

# Vers une gestion des résumés de communications en médecine de famille? 3CGP : un outil en développement

Marc Jamouille  
Médecin de famille

Atelier du CISP Club, Angers 2013

# Besoins d'information en MG/MF

- Spécifiques à la médecine générale
- Faible prévalence
- Orientés patients
- Le long de la ligne du temps
- Biologique & anthropologique
- Accompagner et/ou guérir

# perte d'information

- Pas de collection de données
- Pas de communication
- Pas de normalisation
- Pas de publication
- Inconnu
- Jamais publié
- Inaccessible
- Pas de dépôt de connaissance

# evolution

1987 : Q CODES H; Lamberts- Amsterdam

2005-6 : Metaclinical WICC Heidelberg De

2007 : 3C GP/FM WICC Dunedin NZ

2007 : 3CGP Paris Wonca Europe

2014 : 3CGP ver.2 Lisbonne Wonca Europe

## **Q-CODES (level 1)**

Amsterdam (+/- 1987) Dep of gen practice. Prof Lamberts  
Used for manual indexing. Translated in French (mj)

Q0 processus de soin ( liés au patient)

Q1 processus de soin (non liés au patient)

Q3 Tâches de support

Q4 Fonctionnement personnel

Q5 Patient's categories

Q6 Research

Q7 Teaching

2007 8 domains

3C GP/FM

## Core Content Classification of GP/FM

- Patient
- Dispensateur
- Structure de la pratique
- Catégories de patients
- Hazards
- Ethique
- Formation, évaluation
- R & D outils

- ◆ QP Patient
- ◆ QD Doctor
- ◆ QS Structure
- ◆ QC Categories
- ◆ QH Hazards
- ◆ QE Ethics
- ◆ QT Knowledge
- ◆ QR Research

# Voyez l'exemplaire de bureau

3CGP/FM **Core Content Classification of GP/FM** © marc@jamouille.com ver 0.2 Oct. 2007

Domain name

Category name  
Sub-category name Code

**C Patient's categories** QC

Age groups QC1  
 Infants QC11  
 Children QC12  
 Adolescents QC13  
 Ageing QC14  
 Gender issues QC2  
 Men's health QC21  
 Women's health QC22  
 Social high risk QC3  
 Ethnic subgroups QC31  
 Migrants & refugees QC32  
 Homeless QC33  
 In jail QC34  
 Addiction QC4  
 legal products QC41  
 street drugs QC42  
 gaming QC43  
 Assault QC5  
 battered women QC51  
 victims of abuses QC52  
 torture QC53  
 ritual mutilations QC54

**D Provider (Doctor) issues** QD

Communicator QD1  
 Encounter management QD11  
 Doctor patient relationship QD12  
 Counselling QD13  
 Systemic QD14  
 Caregiver QD2  
 Problem solving QD21  
 Comprehensiveness QD22  
 Health education QD23  
 Clinical skills QD24  
 Continuity of care QD25  
 Palliative care QD26  
 A & E QD27  
 Care manager QD3  
 Health risk management QD31  
 Health issue management QD32  
 Health status assessment QD33  
 Outcome assessment QD34  
 Genetic issues QD35

**H Hazards** QH  
 Environmental QH1  
 Indoor pollution QH11  
 Outdoor pollution QH12  
 Biological QH2  
 Nuclear QH3

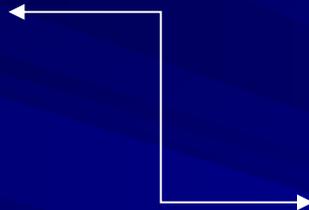
**P Patient issues** QP  
 Diagnostic process QP1  
 Availability diag. process QP11  
 Safety diagnostic process QP12  
 Therapeutic process QP2  
 Availability of ther. proces QP21  
 Over The Counter QP22  
 Comfort ther. process QP23  
 Safety of ther. process QP24  
 Practice & health care organisation QP3  
 Availability of health care QP31  
 Accessibility of health care QP32  
 Acceptability health care QP33  
 Safety of health care org. QP34  
 Participation QP36  
 Patient's views QP4  
 Patient demand QP40  
 Patient appraisal QP41  
 Patient satisfaction QP42  
 Patient knowledge QP43  
 Patient autonomy/depend QP44  
 Patient cultural backgr. QP45  
 Patient expenses QP46  
 Patient health habits QP5  
 Nutrition QP51  
 Sexuality QP52  
 Self care & hygiene QP53  
 Travel QP54

**R R & D tools** QR  
 Science philosophy QR1  
 Epidemiology QR2  
 Pharmacoepidemiology QR21  
 Community health QR22  
 Functional status QR3  
 Research methods QR4  
 Qualitative study QR41  
 Research network QR42  
 Classification QR5  
 Scales & Questionnaires QR6  
 Health economy QR7

# 3C GP/FM

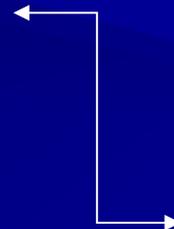
Domaine

Knowledge Management QT



Categories

Training QT4



Sous categories

Trainers & Supervisors QT43

# categories de patients QC

- groupes d'âge QC1
- genre QC2
- haut risque social QC3
- dépendance QC4
- violence QC5

# Violence QC5

■ Femmes battues QC51

■ victimes d'abus QC52

■ torture QC53

■ mutilations ritueles QC54

# Knowledge management QT

- Enseignement QT1
- Formation QT4
- Assurance de qualité QT5
- Edition QT6
- Report QT7



- Le croisement de la CISP et de 3CGP/FM



- Permet l'indexation documentaire du point de vue clinique et métaclinique

# Résultats obtenus

- Paris 2007
- Covilha, 2013

# Paris 2007

[Create profile](#)  
[Submit document](#)  
[Advanced search](#)  
[Contact us](#)

[ICPC-2 classification](#)  
[3CGPFM classification](#)

Stands for Core Content Classification of General Practice / Family Medicine and is an authority list (a list of concepts) elaborated by Marc Jamouille and used experimentally

- ⊕ (QC) C Patient's categories
- ⊖ (QD) D Provider (Doctor) issues
  - ⊕ (QD1) Communicator
  - ⊕ (QD2) Caregiver
  - ⊕ (QD3) Care manager
  - ⊖ (QD4) Agent of prevention
    - (QD41) Primary prevention
    - (QD42) Secondary prevention
    - (QD43) Tertiary prevention
    - (QD44) Quaternary prevention
  - (QD5) Complementary medicine
  - (QD6) Medico legal issues
  - (QD7) Professional image & identity
  - (QD8) Health provider personal life
- ⊕ (QE) E Ethics
- ⊕ (QH) H Hazards
- (QO) O Others
- ⊕ (QP) P Patient issues
- ⊕ (QR) R R & D tools
- ⊕ (QS) S Structure of practice
- ⊕ (QT) T Training & Knowledge management

[Create profile](#)  
[Submit document](#)  
[Advanced search](#)  
[Contact us](#)

[ICPC-2 classification](#)  
[3CGPFM classification](#)

## Search result

Record(s) found: 12

Context	Id	Abstract Title	ICPC	3CGPFM
Wonca 2007	1172	A perspective of antenatal care in Cukurova	W78	QS12 - QP32
Wonca 2007	15	Audit of Use of Periconceptual Folate in Prevention of Neural Tube Defects in Singapore	W78 - *50	QD31 - QR21
Wonca 2007	580	Defining the first admission time of pregnant patients to obstetrics and gynecology clinic of Ministry of health Ankara training and research hospital and evaluation	W78	QS13 - QP32

Wonca 2007 282 Evaluation of dispeptic and genitourinary symp relation with laboratory findings

Wonca 2007 1129 Family doctors in Japan with specialist's support most of pregnancy.

