ▶ Interoperable
  - ▶ using standards for representing, searching, and accessing
- ▶ Reusable
  - ▶ separation of generic vs. localization components
  - ▶ conditions for adaptation and use

# STAGE 3: CBK Adaptation and Use

- Localization is needed to insert into workflows or to trigger by specific events
- Even incorporating in a service via an API requires such localization
- The knowledge thus modified is often quite different from what started out
  - Doing the adaption may be 50-80% of the work
- Execution
  - Interpreters
  - Service models

# STAGE 3: CBK Adaptation and Use - 2

- ▶ What happens then when the underlying knowledge changes?
  - ▶ Need system of separating localizations from core knowledge
  - ▶ Need subscription/notification service to be aware of changes
- ▶ Usage provides data also for the continuous feedback loop of the cycle
  - ▶ How did the knowledge affect process and outcome?
  - ▶ How effective was the implementation?

# Some other considerations

- ▶ This topic is heavily dependent on the other themes being discussed
  - ▶ Metadata, indexing, context-based search
  - ▶ Validation and trust
  - ▶ Intellectual property, access, and adaption rights



Seamless Bay Area

## Discussion Points

- What are the **framework components** necessary to move computable biomedical knowledge from generation into practice by facilitating the testing, versioning, use, evaluation, scalability, interoperability, and dissemination of MCBK?
- How do we build and share a conceptual infrastructure model that supports MCBK?
- How can our work support the infrastructure? What does the developer community need from us?