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Health informatics - International patient summary (ISO 27269:2025)

Táto norma obsahuje anglickú verziu európskej normy.
This standard includes the English version of the European Standard.

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English Version

**Health informatics - International patient summary (ISO
27269:2025)**

Informatique de santé - Résumé international du
dossier médical du patient (ISO 27269:2025)

Medizinische Informatik - Internationale Patienten-
Kurzakte (ISO 27269:2025)

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EN ISO 27269:2025 (E)

Contents	Page
European foreword.....	3

European foreword

This document (EN ISO 27269:2025) has been prepared by Technical Committee ISO/TC 215 "Health informatics" in collaboration with Technical Committee CEN/TC 251 "Health informatics" the secretariat of which is held by NEN.

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International Standard

ISO 27269

Health informatics — International patient summary

*Informatique de santé — Résumé international du dossier
médical du patient*

**Second edition
2025-09**

ISO 27269:2025(en)



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ISO 27269:2025(en)**Contents**

Page

Foreword	xii
Introduction	xiii
1 Scope	1
2 Normative references	1
3 Terms and definitions	1
3.1 Healthcare	1
3.2 Healthcare actor	2
3.3 Healthcare matter	2
3.4 Healthcare activity	3
3.5 Healthcare planning	3
3.6 Responsibility	4
3.7 Information management	4
3.7.1 Concepts	4
3.7.2 Technology	5
3.7.3 Models	6
3.8 Data	7
3.9 Process	8
4 Abbreviations	8
5 International patient summary Data Blocks	9
5.1 Introduction to the IPS Data Blocks	9
5.2 Conformance detail	9
6 Descriptors for the IPS Data Set	11
6.1 General	11
6.2 Patterns within the IPS Data Set	12
6.2.1 Patterns and data types	12
6.2.2 Label Concept	13
6.2.3 List	13
6.2.4 Reference	13
6.2.5 Person Name	14
6.2.6 Coded Element	14
6.2.7 Date Time	14
6.2.8 Identifier	15
6.2.9 Address	15
6.2.10 Telecom	15
6.2.11 Organization Name	15
6.2.12 Text	15
6.2.13 Any	16
6.2.14 Range	16
6.2.15 Quantity	16
6.2.16 Period	16
6.2.17 General time specification (GTS)	17
6.2.18 String	17
6.2.19 Ratio	17
6.3 Model extensibility	17
7 IPS Document	18
7.1 Description	18
7.2 Detailed description of the IPS Document descriptors	18
7.2.1 Purpose	18
7.2.2 Definition	19
7.2.3 Business rules	19
7.2.4 Missing	19
7.2.5 Format	19

ISO 27269:2025(en)

7.2.6	Inclusion criteria	19
7.2.7	Currency	19
7.2.8	Further details	19
7.2.9	Examples	19
7.3	IPS Sections and IPS Features as IPS Data Blocks	20
7.4	IPS Data Blocks that are 'Optional'	20
7.5	Candidate IPS data	21
8	IPS Data Block Feature: Patient Attributes	21
8.1	Description	21
8.2	Detailed description of the IPS Feature 'Patient Attributes'	22
8.2.1	Purpose	22
8.2.2	Definition	22
8.2.3	Business rules	22
8.2.4	Missing	22
8.2.5	Format	22
8.2.6	Inclusion criteria	22
8.2.7	Currency	22
8.2.8	Further details	22
8.2.9	Examples	22
8.3	Patient's name	23
8.4	Patient's address and telecom	23
8.5	Patient's address type	23
8.6	Administrative gender	23
8.7	Healthcare related identifiers	23
8.8	Patient identifier	23
8.9	Insurance information	23
9	IPS Feature: Healthcare Provider	23
9.1	Description	23
9.2	Detailed description of the IPS Feature 'Healthcare Provider'	24
9.2.1	Purpose	24
9.2.2	Definition	24
9.2.3	Business rules	24
9.2.4	Missing	24
9.2.5	Format	24
9.2.6	Inclusion criteria	24
9.2.7	Currency	24
9.2.8	Further details	24
9.2.9	Examples	25
9.3	Role of Healthcare Provider (person)	25
9.4	Role of Healthcare Provider (organization)	25
10	IPS Feature: Patient Address-book	25
10.1	Description	25
10.2	Detailed description of the IPS Feature 'Patient Address-book'	25
10.2.1	Purpose	25
10.2.2	Definition	25
10.2.3	Business rules	26
10.2.4	Missing	26
10.2.5	Format	26
10.2.6	Inclusion criteria	26
10.2.7	Currency	26
10.2.8	Further details	26
10.2.9	Examples	26
10.3	Healthcare providers (Persons and Organizations)	26
10.4	Others' address details	26
11	IPS Section: Advance Directive	27
11.1	Description	27
11.2	Detailed description of the IPS Section 'Advance Directive'	27