Wonca 2007 966 Growth from birth to early infancy in offspring

Wonca 2007 1094 Influence of 2006 rubella vaccination campaign serologies

Wonca 2007 1104 Pregnant undocumented migrants need better

Wonca 2007 740 Screening for trisomy 21 in pregnant women: i patients

Wonca 2007 25 Sexual activity during pregnancy

Wonca 2007 349 Sociocultural and economical situation of the p outpatient pregnancy care of ministry of health hospital

Wonca 2007 731 Why don't GP's appear to be concerned with re

Record(s) found: 12

ICPC	3CGPFM
W78	QS12 - QP32
W78 - *50	QD31 - QR21
W78	QS13 - QP32
W78 - D87 - U71	QD33
W78	QD34 - QC22 - QS13
P17 - W78	QC11 - QD33

# QD8 Health provider personal life

## Search result

Record(s) found: 20

Context	Id	Abstract Title	ICPC	3CGPFM
Wonca 2007	1097	Are GPs' feelings of burnout and discontent reflected in the psychological content of their consultations?	P78	QT41 - QT56 - QD8
Wonca 2007	186	Burn-out among parisian gps : a telephone hotline		QD8
Wonca 2007	1013	Burnout among resident family physicians	P78	QD8 - QT42
Wonca 2007	139	Burn-out syndrome among Parisian GPs : what are the expected solutions ?	P74	QD8 - QR2
Wonca 2007	1045	Burnout syndrome among participants of the programme additional training (pat) in family medicine	P78	QD8 - QT42
Wonca 2007	1111	Correctional health care for general practitioners: working circumstances, work satisfaction and burnout	P78	QC13 - QC34 - QD8
Wonca 2007	559	Do we as health care workers folloow the guides for breast cancer and cervical cancer screening	X37 - X41	QT52 - QD8 - QD42
Wonca 2007	602	Gp's burn-out syndrome: prevalence, causes and relevance in general practice.		QD8
Wonca 2007	1101	Gut feelings in general practice: a practical definition		QD8 - QR41
Wonca 2007	1096	Health care and promotion in the family health program in Brazil-report of an experience with a group of diabetes II patients in a brazil rural community	T90	QD8 - QD23 - QR41
Wonca 2007	47	Life quality associated with health of general practitioners – family physicians in southeastern europe		QD33 - QD8
Wonca 2007	430	Living conditions between general practionner women and others professionals women with the same level study : a comparative study		QT41 - QD8 - QR41
Wonca 2007	1110	Lonely hearts in general practice: does psychological distress determine primary health care utilization in patients with heart failure?	K77 - P04	QD8 - QT56
Wonca 2007	846	Overload degree in non oncologic main informal medical trainer		QD8 - QR41
Wonca 2007	264	Prevalence of smoking among health workers at house of health-Tuzla	P17	QD8

[Create profile](#)

[Submit document](#)

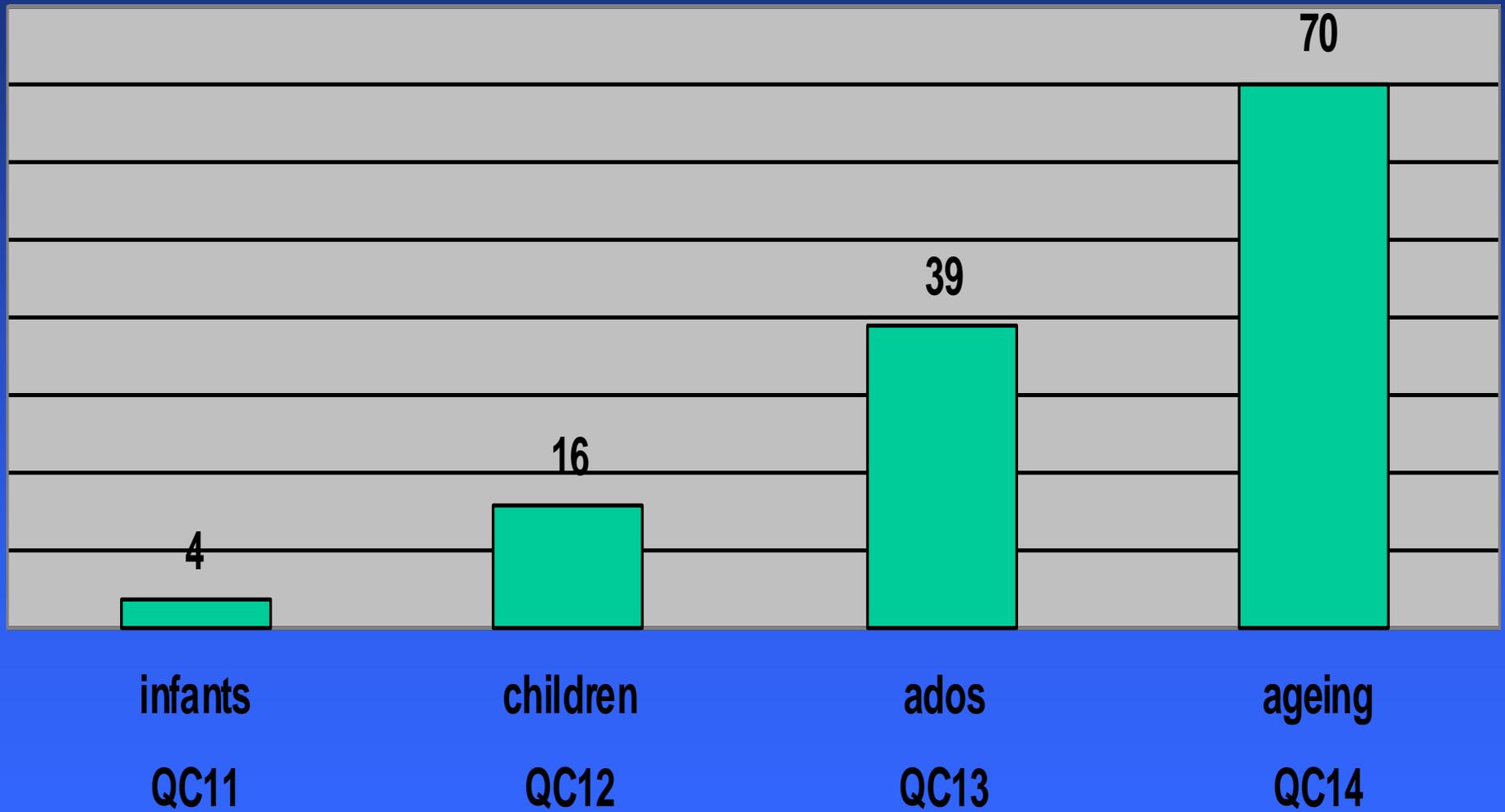
[Advanced search](#)

