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EU-projects to support the EHDS

For a European
Health Data Space



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Klara Jirakova, CZ, Session Moderator



Andreas Neocleous,
CY, Xt-EHR Project Manager



WP5 – general requirements
Vanja Pajic, CZ

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WP6 – electronic prescriptions & PS
Rutt Lindström, TEHIK (Estonia)



WP7 – new use cases
Esther Peelen, Nictiz, co-TL Medical
Imaging Studies & Reports (NL)



WP8 – Conformity Assessment
Haralampos Karanikas,
Medical Informatics and e-Health Systems
Senior Expert (IDIKA GR)

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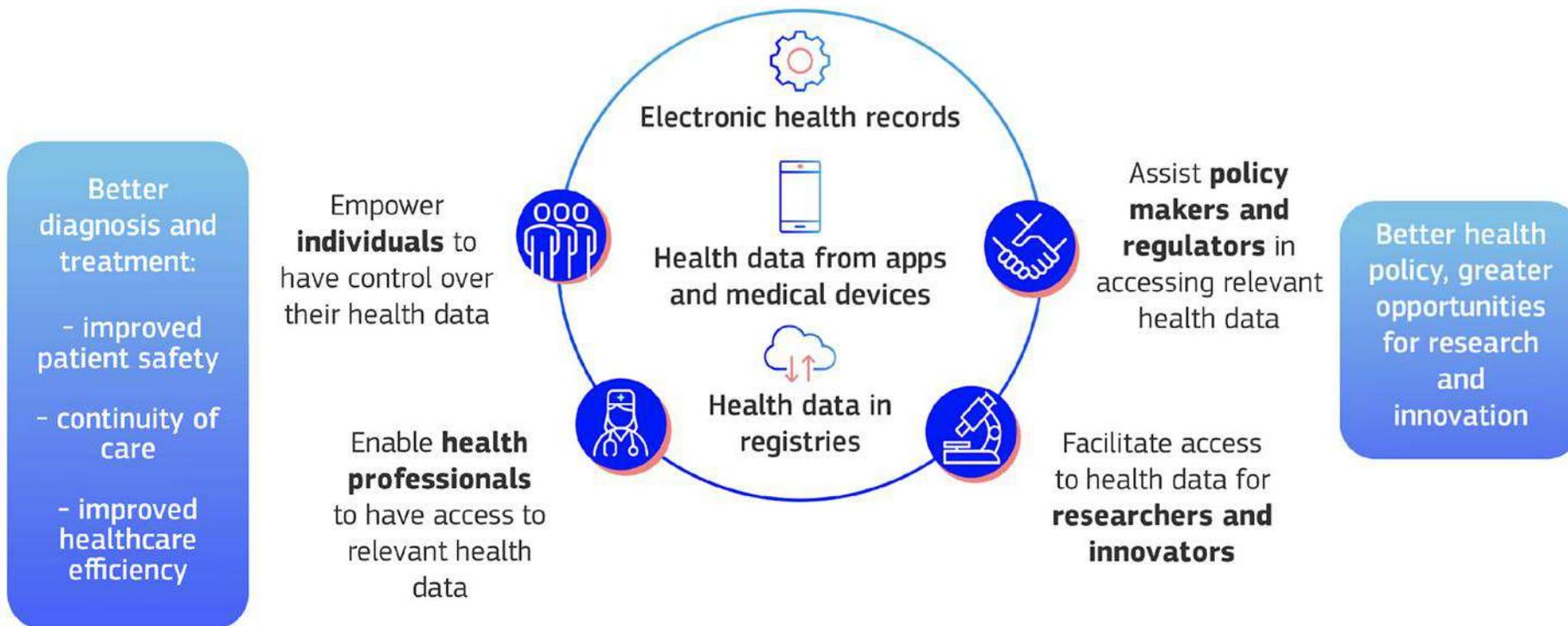
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Industry perspective, MedTech Europe,
Verena Thaler



Extended EHR@EU Data Space for Primary Use (Xt-EHR)