ISO 27269:2025(en)

11.2.1	Purpose	27
11.2.2	Definition	27
11.2.3	Business rules	27
11.2.4	Missing	27
11.2.5	Format	28
11.2.6	Inclusion criteria	28
11.2.7	Currency	28
11.2.8	Further details	28
11.2.9	Examples	28
11.3	Advance Directives	28
11.4	Person authorizing directive	28
11.5	Directive category	28
11.6	Directive description	29
11.7	Reference	29
12	IPS Section: Allergies and Intolerances	29
12.1	Description	29
12.2	Detailed description of the IPS Section 'Allergies and Intolerances'	30
12.2.1	Purpose	30
12.2.2	Definition	30
12.2.3	Business rules	30
12.2.4	Missing	30
12.2.5	Format	31
12.2.6	Inclusion criteria	31
12.2.7	Currency	31
12.2.8	Further details	31
12.2.9	Examples	31
12.3	Allergies and Intolerances content status	31
12.4	Allergies and Intolerances	31
12.5	Allergy and Intolerance description	31
12.6	Clinical status of the condition	31
12.7	Onset date	32
12.8	End date	32
12.9	Criticality	32
12.10	Certainty	32
12.11	Type of propensity	32
12.12	Diagnosis	33
12.13	Reaction	33
12.14	Manifestation of the reaction	33
12.15	Severity	33
12.16	Agent code	33
12.17	Category	33
13	IPS Section: Functional Status	34
13.1	Description	34
13.2	Detailed Description of the optional IPS Section 'Functional Status'	34
13.2.1	Purpose	34
13.2.2	Definition	34
13.2.3	Business rules	34
13.2.4	Missing	34
13.2.5	Format	35
13.2.6	Inclusion criteria	35
13.2.7	Currency	35
13.2.8	Further details	35
13.2.9	Examples	35
13.3	Disabilities	35
13.4	Disability description	35
13.5	Disability code	35
13.6	Functional assessments	35
13.7	Functional assessment	35

ISO 27269:2025(en)

13.8	Functional assessment description.....	36
13.9	Functional assessment.....	36
14	IPS Section: History of Past Problems.....	36
14.1	Description.....	36
14.2	Detailed description of the IPS Section ‘History of Past Problems’	36
14.2.1	Purpose.....	36
14.2.2	Definition.....	37
14.2.3	Business rules.....	37
14.2.4	Missing.....	37
14.2.5	Format.....	37
14.2.6	Inclusion criteria.....	37
14.2.7	Currency.....	37
14.2.8	Further details.....	37
14.2.9	Examples.....	37
14.3	Past problems.....	37
14.4	Problem.....	37
14.5	Problem type.....	38
14.6	Description.....	38
14.7	Severity.....	38
14.8	Problem status.....	38
14.9	Date resolved.....	38
14.10	Specialist contact.....	38
15	IPS Section: History of Pregnancy.....	38
15.1	Description.....	38
15.2	Detailed description of the optional IPS Section ‘History of pregnancy’	39
15.2.1	Purpose.....	39
15.2.2	Definition.....	39
15.2.3	Business rules.....	39
15.2.4	Missing.....	40
15.2.5	Format.....	40
15.2.6	Inclusion criteria.....	40
15.2.7	Currency.....	40
15.2.8	Further details.....	40
15.2.9	Examples.....	40
15.3	Pregnancy description.....	40
15.4	Date of observation.....	40
15.5	Pregnancy state.....	40
15.6	Expected date of delivery.....	40
15.7	Specialist contact.....	41
15.8	Previous pregnancies status.....	41
15.9	Previous pregnancies description.....	41
15.10	Outcome date.....	41
15.11	Outcome.....	41
15.12	Specialist contact.....	41
15.13	Summary metric.....	41
16	IPS Section: History of Procedures.....	42
16.1	Description.....	42
16.2	Detailed description of the optional IPS Section ‘History of Procedures’	42
16.2.1	Purpose.....	42
16.2.2	Definition.....	42
16.2.3	Business rules.....	42
16.2.4	Missing.....	42
16.2.5	Format.....	43
16.2.6	Inclusion criteria.....	43
16.2.7	Currency.....	43
16.2.8	Further details.....	43
16.2.9	Examples.....	43