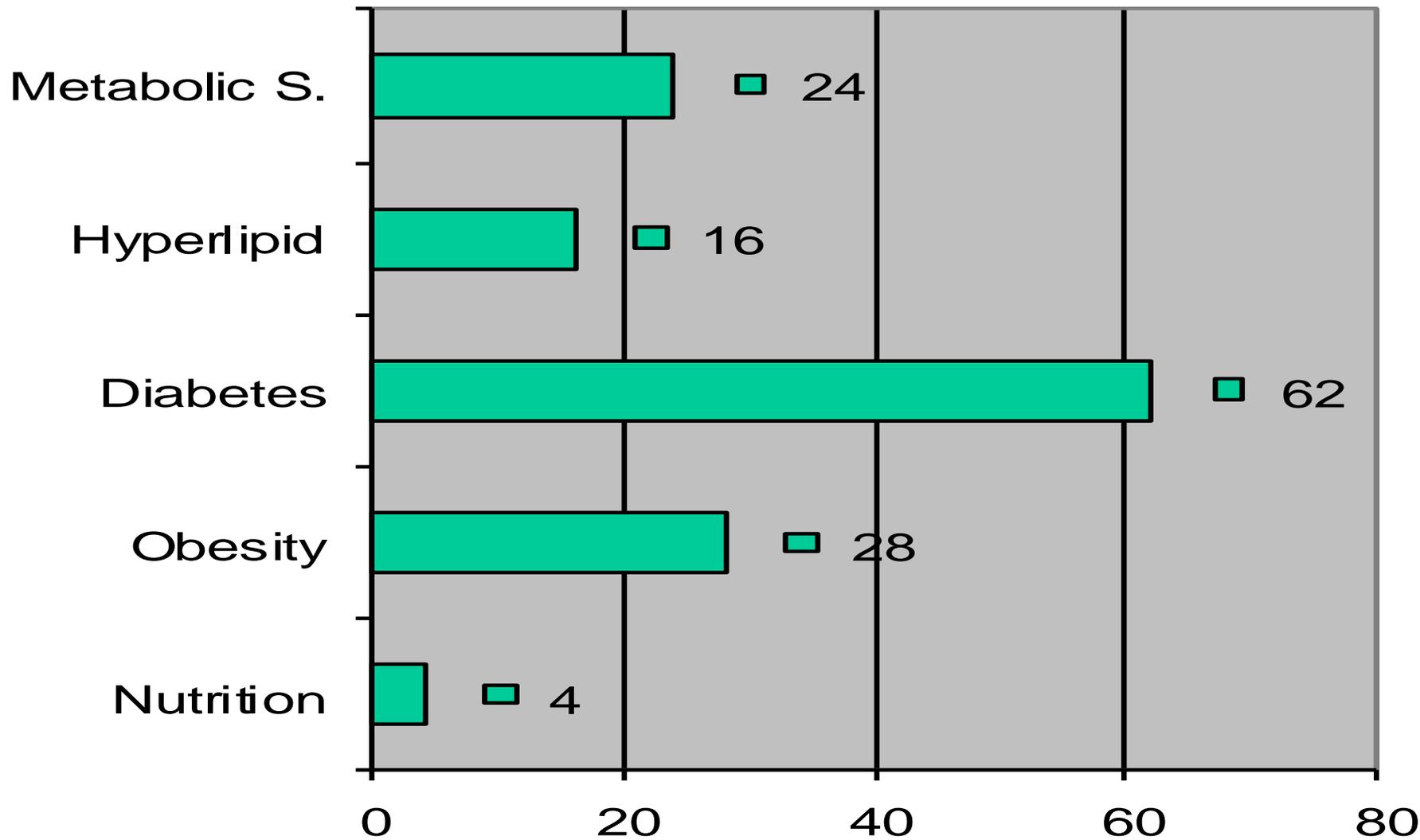
[Contact us](#)

[ICPC-2 classification](#)

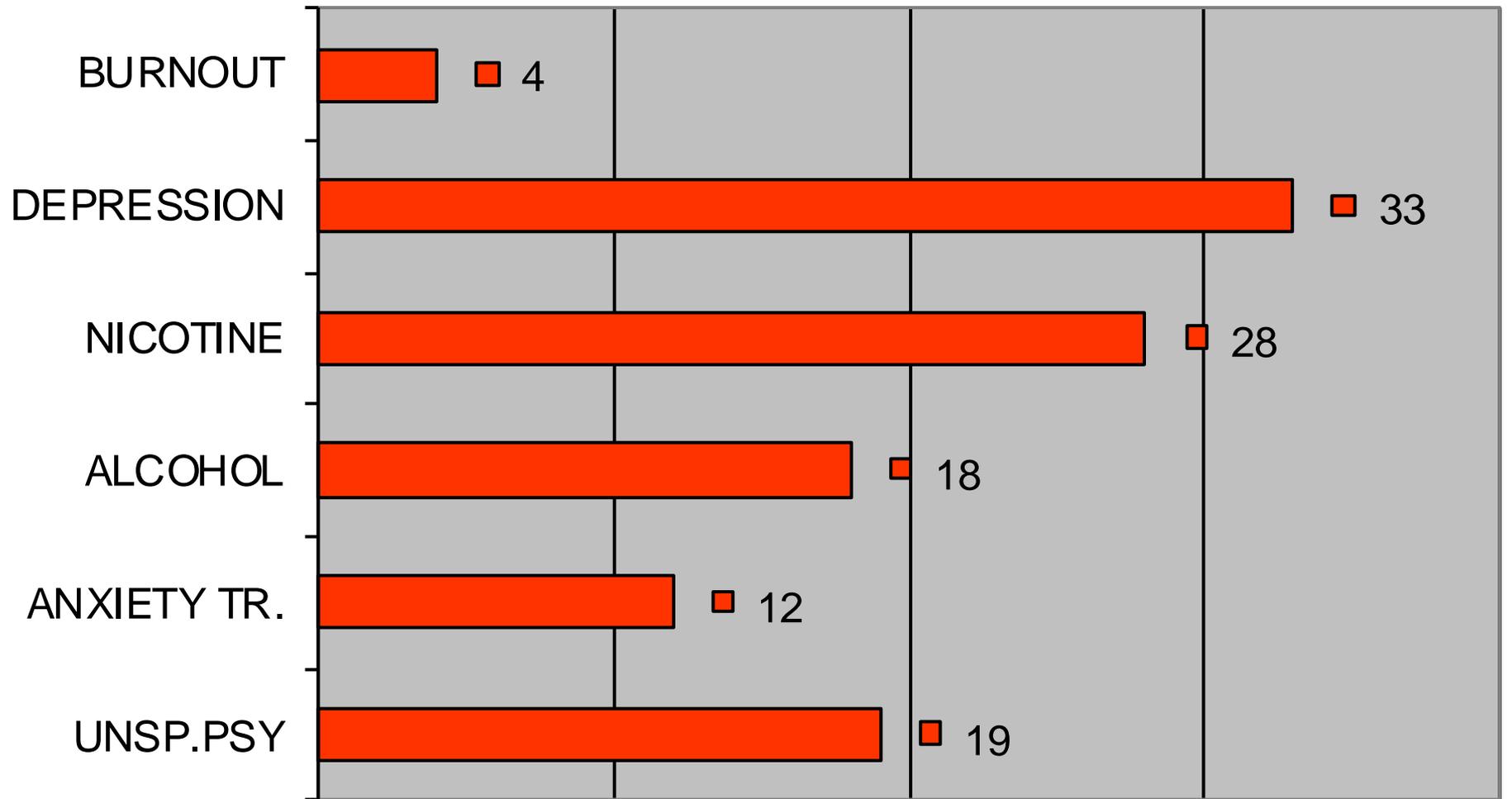
[3CGPFM classification](#)