Andreas Neocleous - Project Manager, *Xt-EHR Joint Action*

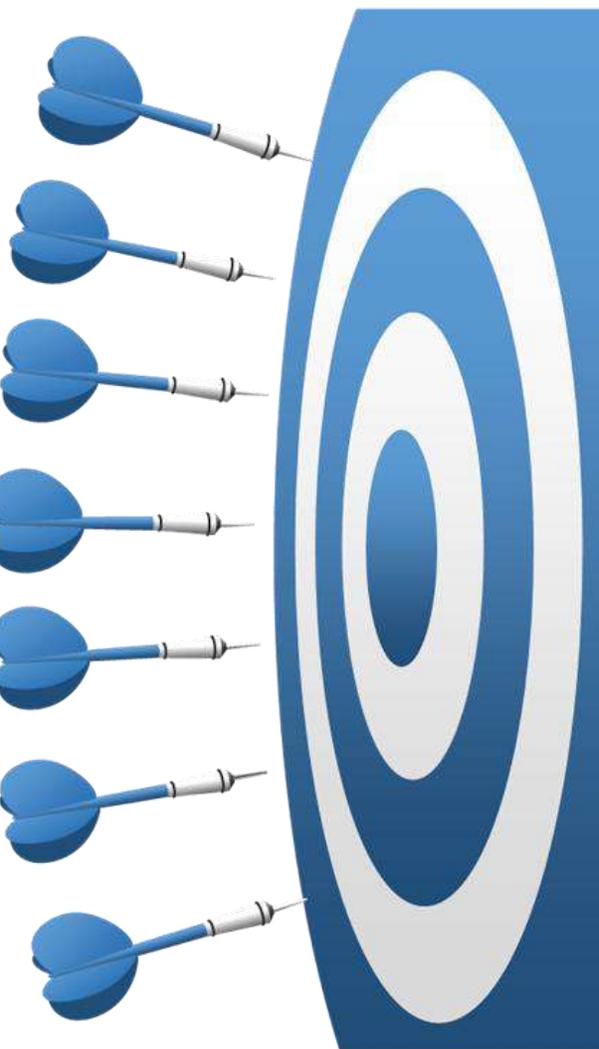


Xt-EHR website



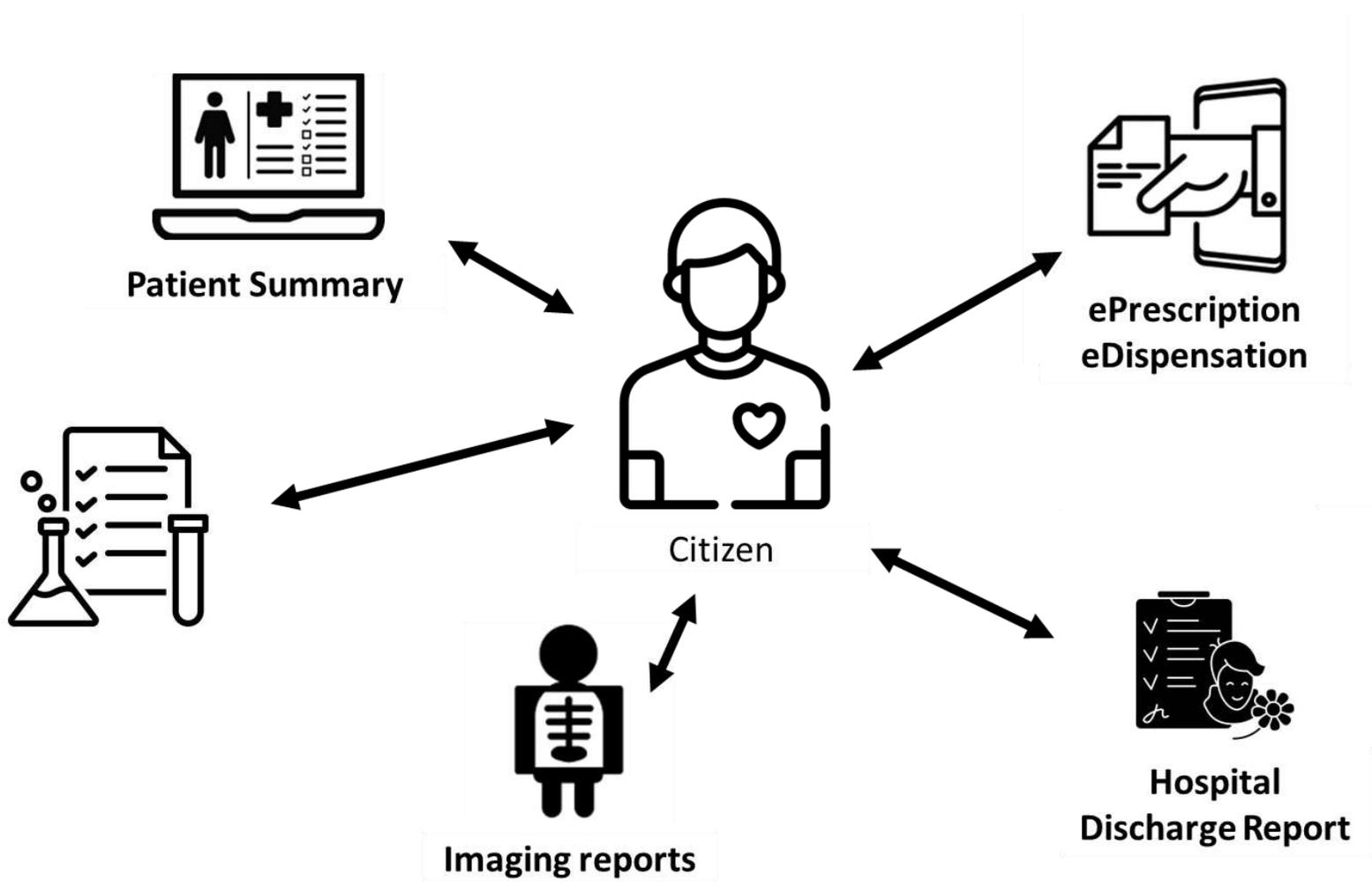
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Xt-EHR Objectives

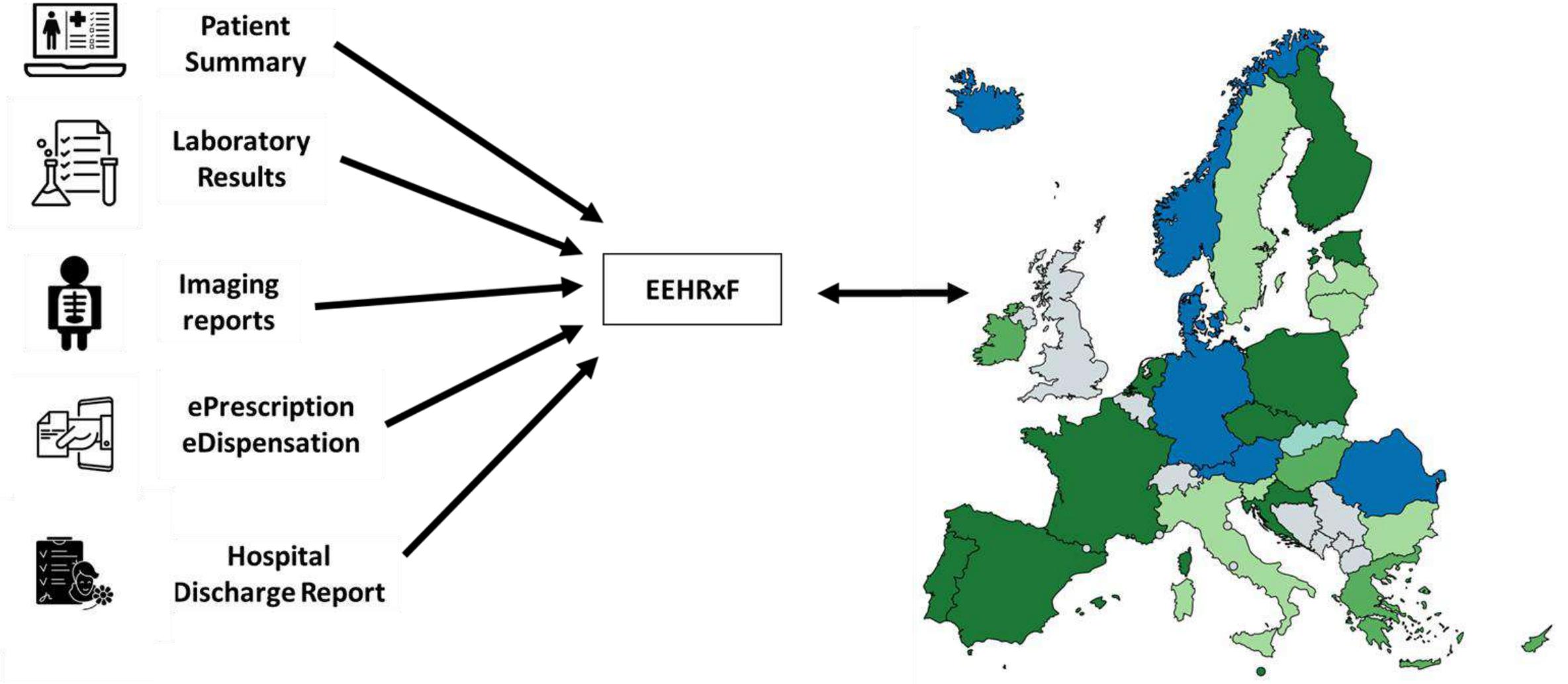


- 01 Promote the **adoption of the EEHRxF in all EU EHR systems**
- 02 Provide adequate **technical specifications & implementation guides to allow the adoption of the EHDS regulation across MS**
- 03 Promote the **EHR systems' & wellness apps' certification & labelling processes** in the European digital single market
- 04 Engage relevant **stakeholders and gather feedback**
- 05 Promote **EHRs & cross border healthcare use cases beyond the MyHealth@EU**
- 06 Provide **proof of sustainability of the selected use cases**
- 07 Expand on previous & cooperate with other **projects and initiatives in the domain of digital healthcare/interoperability** in EU

The European Electronic Health Record Exchange Format (EEHRxF)



The European Electronic Health Record Exchange Format (EEHRxF)



EEHRxF

Implementation guides

- Coding systems** →
- SNOMED CT
 - LOINC
 - ...