ISO 27269:2025(en)

16.3	Procedures content status	43
16.4	Procedures	43
16.5	Procedure	43
16.6	Description	43
16.7	Body site	43
17	IPS Section: Immunizations	43
17.1	Description	43
17.2	Detailed description of the IPS Section 'Immunizations'	44
17.2.1	Purpose	44
17.2.2	Definition	44
17.2.3	Business rules	44
17.2.4	Missing	44
17.2.5	Format	45
17.2.6	Inclusion criteria	45
17.2.7	Currency	45
17.2.8	Further details	45
17.2.9	Examples	45
17.3	Immunization content status	45
17.4	Immunizations	45
17.5	Immunization	45
17.6	Vaccine for type of disease	45
17.7	Target diseases	45
17.8	Number of doses	45
17.9	Product administered	45
17.10	Generic description of vaccine/prophylaxis or its component	46
17.11	Performer	46
17.12	Route of administration	46
18	IPS Section: Medical Devices	46
18.1	Description	46
18.2	Detailed description of the IPS Section 'Medical Devices'	46
18.2.1	Purpose	46
18.2.2	Definition	46
18.2.3	Business rules	47
18.2.4	Missing	47
18.2.5	Format	47
18.2.6	Inclusion criteria	47
18.2.7	Currency	47
18.2.8	Further details	47
18.2.9	Examples	47
18.3	Device content status	47
18.4	Devices	47
18.5	Device	47
18.6	Device type	47
18.7	Device identifier	48
18.8	Use start date	48
18.9	Use end date	48
18.10	Care and risks	48
19	IPS Section: Medication Summary	48
19.1	Description	48
19.2	Detailed description of the mandatory IPS Section 'Medication Summary'	48
19.2.1	Purpose	48
19.2.2	Definition	48
19.2.3	Business rules	49
19.2.4	Missing	49
19.2.5	Format	49
19.2.6	Inclusion criteria	49
19.2.7	Currency	49

ISO 27269:2025(en)

	19.2.8 Further details	49
	19.2.9 Examples	49
19.3	Medication summary content status	49
19.4	Medication Status	49
19.5	Medications	50
19.6	Medication	50
19.7	Reason	50
19.8	Medicinal product	50
19.9	Product code	51
19.10	Product common name (and strength)	51
19.11	Pharmaceutical dose form	51
19.12	Brand name	51
19.13	Active ingredients	51
19.14	Substance code	51
19.15	Strength	51
19.16	Administration instruction	51
19.17	Instruction	51
19.18	Period of medication use	52
19.19	Number of units per intake	52
19.20	Frequency of intakes	52
20	IPS Section: Care Plan	52
20.1	Description	52
20.2	Detailed description of the optional IPS Section 'Care Plan'	52
	20.2.1 Purpose	52
	20.2.2 Definition	53
	20.2.3 Business rules	53
	20.2.4 Missing	53
	20.2.5 Format	53
	20.2.6 Inclusion criteria	53
	20.2.7 Currency	53
	20.2.8 Further details	53
	20.2.9 Examples	53
20.3	Plan type	53
20.4	Plan description	54
20.5	Recommendations (core care plan)	54
20.6	Recommendation	54
20.7	Recommendations for treatment	54
20.8	Given recommendation date	54
20.9	Applicable date	54
20.10	Extensive plan	54
21	IPS Section: Problems	54
21.1	Description	54
21.2	Detailed description on the mandatory IPS Section 'Problems'	55
	21.2.1 Purpose	55
	21.2.2 Definition	55
	21.2.3 Business rules	55
	21.2.4 Missing	55
	21.2.5 Format	55
	21.2.6 Inclusion criteria	55
	21.2.7 Currency	56
	21.2.8 Further details	56
	21.2.9 Examples	56
21.3	Problems content status	56
21.4	Problems	56
21.5	Problem	56
21.6	Problem type	56
21.7	Problem description	56
21.8	Diagnosis	56