# About age categories : on 990 abstracts



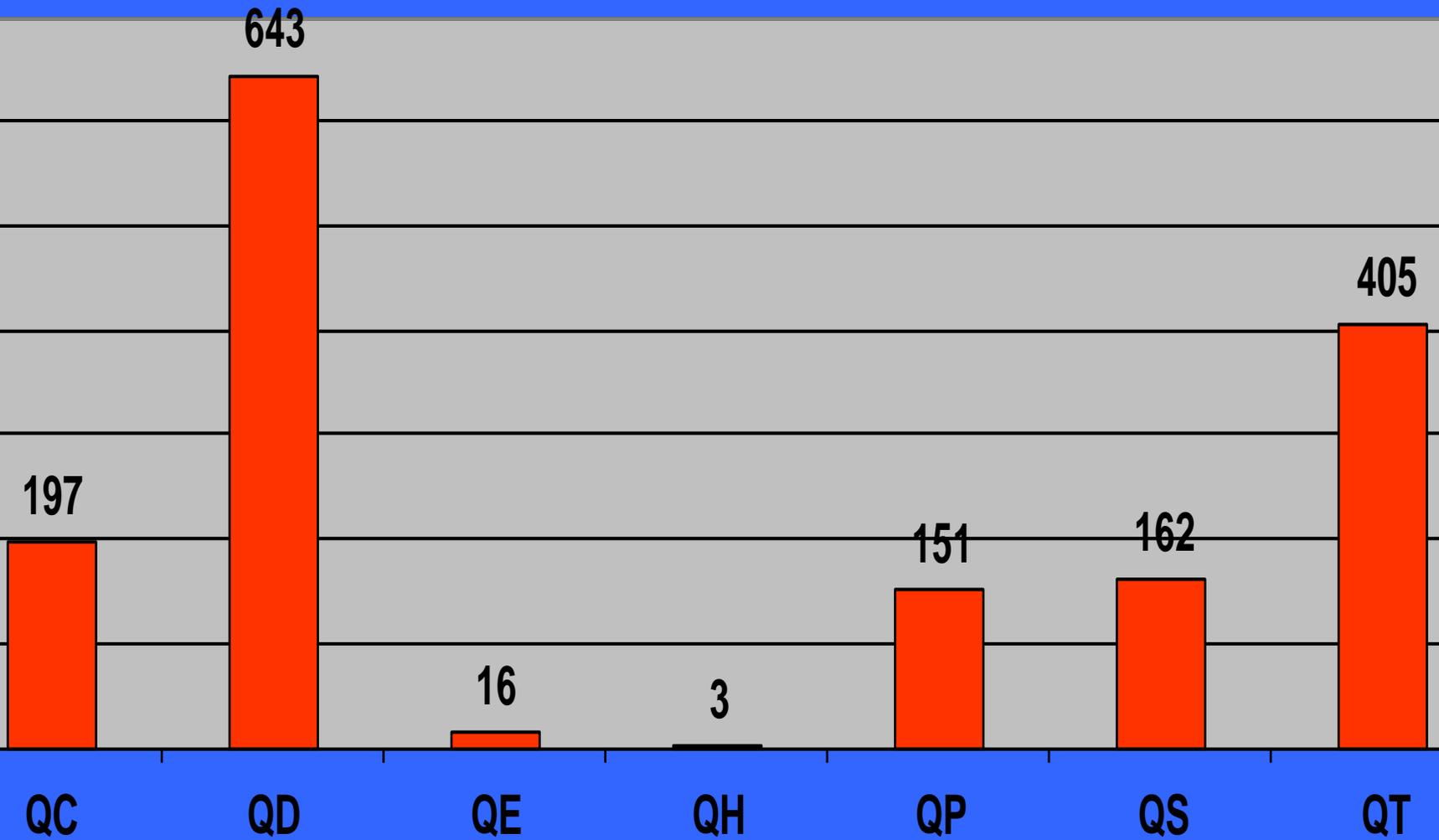


## Opening of T chapters



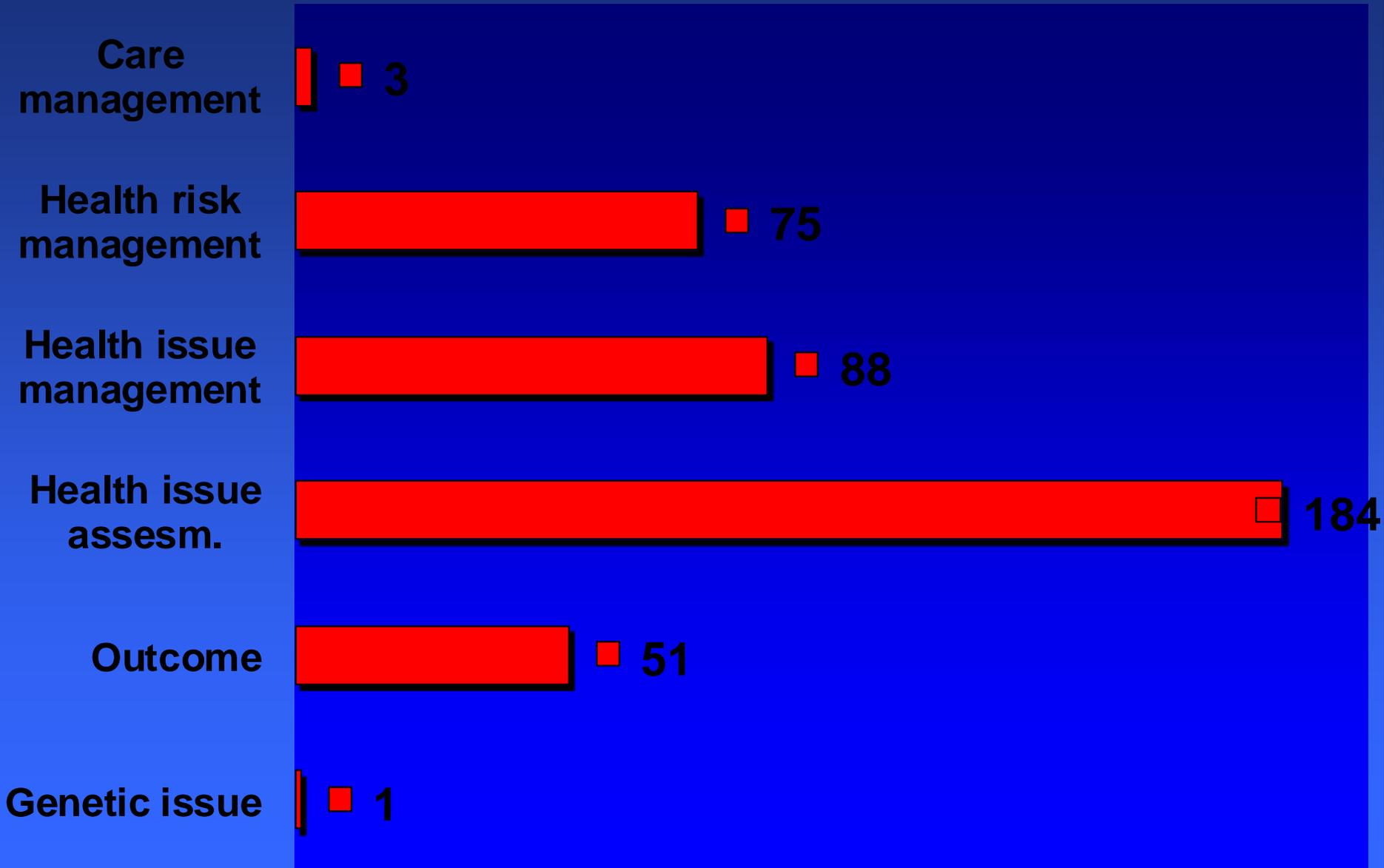
## Opening of P chapter

# Wonca Paris 2007



8 main domains 3CGP on 998 abstracts

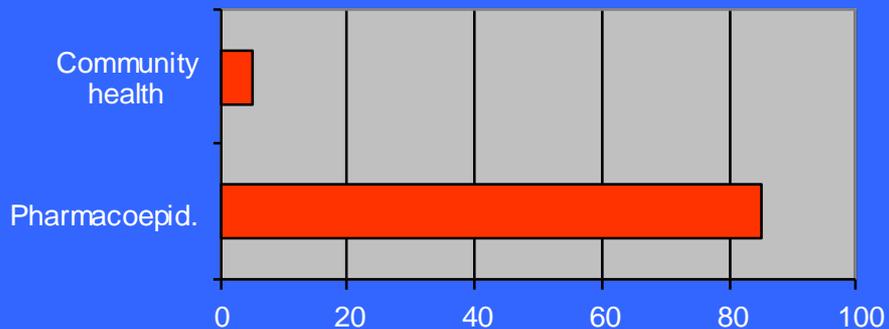
## Care manager (QD3 to QD35)



# R & D

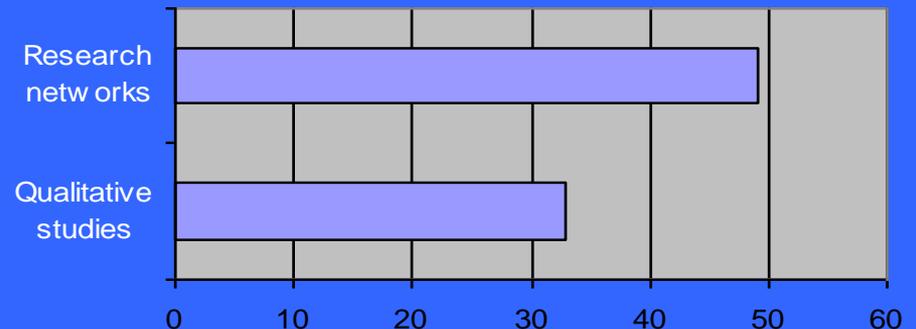


of which



G

of which





Covilha, Portugal, 2013

Indexation test de 128  
résumés du Livro do Resumo

## CO203 POR DETRÁS DE UMA DISFUNÇÃO FAMILIAR... A APRESENTAÇÃO ATÍPICA DE UMA PATOLOGIA GRAVE

### AUTORES

Marta Fazendeiro<sup>1</sup> e Filomena Xavier<sup>1</sup>

### INSTITUIÇÕES

<sup>1</sup>UCSP1 Centro de Saúde de S. Tiago, ULS de Castelo Branco

### CONTACTO

fazendeiro.marta@gmail.com

### PALAVRAS CHAVE

Linfoma de Hodgkin; Doenças Autoimunes; Disfunção Familiar; Sintomatologia

### ENQUADRAMENTO

O linfoma compreende cerca de 10% das neoplasias da infância e 17% na adolescência. A forma de apresentação inicial mais comum é o aparecimento de adenopatia indolor, geralmente cervical. Segue-se o aparecimento de sintomas B, frequentemente associados a doença avançada. Contudo, esta patologia nem sempre se apresenta de forma clássica.