- Value sets** →
- MVC
 - FHIR
 - eHDSI

- FHIR profiles** →
- Links
 - Relationships

Information Models

- Common models** →
- Patient
 - Practitioner
 - Organisation
 - Medication
 - Human Name
 - Address
 - Contact Information

- Specific models** →
- Header
 - Subject
 - Author
 - ...
 - Metadata
 - Body
 - Result data
 - Test Results
 - Supporting information

Mapping Xt-EHR Logical Models to FHIR IGs

Group 1 Mapping from [Address model](#) to [Address \(EU\)](#)

Source Concept Details	Relationship	Target Concept Details	
Codes from https://www.xt-ehr.eu/specifications/fhir/StructureDefinition/EHDSAddress		Codes from http://hl7.eu/fhir/base-r5/StructureDefinition/Address-eu	
use	is equivalent to	use	C.5.1 - Use
type	is equivalent to	type	C.5.2 - Type
text	is equivalent to	text	C.5.3 - Text
street	is narrower than	line	C.5.4 - Street
	is equivalent to	line.extension[streetName]	C.5.4 - Street
houseNumber	is narrower than	line	C.5.5 - House number
	is equivalent to	line.extension[houseNumber]	C.5.5 - House number
pOBox	is narrower than	line	C.5.6 - P.O. Box
	is equivalent to	line.extension[postBox]	C.5.6 - P.O. Box
city	is equivalent to	city	C.5.7 - City
postalCode	is equivalent to	postalCode	C.5.8 - Postal code
country	is equivalent to	country	C.5.9 - Country
	is equivalent to	country.extension[countryCode]	C.5.9 - Country

General requirements for EHRs and system interfaces



Provide an interface



Patient safety



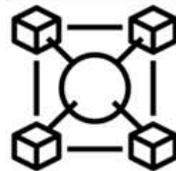
Can be supplied and installed



Structural metadata
Describes relationships among various parts of a resource.



Reliable and secure

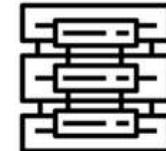


Interoperability and compatibility

General requirements

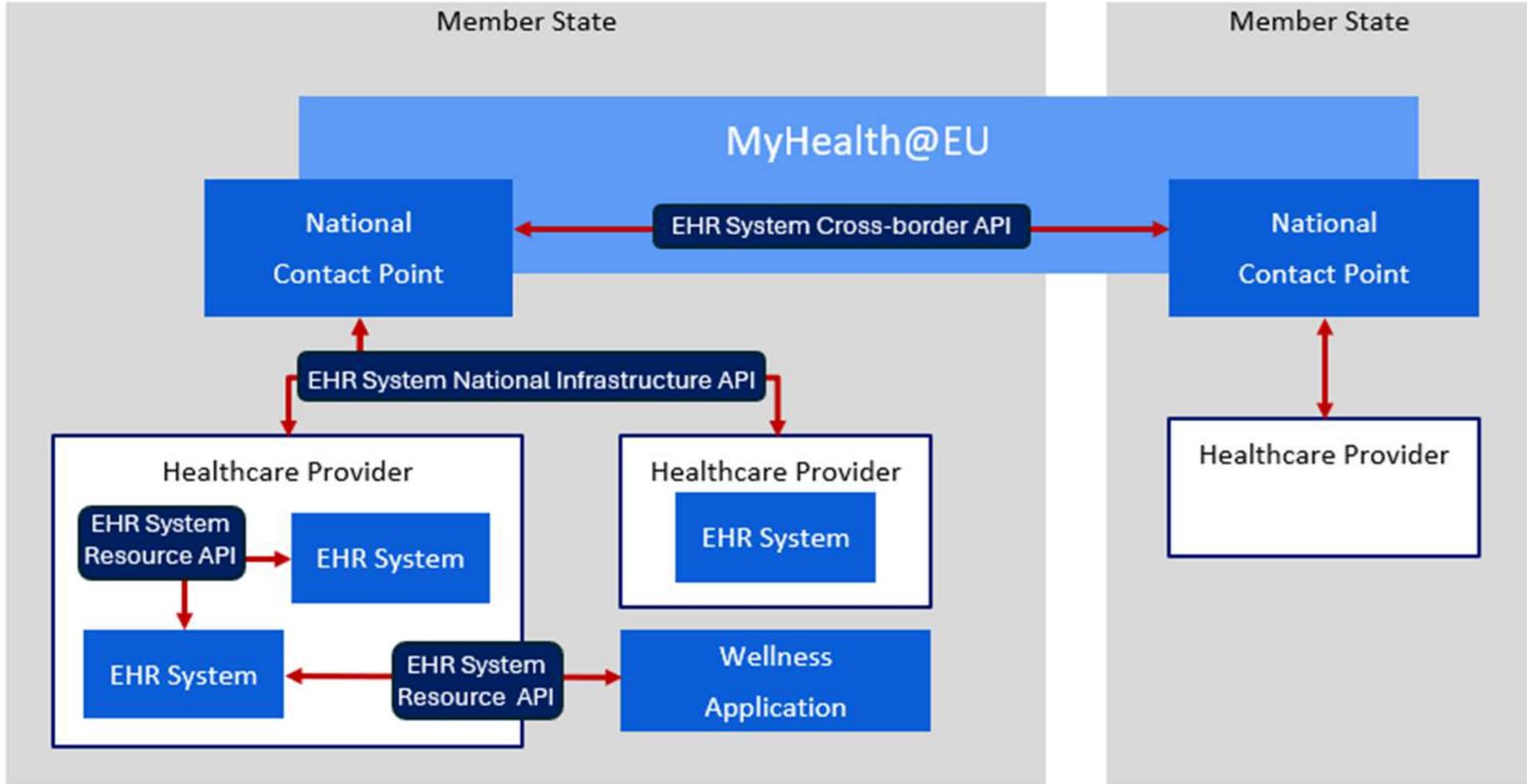


Uphold the rights of natural persons



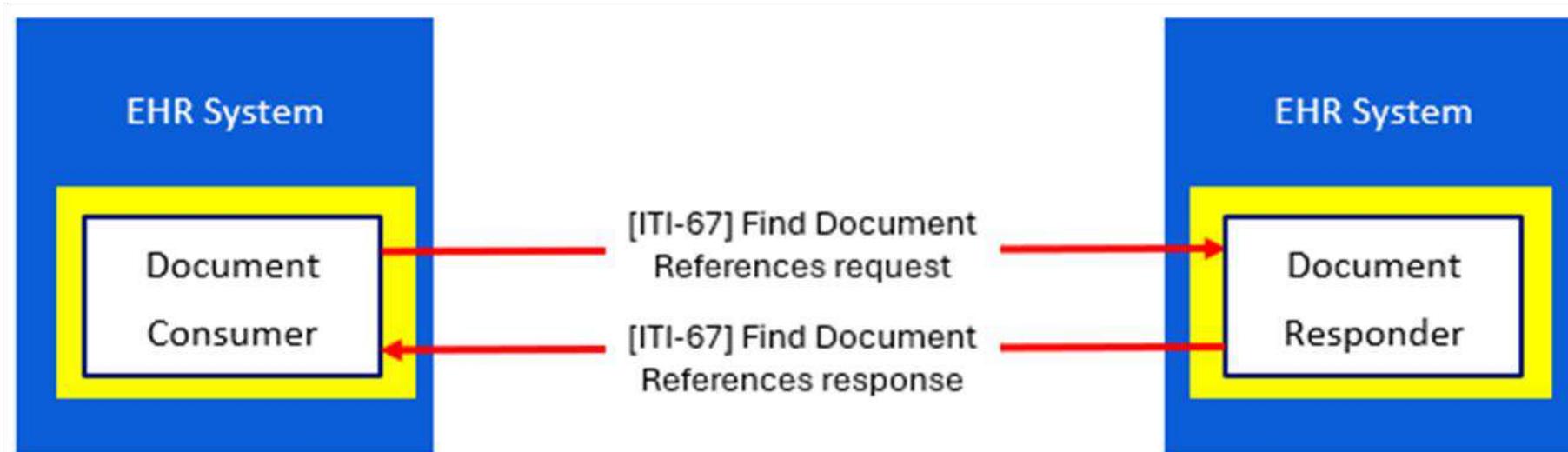
Administrative metadata
Facilitate the management of resources.