### JUSTIFICAÇÃO

Os aspetos disfuncionais da família podem apresentar-se disfarçados com sintomas físicos. Mas quando estes correspondem a uma patologia grave no seio de uma família disfuncional? Este caso pretende salientar a importância da valorização dos sintomas do utente no contexto de disfunção familiar, refletindo acerca de uma forma de apresentação pouco frequente de linfoma.

### DESCRIÇÃO DE CASO

Adolescente, 16 anos, caucasiana, estudante, previamente saudável. Integra uma família monoparental por divórcio dos pais (mãe e filhos), classe III de Graffar, moderadamente disfuncional. Foi referenciada à Comissão de Proteção de Crianças e Jovens por abandono escolar. Convocada a uma consulta pelo Médico de Família, referia que as faltas no período da manhã se deviam ao tempo despendido com

## CO18 O ÁCIDO ACETILSALICÍLICO INFLUENCIA A PESQUISA DE SANGUE OCULTO NAS FEZES? META-ANÁLISE

### AUTORES

Luis Pinho Costa<sup>1</sup> e Hélder Sousa<sup>1</sup>

### INSTITUIÇÕES

<sup>1</sup>USF Fânzeres

### CONTACTO

luisdepinhocosta@gmail.com

### PALAVRAS CHAVE

aspirina®, sangue oculto, desempenho diagnóstico

### INTRODUÇÃO

A pesquisa de sangue oculto nas fezes (PSOF) para rastreio do cancro colorretal (CCR) realiza-se num grupo etário que frequentemente toma ácido acetilsalicílico (AAS); a eficácia do rastreio nesta circunstância não está comprovada.

### OBJETIVO

Rever a evidência sobre o impacto do consumo de AAS no desempenho diagnóstico da PSOF no rastreio do CCR e calcular medidas meta-analíticas.