Interoperability component



Interoperability component

Query for available personal electronic health data document(s)



The **Find Document References** transaction of the IHE MHD Profile is used to find DocumentReference Resources that satisfy a set of parameters. The result of the query is a FHIR Bundle containing DocumentReference Resources that match the query parameters.

Entry/production of data

Level 1: Unstructured and generic metadata only

(e.g. date, author organisation, etc)

Level 2: Structured data and metadata without coding

Level 3: fully structured data

Stakeholder engagement plan

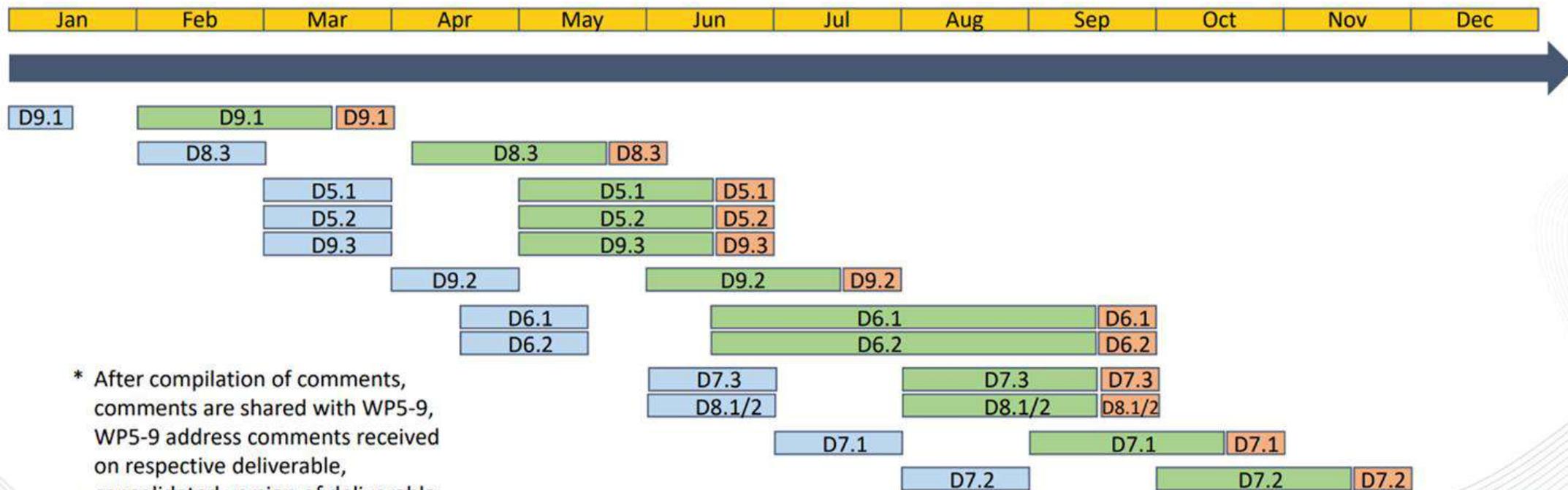
Timeline for Stakeholder Consultation Procedure			
Deliverable	Briefing Workshop	Consultation phase (6 weeks)	
		Start date	End date
D5.1 Technical Requirements for EHRs and key system interfaces	2025-05-12	2025-05-12	2025-06-20
D5.2 Technical Requirements for EEHRxF metadata	2025-05-12	2025-05-12	2025-06-20
D6.1 Patient Summary: Implementation guides on EEHRxF, functional and technical requirements and specifications for EHR systems	2025-06-03	2025-06-15	2025-09-15
D6.2 Electronic prescription and electronic dispensation: Implementation guides on EEHRxF, functional and technical requirements and specifications for EHR systems	2025-05-28	2025-06-15	2025-09-15
D7.1 Laboratory results and reports: Implementation guides on EEHRxF, functional and technical requirements and specifications for EHR systems	2025-09-02	2025-09-01	2025-10-13
D7.2 Medical images and reports: Implementation guides on EEHRxF, functional and technical requirements and specifications for EHR systems	2025-09-23	2025-09-30	2025-11-11
D7.3 Discharge reports: Implementation guides on EEHRxF, functional and technical requirements and specifications for EHR systems	2025-07-16	2025-07-31	2025-09-11
D8.1 Classification and functional profiles of EHR systems guidelines	2025-06-16	2025-07-01	2025-09-14
D8.2 EHR Conformity Assessment Scheme assertion document and checklists	2025-07-22	2025-08-04	2025-09-14
D8.3 Wellness application labelling guidelines	2025-03-31	2025-03-31	2025-05-12
D9.1 Requirements and use cases on the availability of health data in cross-border telemedicine services	2025-01-21	2025-02-03	2025-03-17
D9.2 Technical specifications on the availability of health data in cross-border telemedicine services	2025-05-21	2025-05-29	2025-07-11
D9.3 Requirements for Large-Scale Uptake of Telemedicine Service	2025-05-07	2025-05-14	2025-06-25

Stakeholder engagement plan

Tentative timeline for announcement and consultation phases per deliverable

Announcement phase D9.1
 Consultation phase D9.1
 Compilation of comments* D9.1

2025



* After compilation of comments, comments are shared with WP5-9, WP5-9 address comments received on respective deliverable, consolidated version of deliverable submitted to EC





Extended EHR@EU Data Space for Primary Use

**T H A N K
Y O U**

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Work Package 5

Work Package 5 - General requirements for EHRs and system interfaces

T5.1 General, interoperability, security and logging requirements for EHR systems

Develop requirements for implementing standardised EHR systems in the EU

T5.2 EHR data input and output requirements for algorithm-based clinical decision support (primary use of data)

Identify challenges regarding the data and metadata structures and requirements for communication interfaces between EHR systems and algorithm-based tools.