### MÉTODOS

Em fevereiro de 2013 conduziu-se uma pesquisa de normas de orientação clínica, meta-análises, artigos de revisão e artigos originais, nas fontes de dados: PUBMED, sítios de Medicina Baseada na Evidência, Index de Revistas Médicas Portuguesas e referências cruzadas dos artigos selecionados. Pesquisaram-se os termos MeSH aspirin e occult blood e correspondentes Descritores em Ciências da Saúde no caso do Index. Os critérios de elegibilidade foram: publicações nos últimos dez anos, em Português ou Inglês, comparando o desempenho diagnóstico da PSOF no rastreio de CCR, sob influência de AAS versus sem essa exposição. Aplicou-se a STARD checklist e a GATE frame para avaliação crítica dos estudos. Adotou-se a

# Google drive

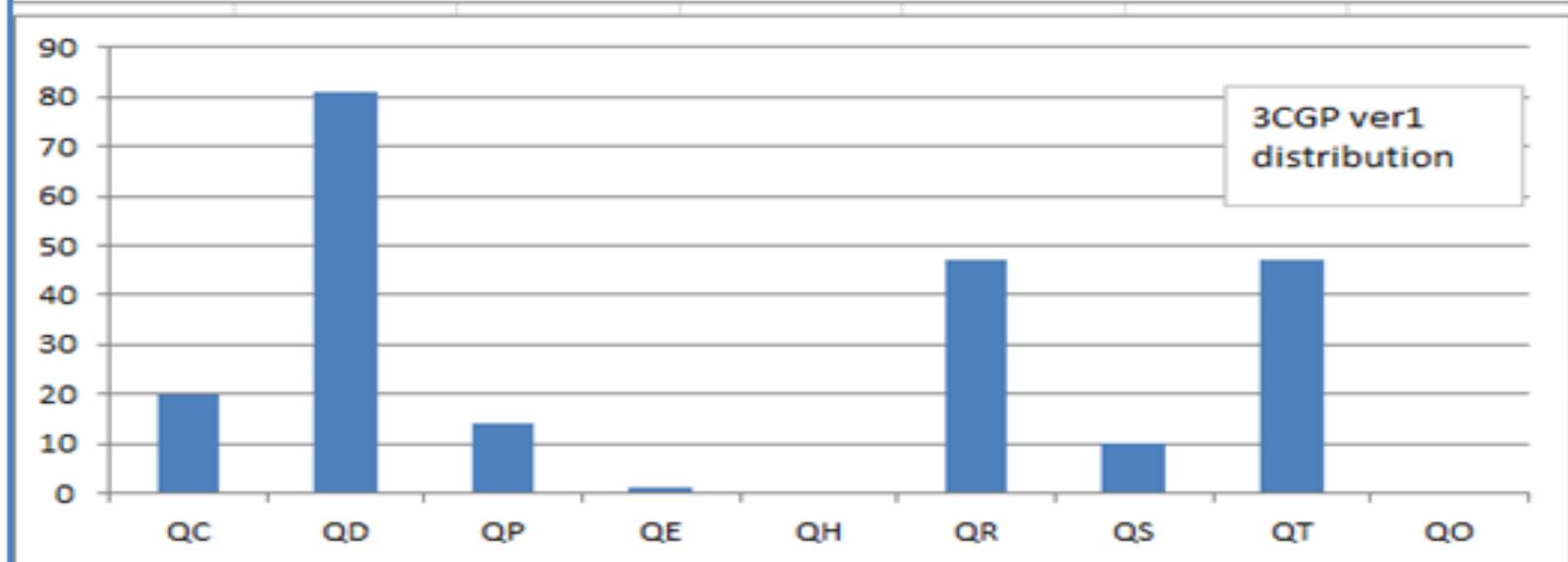
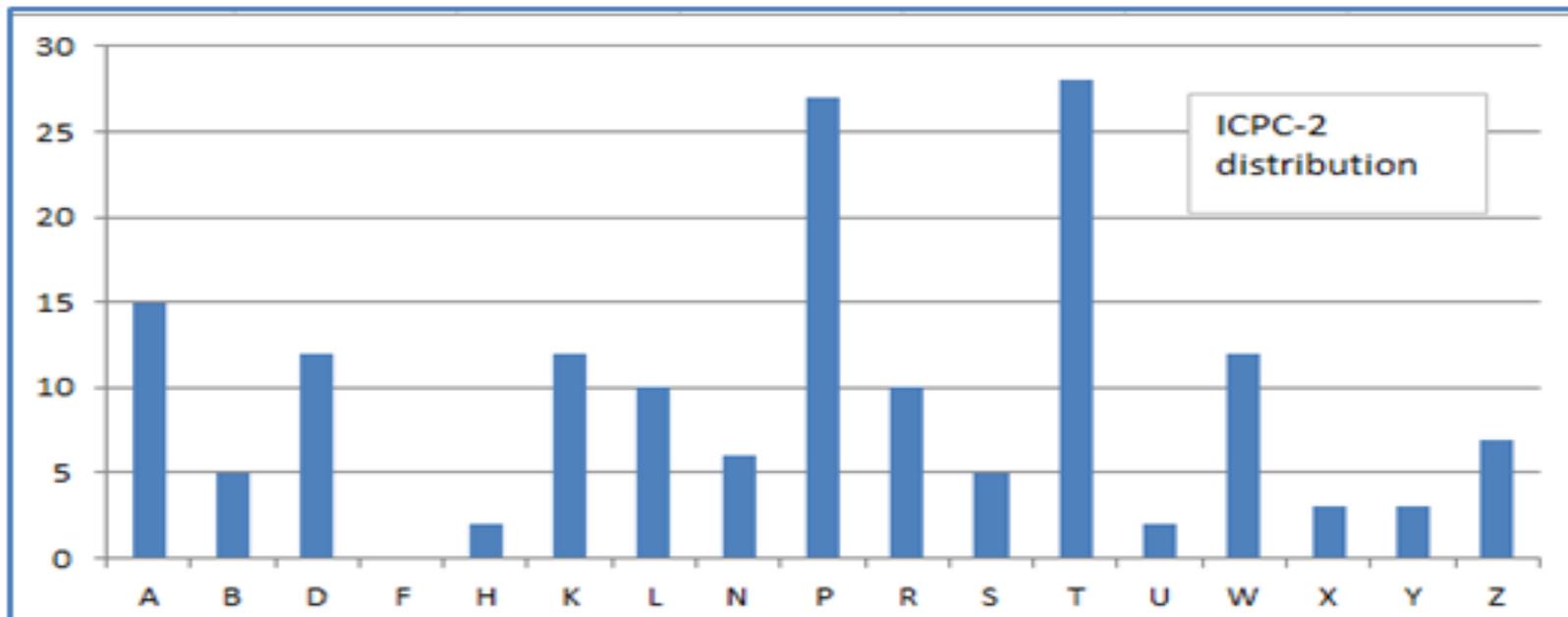
		CORVILHA TEST USING 3CGP version 1 AND ICPC-2					
		SOURCES					
		<a href="http://docpatient.net/mj/wonca2007/3CGPFMdeskcopy.pdf">http://docpatient.net/mj/wonca2007/3CGPFMdeskcopy.pdf</a>					
		<a href="http://www.kith.no/upload/2705/ICPC-2-English.pdf">http://www.kith.no/upload/2705/ICPC-2-English.pdf</a>					
		<a href="http://icpc.who-fic.nl/browser.aspx">http://icpc.who-fic.nl/browser.aspx</a>					
		first sheet for Oral communications: interrupted					
		second sheet "PO" for 60 poster communication ; endeds					
1	CO326	T90			QR2	QD31	QD34
2	CO42	T90	P76		QR2	QR6	
3	CO187	T82	T83		QR2	QC11	
4	CO59	D75			QR2	QD42	
5	CO114	*50			QR2	QS15	QR21
6	CO161	*34			QR2	QR43!	
7	CO192	-			QR2	QD42	
8	CO327	-			QR2	QD11	
9	CO349	*44			QR2	QD41	QC14
10	CO72	P17	R95	*39	QR2	QD42	
11	CO103	T82	K86	*31	QR2	QC12	
12	CO111	-			QR2	QP42	QT41
13	CO121	P17	R95	*39	QR2		
14	CO309	K78			QR2		
15	CO362	T93			QR2	QP51	
16	CO69	P17	W19		QR22	QP5	
17	CO142	K78	P70		QR2	QD34	
18	CO163	P76	W96		QR2	QR6	
19	CO256	T90	T89		QR2	QD33	
20	CO369	W12	W14		QR2	QR8	
21	CO34	D78	P76	A87	QD44	QD13	QD32

Sur 128 résumés  
119 codables par ICPC  
9 non codables

36 codes en composant 1, 123 en composant 7,  
44 Codes procédures dont 30 codes 50

28 T, 26 P, 8 P76, 4 P70, 5 P17 , 8 W, 5 Z ,

36 codes QD 32 gestion de maladies  
6 QC11 enfants, 8 C14 Pers âgées,  
6 QS2 relation avec le secteur secondaire  
39 QT57 Lecture critique et revue litt.  
25 QR2 études épidémiologiques  
Prévention I; 4  
Prévention II : 12  
Prévention III ; 4  
Prévention IV ; 8



Covilhã congress. APMGF 2013. Content analysis of 128 abstracts with ICPC-2 and 3CGP ver1  
 QC; patient's Category. QD; Doctor's issues. QP; Patient's issues. QE; Ethical issues. QH; Hazard.  
 QR; Reserch. QS; Structure of practice QT; Knowledge management. QO; others

Projet WAP (Wonca Abstract project)

**Première étape ; Projet AIP Lisbon 2014** (Abstract Indexing Project)

Refaire Paris 2007 avec l'aide du comité organisateur

Peut-être aller jusqu'à une App qui permet aux participants du congrès de trouver les communications qui les intéressent

**Deuxième étape ; Validation de 3CGP 2014-2015**

Etude multicentrique pour évaluer la validité et la reproductibilité de 3CGP

Révision complète avec définitions et liens sémantiques de 3CGP (en cours)

**Troisième étape ; Projet AIP Rio de Janeiro 2016**

Développement d'un outil de codage semi automatique des résumés en utilisant 3CGP ver 2 et ICPC 2

Développement d'une App pour le congrès

<b>Sources</b>							
MeSH	<a href="http://www.ncbi.nlm.nih.gov/mesh/">http://www.ncbi.nlm.nih.gov/mesh/</a>			3CGP ver 1	<a href="http://docpatient.net/mj/">http://docpatient.net/mj/</a>		
Inserm (fr/en)	<a href="http://mesh.inserm.fr/mesh/search/index">http://mesh.inserm.fr/mesh/search/index</a>			ICPC pager English	<a href="http://www.kith.no/upload/2-English.pdf">http://www.kith.no/upload/2-English.pdf</a>		
SNOMED-CT & UMLS	<a href="https://uts.nlm.nih.gov/home.html">https://uts.nlm.nih.gov/home.html</a>			Wonca dictionnary	<a href="http://www.ph3c.org/PH3">http://www.ph3c.org/PH3</a>		
DeCs (en/sp/pt)	<a href="http://decs.bvs.br/cgi-bin/wxis1660.exe/decsserver?lslsScript=../cgi-bin/decsserver/decsserver.xis&amp;interface_1">http://decs.bvs.br/cgi-bin/wxis1660.exe/decsserver?lslsScript=../cgi-bin/decsserver/decsserver.xis&amp;interface_1</a>			babelnet.org ontology	<a href="http://151.100.179.33/ba">http://151.100.179.33/ba</a>		

automatic coding system

#### Methods

The 3CGP rubrics have been chosen to describe the fields of study of GPs in their communications to Wonca congress (frequent issues only). As there is often a discrepancy between the GP/FM and the National Library of Medicine worlds of reference, the definitions available for the 3CGP entries are quoted from the Wonca 2003 dictionary available online. 3CGP entries could be already present to some extent in ICPC which is quoted if needed. If definition are missing in the Wonca dictionary, best fit available on the net are quoted with the source with a different colour as background

The correspondences of the 3CGP rubrics with Medline are searched by browsing the MeSH thesaurus. The most appropriate MeSH entry is quoted with its definition and URL. Some items could open several MeSH.

The French MeSH equivalent are found in the Inserm MeSH bilingue anglais - français. The Spanish and Portuguese ones are found in the Bireme virtual library (DeCs). Through the UMLS Terminology Services, the SNOMED-CT and UMLS terminology servers give the corresponding concepts and their ID. One 3CGP rubric could correspond to several MeSH and one MeSH could be open in several SNOMED-CT entries.

The result is a comparison of 3 world of reference (Umberto Eco): the world of family medicine through the dictionary and ICPC, the world of National Library of Medicine through UMLS and MeSH and the world of IHTSDO which is the result of an US/UK association through the College of American Pathologist and the UK National Health Service

The correspondance with the www.babelnet.org ontology are searched and coined with the babelnet ID

All the sources are available online (see URLs above)

Wonca = World organisation of family doctors

+ sources QC QD QE QH QP QR QS QT QO rejected

En cours ; création de 3CGP version 2 (Google drive)

L'impossible gageure

Un concept

Trois mondes de référence

GP world

Wonca Dictionary / ICPC-2

NLM world

MeSH / UMLS

IHTSDO world

SNOMED-CT

Une ontologie

[Babelnet.org](http://Babelnet.org)