T5.3 Requirements for identification and authentication processes across Europe

Addresses patient identification and define patient identifiers in cross-border exchange

T5.4 Metadata standards for the EEHRxF

Define metadata to classify and identify information across domains

Define implementation guide with metadata standards for clinical documentation

D5.1 Technical Requirements for EHR systems and key system interfaces

Aim of D5.1: *Ensure the secure, interoperable, and efficient exchange of personal electronic health data in the European Electronic Health Record Exchange Format (EEHRxF)*

by outlining: 1) General, 2) Interoperability, 3) Security and Logging Requirements for Electronic Health Record (EHR) Systems

Scope (of the requirements)

- Requirements cover only two harmonized components of EHR systems
 - European Interoperability Software Component
 - European Logging Software Component

- Each EHR system that process priority categories of personal electronic health data (Art. 14 EHDS) FALLS in the scope and WILL HAVE TO implement requirements to be in line with EHDS
 - E. g.: *systems intended to be placed on market, SaaS licensing systems, in-house systems*
- Relevance of requirements depend on the intended purpose of the EHR system

Purpose of the deliverable

1) Provide Guidance for Implementation, 2) Ensure Compliance, 3) Facilitate Interoperability

Main Target Group: EHR systems manufacturers and experts

EHDS Regulation

- Provides list of essential requirements for EHR systems = ANNEX II of the EHDS
Deliverable 5.1 lays down detailed technical (normative as well as non-normative) requirements

EHDS Annex II – structure

- General Requirements - *system performance, patient rights, safety, security and integrity, instructions for supply, installation, and operational procedures*
- Interoperability Requirements - *design and technical capabilities needed for the secure exchange and receipt of personal electronic health data*
- Security and Logging Requirements - *mechanisms for identification and authentication of health professionals, logging of access events, and the tools for log review and analysis*

D5.1 – General Requirements

General requirements lays down the foundation for every harmonised EHR component:

1. Performance and Patient Safety
 - *States the performance and patient-safety threshold the software must meet in clinical use*
2. Design and Instructions for Supply, Installation, and Operational Integrity
 - *Describes, how it must be packaged, installed and updated without degrading that threshold*
3. Interoperability, Safety and Security Features Upholding Rights of Natural Persons
 - *Turns the duty to respect rights of natural persons into concrete interoperability, safety and security controls*
4. Interoperability and Compatibility with other Products
 - *Ensure that same guarantees apply when the component exchanges data with external devices or apps*

D5.1 - Interoperability Requirements

Interoperability requirements section translate the interoperability duties into concrete software behaviour and is composed of following chapters:

1. Interface for Access in EEHRxF
 - *Details the outward API through which data are exposed in EEHRxF*
2. Capability to Receive Data in EEHRxF
 - *Details inbound channel for receiving that same format*
3. Provision of Access to Data in EEHRxF
 - *Specifies two-way access node that must both ingest and re-serve data*
4. Granularity and Structured Data Entry
 - *Outlines rules for entering structured information at a granularity that can be exported loss-free*
5. Prohibition of Access or Sharing Restrictions
 - *Details obligations preventing placing barriers or restriction on data use and sharing*
6. Prohibition of Export Restrictions for System Replacement
 - *Specifies rules preventing restrictions or undue burden on data export*

D5.1 - Security and Logging Requirements

Security and Logging requirements define mechanisms for identification and authentication, logging of access events, tools for log review and analysis:

1. Identification, Authentication and Authorization
 - *Outlines rules for secure electronic identification for both health professionals and other users*
2. Comprehensive Logging of Access Events
 - *Details rules ensuring that every instance of access to patient data is logged, traceable, and auditable*
3. Tools for Log Review and Analysis
 - *Specifies rules ensuring that log data is not merely stored but actively utilized for auditing, anomaly detection, compliance verification, and regulatory reporting*
4. Support for Retention Periods and Access Rights
 - *Defines retention and access policies*

D5.1 – Annex 1: European Interoperability Software Component

Annex 1 provides illustrative technical guidance for implementing the European interoperability software component of EHR systems:

Relevant areas / component functionalities covered:

- Searching and retrieving priority data categories
- API-based data exchange within and across healthcare provider domains, at national and cross-border levels
- Application of standards like HL7 FHIR or IHE XDS/MHD
- Mapping actors and transactions for interoperability scenarios, using diagrams and example use cases

D5.1 – Annex 2: Scrutiny Testing Requirements for Harmonised Components

Annex 2 outlines testing and validation approaches that can be used to demonstrate compliance with the technical requirements of harmonised components :

Key elements include:

- Test scenarios for accessing and retrieving personal electronic health data
- Functional overviews of FHIR-based transactions as defined in the IHE MHD profile
- Detailed mappings of:
 - Roles (e.g. Document Consumer/Responder)
 - Required parameters (e.g. Patient ID, Document Category)
 - Technical constraints

Work Package 6

Work Package 6 - Electronic prescriptions and patient summary towards EHDS

Lead: Italy
Co-lead: Sweden

D6.1 – Patient Summary:

Implementation guides on EEHRxF, functional and technical requirements and specifications for EHR systems

Stakeholder consultations:

14.07.2025-15.09.2025

Lead: Sweden
Co-lead: Italy

D6.2 – Electronic prescription and electronic dispensation:

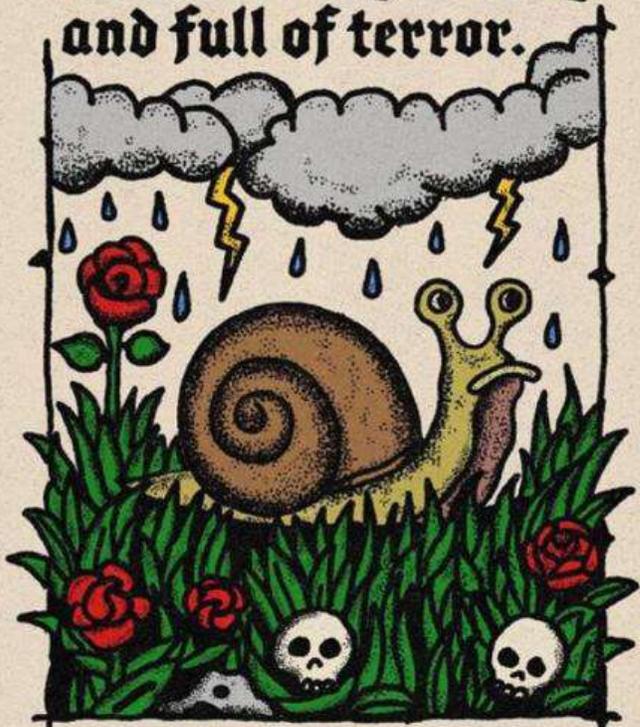
Implementation guides on EEHRxF, functional and technical requirements and specifications for EHR systems

Stakeholder consultations:

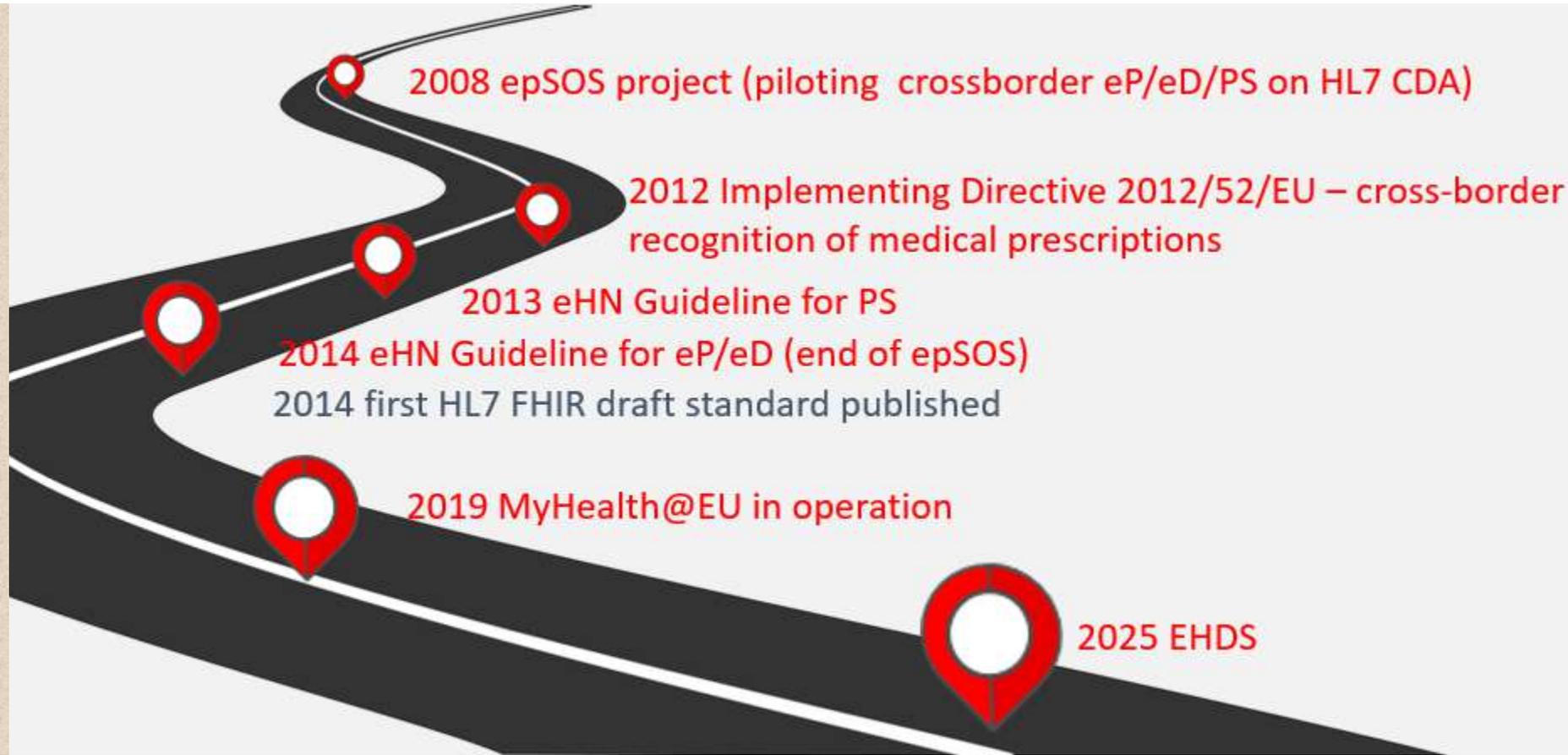
15.06.2025-15.09.2025

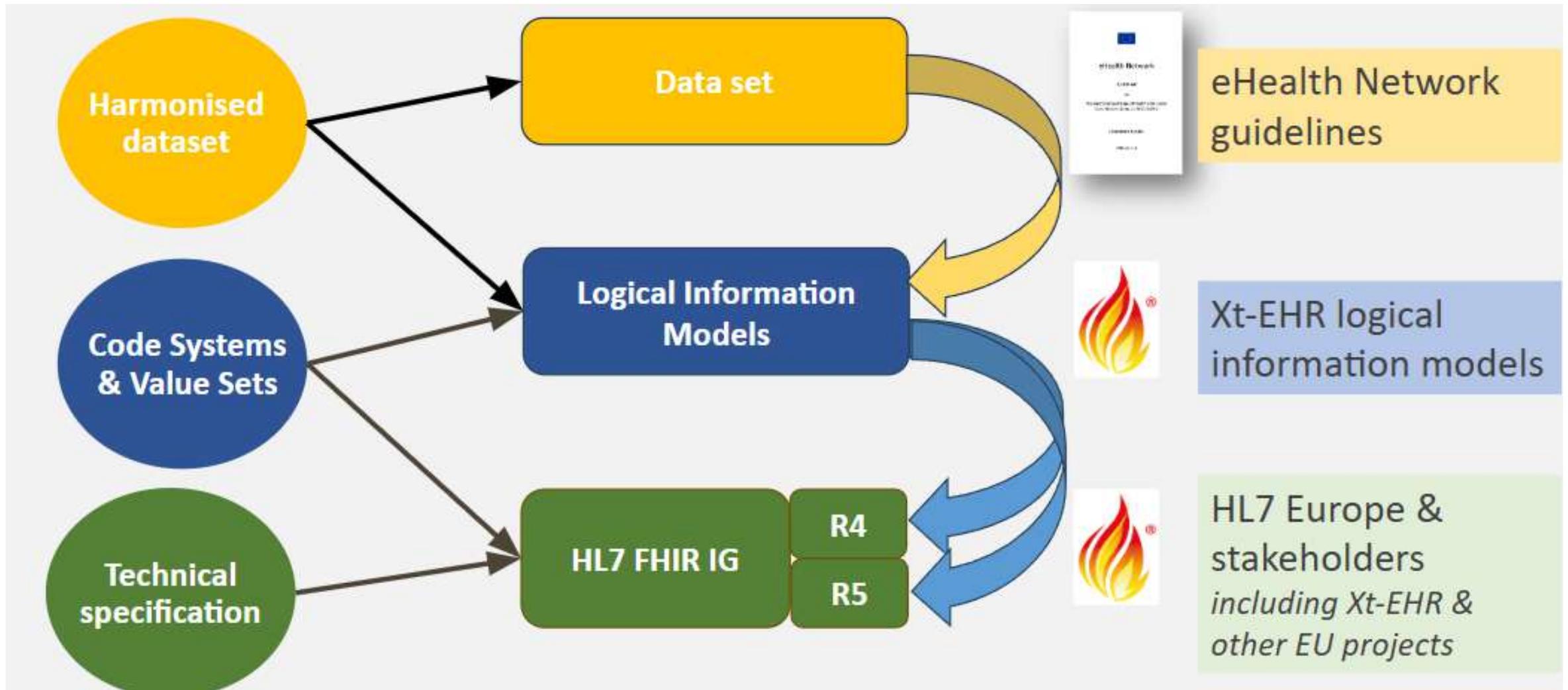
A new leg of a long journey!

The journey is long
and full of terror.



Yet I inch forward.





Scope of D6.2 ePrescription and eDispensation

- **Prescription** for
- a medicinal product
- issued by a health professional
- for a patient
- to be dispensed by a pharmacy.

Dispense of

- a medicinal product
- by a pharmacy,
- including online pharmacy,
- to a natural person
- based on a prescription.

Declining a dispense

Scope of D6.1 Patient Summary

- Alignment with ISO/HL7 FHIR International Patient Summary
- Survey on the implementation of PS by EU member states
- Large overlap with reports: common models
- Patient Summary as a document but also as individual sections