QT62	Drug reporting	Pharmacovigilance is the pharmacological science relating to the detection, assessment, understanding and prevention of adverse effects, particularly long term and short term side effects of medicines.(WikiP)	A27	Complication of medical treatment	Pharmacovigilanc	Pharmacovigilance	Pharmacovigilance	Pharmacovigilance	Pharmacovigilance
		An adverse drug reaction is an expression that describes harm associated with the use of given medications at a normal dosage during normal use.(WikiP)				Adverse Drug Reaction Reporting Systems	Sistemas de segnalament dos efeitos secundários dos medicamentos	Sistemas de Registro de Reacción Adversa a Medicamentos	Sistemas de Notificação Reações Adversas a Medicamentos
QT63	Device reporting	The reporting of adverse events involving medical devices for human and veterinary use.(egg-atmos.be)	A23	Adverse effect medical agent	Medicalvigiilance	Product Surveillance, Postmarketing	Surveillance post-commercialisation des produits de santé	Vigilancia de Productos Comercializados	Vigilância de Produtos Comerciais
QT62	Disease reporting	any disease that is required by law to be reported to government authorities.(WikiP)			Maladies à déclaration obligatoire	Disease Notification	Notificação das doenças à declaração obrigatória	Notificación de Enfermedad	Notificação Doenças
		public health disease surveillance system that gives public health officials powerful capabilities to monitor the occurrence and spread of diseases.(cdc.gov)			déclaration obligatoire	Mandatory reporting	déclaration obligatoire	Notificación Obligatoria	Notificação Abuso
QT63	Health Data reporting	Collection, analysis, and interpretation of data about the frequency, distribution, and consequences of disease or health conditions, for use in the planning, implementing, and evaluating public health programs. (MeSH)			Exportation de données de santé	Epidemiological Monitoring	epidemiocurveillance	Monitoreo Epidemiológico	Monitoramento Epidemiológico
QT69	medical report, other								
ICDP code	ICDP term	Worce 2003 dictionary	Consider ICD9 code	Consider ICD9 definition	French lay term	MeSH (best fit)	French Desc	Spanish DeCS	Portuguese

Pharmacovigilância	The detection of long and short term side effects of conventional and traditional medicines through research, data mining, monitoring, and evaluation of healthcare information obtained from healthcare providers and patients.	<a href="http://www.ncbi.nlm.nih.gov/mesh/68060735">http://www.ncbi.nlm.nih.gov/mesh/68060735</a>	[C017090]	Pharmacovigilance	--	--	bn.00403682n	
Sistemas de Notificação de Reações Adversas a Medicamentos	Systems developed for collecting reports from government agencies, manufacturers, hospitals, physicians, and other sources on adverse drug reactions.	<a href="http://www.ncbi.nlm.nih.gov/mesh/68016907">http://www.ncbi.nlm.nih.gov/mesh/68016907</a>	[C0085425]	Adverse Drug Reaction Reporting Systems	--	--	bn.00450762n	
Vigilância de Produtos Comercializados	Surveillance of drugs, devices, appliances, etc., for efficacy or adverse effects, after they have been released for general sale.	<a href="http://www.ncbi.nlm.nih.gov/mesh/68011368">http://www.ncbi.nlm.nih.gov/mesh/68011368</a>	[C0085267]	Product Surveillance, Postmarketing	--	--	bn.03981982n	This MeSH doesn't fit, includes all drugs
Notificação de Doenças	Notification or reporting by a physician or other health care provider of the occurrence of specified contagious diseases such as tuberculosis and HIV infections to designated public health agencies.	<a href="http://www.ncbi.nlm.nih.gov/mesh/68004812">http://www.ncbi.nlm.nih.gov/mesh/68004812</a>	[C0242765]	Disease Notification	[J70816005]	Notification of disease	bn.03826981n	
Notificação de Abuso	A legal requirement that designated types of information acquired by professionals or institutions in the course of their work be reported to appropriate authorities.	<a href="http://www.ncbi.nlm.nih.gov/mesh/68019221">http://www.ncbi.nlm.nih.gov/mesh/68019221</a>	[C0076486]	Mandatory Reporting	--	--	bn.03278380n	
Monitoramento Epidemiológico	Collection, analysis, and interpretation of data about the frequency, distribution, and consequences of disease or health conditions, for use in the planning, implementing, and evaluating public health programs.	<a href="http://www.ncbi.nlm.nih.gov/mesh/68062865">http://www.ncbi.nlm.nih.gov/mesh/68062865</a>	[C0014504]	Epidemiological Monitoring	--	--	--	In the Mesh Desc reporting corresponds to Research desig
Portuguese DeCS	MeSH definition	MeSH url	UMLS CUI	UMLS term	SNOMED CT	SNOMED CT term	bn.00605533n	

GP

3CGP rubric	QT61
3CGP term	Sentinel network
Dictionary Wonca GP (if any) If none → best fit	SENTINEL PRACTICE a general practice which undertakes to maintain surveillance of and report certain health problems such as adverse drug reactions or other notifiable health events.
French lay term	<u>Réseau sentinelle</u>
<u>MeSH</u>	Sentinel Surveillance
<u>MeSH Fr</u>	Surveillance <u>sentinelle</u>
<u>MeSH Sp</u>	<u>Vigilancia de Guardia</u>
<u>MeSH Po</u>	<u>Vigilância de Evento Sentinela</u>
<u>MeSH definition</u>	Monitoring of rate of occurrence of specific conditions to assess the stability or change in health levels of a population. It is also the study of disease rates in a specific cohort, geographic area, population subgroup, etc. to estimate trends in larger population
<u>MeSH Url</u>	<a href="http://www.ncbi.nlm.nih.gov/mesh/68018571">http://www.ncbi.nlm.nih.gov/mesh/68018571</a>
UMLS ID	[C0242791]
UMLS Concept	Sentinel Surveillance
SNOMED-CT ID	–
SNOMED-CT concept	–
<u>Babelnet ID</u>	bn:00051975n

NLM

IHTSDO

GP

NLM

IHTSDO

3CGP rubric	QT62
3CGP term	Disease reporting
Dictionary Wonca GP (if any) If none → best fit	any disease that is required by law to be reported to government authorities.(wikiP)
French lay term	Maladies à déclaration obligatoire
<u>MeSH</u>	Disease Notification
<u>MeSH Fr</u>	Notification des maladies à déclaration obligatoire
<u>MeSH Sp</u>	Notificación de Enfermedad
<u>MeSH Po</u>	Notificação de Doenças
<u>MeSH definition</u>	Notification or reporting by a physician or other health care provider of the occurrence of specified contagious diseases such as tuberculosis and HIV infections to designated public health agencies.
<u>MeSH Url</u>	<a href="http://www.ncbi.nlm.nih.gov/mesh/68004812">http://www.ncbi.nlm.nih.gov/mesh/68004812</a>
UMLS ID	[C0242783]
UMLS Concept	Disease Notification
SNOMED-CT ID	[170516003]
SNOMED-CT concept	Notification of disease
<u>Babelnet ID</u>	bn:03526961n

[https://docs.google.com/spreadsheet/ccc?key=0AjmOobSImuKfdEk2V3JEY2dKNF9EcGtUVE0zWE9IZXc&usp=drive\\_web#gid=2](https://docs.google.com/spreadsheet/ccc?key=0AjmOobSImuKfdEk2V3JEY2dKNF9EcGtUVE0zWE9IZXc&usp=drive_web#gid=2)

Les choses difficiles commencent par être simples

Merci