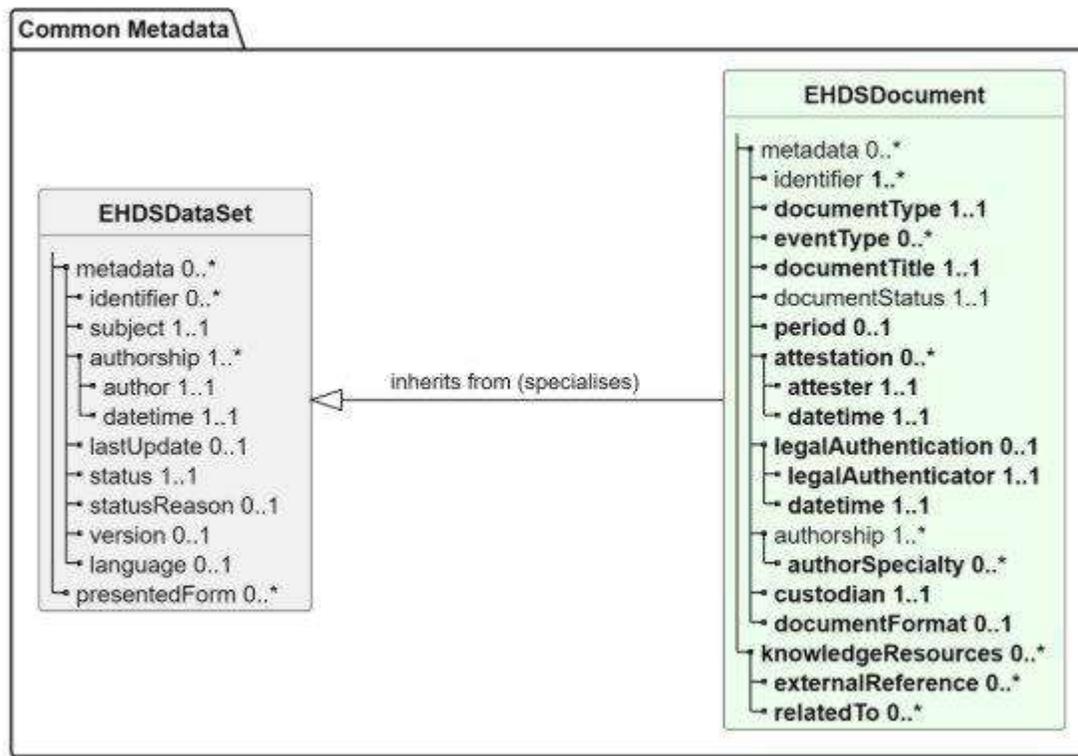
EHDS Recital 25: *Where such priority categories of data represent groups of electronic health data, this Regulation should apply to both the groups as a whole and to the individual data entries included in those groups.*

Common metadata, but not everything is a document

ePrescription

eDispensation

Patient Summary parts:
 EHDSCondition,
 EHDSProcedure,
 EHDSDeviceUse,
 etc



Patient Summary

Discharge Report

Medical Test Result Report

Medical Imaging Report

The Deliverable:

EHR
Extended EHR@EU Data Space for Primary Use - XE EHR
Proposal number: 101128085
Stakeholder Consultation
DRAFT
D6.2 Electronic prescription and electronic dispensation Implementation guides on EDHRS, functional and technical requirements and specifications for EHR systems



EHDS Logical Information Models
0.1.0 - ci-build
Home Introduction EHDS Use Cases About Artifacts Download
Table of Contents ePrescription & eDispensation
EHDS Logical Information Models, published by Xt-EHR. This guide is not an authorized publication; it is the continuous build for version 0.1.0 built by the FHIR (HL7® FHIR® Standard) CI Build. This version is based on the current content of <https://github.com/Xt-EHR/xt-ehr-common/tree/stakeholder-consultation-D6-2> and changes regularly. See the Directory of published versions.
6 ePrescription & eDispensation
6.1 Information Models
6.1.1 EHDS information models for ePrescription:
Components of a prescription and their representation as EHDS information models:
Prescription
EHDSMedicationPrescription
1..1 1..* 0..*
PresentedForm
• Information Models
• FHIR Implementation Guide
• IHE Profile
• Supporting Information



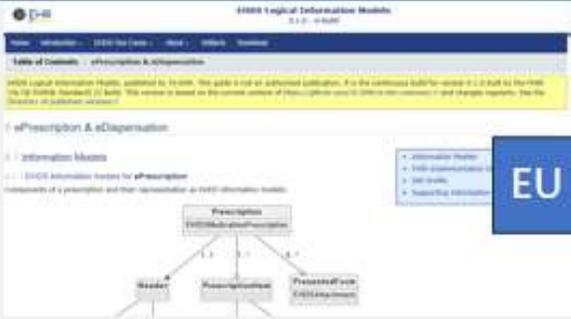
HL7 | HL7 Europe Medication Prescription and Dispense
0.1.0-ballot - ballot 150
Europe
Home Introduction Functional Implementation About Artifacts R5 IG
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This page is part of the HL7 Europe Medication Prescription and Dispense (v0.1.0-ballot: STU of 1 Ballot 1) based on FHIR (HL7® FHIR® Standard) R4. This is the current published version. For a full list of available versions, see the Directory of published versions.
1 Home
Official URL: <http://hl7.eu/fhir/mpd/ImplementationGuide/hl7.fhir.eu.mpd> Version: 0.1.0-ballot
Draft as of 2025-06-04 Computable Name: hl7.fhir.eu.mpd
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1.1 Scope
The scope of this implementation guide is **Medication Prescription and Dispense** in the **European Context**. It is coherent with the European eHN Guidelines and preparatory EHDS work.
This implementation guide is designed to be a flexible basis for national specifications as well as crossborder services.
Additional information can be found in the Scope and Content section.
• Scope
• Purpose
• Background

Use cases,
background information,
terminology considerations,
data sets,
description of IGs

Computable logical models,
aiming to keep consistency
across different data categories

FHIR profiles,
implementation recommendations,
mappings from models to FHIR,
R4 and R5 versions when available

EHDS Logical models (Xt-EHR)



EU requirements

HL7 Europe FHIR IG



R4

R5

Global requirements

Global IGs: IHE MPD for eP/eD HL7/ISO Patient Summary



MyHealth@EU crossborder specification



Transform

Transform

National Specifications



Xt-EHR Stakeholders consultation D6.2

June 15 – September 15

- Deliverable D6.2 (Document)
- EHDS logical models
- HL7 Europe FHIR IG

HL7 Europe ballot June 15 - August 31

Xt-EHR Stakeholders consultation D6.1

July 14 – September 15

- Deliverable D6.1 (Document)
- EHDS logical models
- HL7 Europe FHIR IG - probably early draft

Work Package 7

Work Package 7 - New services for EHR systems towards EHDS – Lead: PT



Lead: CZ



Lead: NL/CY



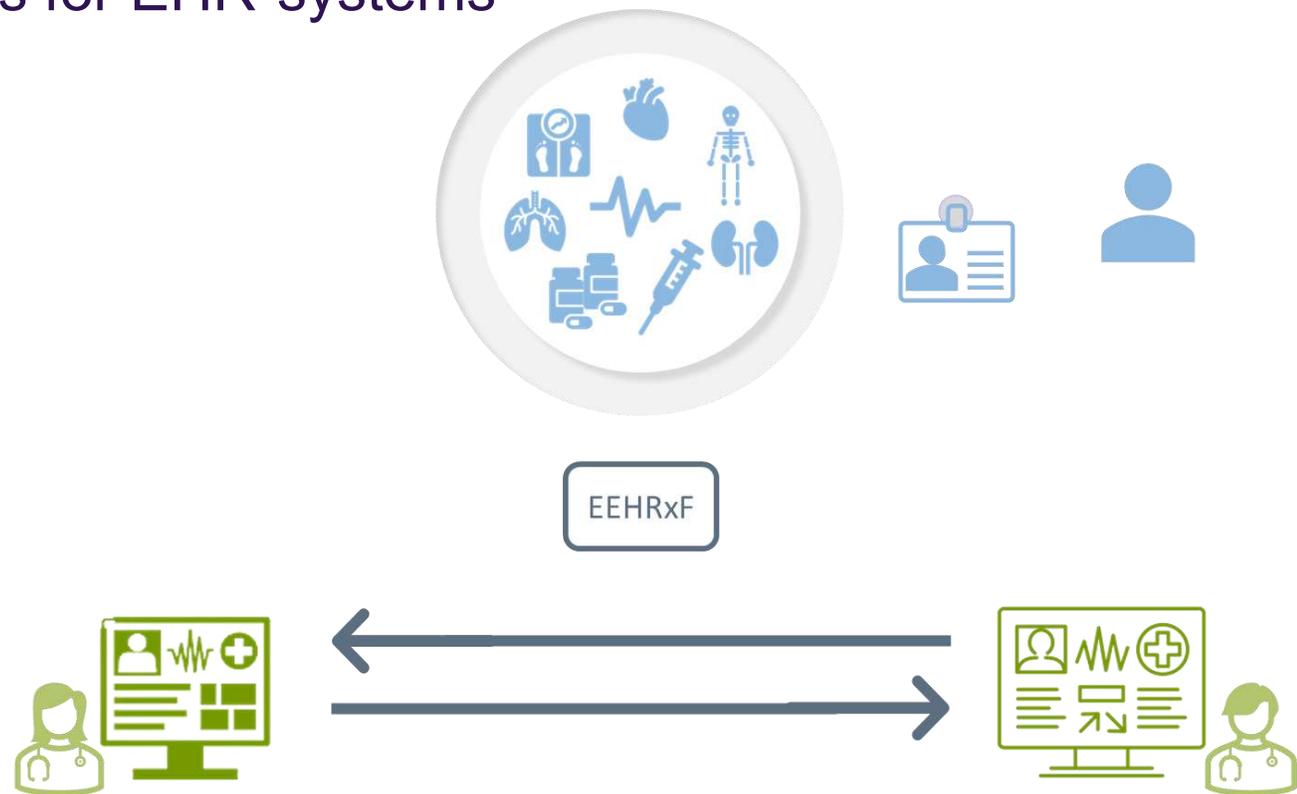
Lead: CZ

Content

- Purpose and scope, determined by MS/HCP needs
- Address the 2011 Directive on patient rights in crossborder healthcare
- Use case descriptions
- Consider semantic and technical specifications
- Provide Dataset



- To deliver the Implementation Guides for EHR-systems
- Building the EEHRxF
- Interoperability



Content of Xt-EHR Implementation Guides for EHR-systems

- Introduction
- Use cases
- References to EHDS articles (Annex II)
- Logical Information Model
- EU FHIR Implementation Guide
- Technical specifications for transactions when applicable

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HL7 Europe and IHE-Europe Join Forces to support the EHDS



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WP/ Number of Deliverable	Deliverable Name	Stakeholder consultation phase -> tentative date for when deliverable is shared for comments - deadline to provide comments
WP7/ D7.1	Medical test results, including laboratory and other diagnostic results and related reports: Implementation guides on EEHRxF, functional and technical requirements and specifications for EHR systems	01.09.2025 - 13.10.2025
WP7/ D7.2	Medical imaging studies and related imaging reports: Implementation guides on EEHRxF, functional and technical requirements and specifications for EHR systems	30.09.2025 - 11.11.2025
WP7/ D7.3	Discharge reports: Implementation guides on EEHRxF, functional and technical requirements and specifications for EHR systems	31.07.2025 - 11.09.2025

Work Package 8

Conformity Assessment

D8.2

- To be placed on the market or put into use within the EU, EHR systems must contain the two harmonised software-components, namely:
 - The interoperability component,
 - and the logging component.
- These ‘components’ describe capabilities of EHR systems.
 - The interoperability component provides the capability to import/export data that falls under the priority categories in the EEHRxF.
 - The logging component provides the capability to generate logs that can be used in the health data access service to provide transparency on data access.

- A significant aspect of the EHDS is the establishment of common standards and compliance rules to ensure interoperability of data and digital solutions for healthcare across EU member states.
- This includes mandating that all electronic health record systems (EHR systems) align with the European electronic health record exchange format (EEHRxF), thereby facilitating seamless data exchange.
- WP8 is aiming to support the conformity schemes that are to be developed for the implementation of EHDS provisions.

The EHR systems built according to the specifications need to be tested

- WP8/D8.2, provide the basis for a Conformity Assessment Framework for EHRs.
 - A set of **testable assertions** that can be added to the test tools required to support interoperability certification.
 - **Means of verification** such as checklists for other types of requirements.
- This set of evaluation and testing criteria is intended to enable conformity assessment of EHR systems across Europe, using a **pragmatic readiness-based approach and according to the purpose of use of the EHR system.**

- CAS has two distinct parts
 - one focusing on the **governance** of the conformity assessment scheme (how to apply conformity assessment in the context of the EHDS regulation) and
 - the **CAS content** (testable assertions, test tools and means of verifications).

- **Progressive adoption** to allow EHR vendors to adopt, test and incorporate EEHRxF into their products.
 - Comply with EHDS regulation articles on **self-assessment procedures**.
 - **Ensure equitability** of member states to incorporate the governance model.
- Propose CAS Owner based on Article 94 (EHDS Board)
 - Propose EU declaration of conformity (Alignment with Article 39)

- Need for coordination at the European level:
 - The development of a consistent set of test tools that are actively maintained
 - The documentation and maintenance of test assertions integrated with the test tools
 - A feedback and release process on the above tools and assertions
 - The publication process of the conformity assessment reports
 - An audit process that verifies the quality of self-assessment retrospectively (based on ISO17025)
 - A feedback and review process on the conformity assessment efficiency

- Content in the form of testable assertions and means of verification **is driven by multiple sources** such as previously established CAS models (EUROCAS, IHE CAS, SiAS, Label2Enable CAS, etc), WP5, WP6 and WP7 set of specifications, EN ISO/HL7 EHR-S FM model requirements.
- All of these assertions are described in such a way that they can be tested and verified to enable an **unbiased CAS self-assessment**.
- Testable assertions cover both **interoperability** and **logging** specifications.

- The requirements for content testing are set out in the specifications (the underlying standards, XML/JSON schemas, tables, and, for FHIR content, StructureDefinition and the associated conformance resources).
 - As a consequence, we recommend not writing testable assertions that are too fine-grained, since these would simply be paraphrases of the Structure Definitions that software developers will use to specify their software.
- On the contrary, it is useful for developers of both EHR and testing tools to compile a list of high-level testable assertions that refer to the detailed technical specifications.
- This allows them to find everything they need to specify a product that will conform to the EHDS in one place.

- The **template for the testable assertions**, will have the same level of details and use the same wording.
- A template could be something like:
 - A product claiming conformance to the *[EHDS priority category]* as a *[Content Producer]* shall produce a FHIR [Resource type] that ...
 - Example: "A product claiming conformance to the Laboratory Result Report as a Content Producer shall produce a FHIR Bundle resource of type "document" that with all the required elements defined is the EU Laboratory Result Report StructureDefinition (<http://hl7.eu/fhir/laboratory/StructureDefinition/Bundle-eu-lab>) populated."

- How to test (needed testing tools capabilities) taking into account
 - Current testing tools used for myHealth@EU services
 - MS capabilities and deployed testing environments
 - Reduce overhead for EHR vendors

- Various questions from the vendor's side need to be addressed in the deliverables. Without their involvement, the implementation is at risk.
- For example:
 - Is my product within the scope of EHR system requirements of EHDS?
 - Which EHDS requirements must I design and implement in my product?
 - What do I have to do to demonstrate compliance to EHDS essential requirements?