ISO 27269:2025(en)

21.9	Severity	56
21.10	Problem status	57
21.11	Specialist contact	57
22	IPS Section: Results	57
22.1	Description	57
22.2	Detailed description of the IPS Section 'Results'	57
22.2.1	Purpose	57
22.2.2	Definition	57
22.2.3	Business rules	57
22.2.4	Missing	58
22.2.5	Format	58
22.2.6	Inclusion criteria	58
22.2.7	Currency	58
22.2.8	Further details	58
22.2.9	Examples	58
22.3	Observation results	58
22.4	Observation type	58
22.5	Result description	58
22.6	Result value	58
22.7	Observation result	58
22.8	Performer	59
22.9	Observer	59
23	IPS Section: Social History	59
23.1	Description	59
23.2	Detailed description of the optional IPS Section 'Social History'	59
23.2.1	Purpose	59
23.2.2	Definition	59
23.2.3	Business rules	59
23.2.4	Missing	59
23.2.5	Format	60
23.2.6	Inclusion criteria	60
23.2.7	Currency	60
23.2.8	Further details	60
23.2.9	Examples	60
23.3	Social factors	60
23.4	Social factor	60
23.5	Social factor description	60
23.6	Social factor details	60
23.7	Reference date range	61
24	IPS Section: Vital Sign	61
24.1	Description	61
24.2	Detailed description of the optional IPS Section 'Vital Sign'	61
24.2.1	Purpose	61
24.2.2	Definition	61
24.2.3	Business rules	61
24.2.4	Missing	61
24.2.5	Format	62
24.2.6	Inclusion criteria	62
24.2.7	Currency	62
24.2.8	Further details	62
24.2.9	Examples	62
24.3	Vital signs	62
24.4	Observation type	62
24.5	Result description	62
24.6	Results value	62
24.7	Vital sign	62
25	IPS Feature: Cross Organization	63

ISO 27269:2025(en)

25.1	Description.....	63
25.2	Detailed description of the mandatory IPS Feature 'Cross Organization'	63
25.2.1	Purpose.....	63
25.2.2	Definition	63
25.2.3	Business rules.....	63
25.2.4	Missing.....	64
25.2.5	Format.....	64
25.2.6	Inclusion criteria	64
25.2.7	Currency	64
25.2.8	Further details	64
25.2.9	Examples	64
25.3	Originating Organization (country of affiliation).....	65
25.4	Organization codes	65
25.5	Organization specific requirements.....	65
25.6	Asserter.....	65
25.7	Date of IPS Document creation	65
25.8	Language of the IPS Document	66
25.9	Date of last update to IPS content.....	66
25.10	Generation of IPS content.....	66
25.11	Nature of the IPS	66
25.12	Authoring healthcare provider	66
25.13	Legitimacy.....	66
25.14	Legal authenticator.....	66
26	IPS Section: Alerts	66
26.1	Description.....	66
26.2	Detailed description of the IPS Section 'Alerts'	67
26.2.1	Purpose.....	67
26.2.2	Definition	67
26.2.3	Business rules.....	67
26.2.4	Missing.....	68
26.2.5	Format.....	68
26.2.6	Inclusion criteria	68
26.2.7	Currency	68
26.2.8	Further details	68
26.2.9	Examples	68
26.3	Alert type.....	68
26.4	Alert level.....	68
26.5	Disease related diagnosis	69
26.6	Disease name	69
26.7	Assertion degree.....	69
26.8	Confirmation method.....	69
26.9	Specialist contact.....	69
26.10	A reference to specialist advice or guideline.....	69
27	IPS Section: Patient Story	69
27.1	Description.....	69
27.2	Detailed description of the optional IPS Section 'Patient Story'	70
27.2.1	Purpose.....	70
27.2.2	Definition	70
27.2.3	Business rules.....	70
27.2.4	Missing.....	71
27.2.5	Format.....	71
27.2.6	Inclusion criteria	71
27.2.7	Currency	71
27.2.8	Further details	71
27.2.9	Examples	71
27.3	Baseline state.....	71
27.4	Things to know before getting started.....	71
27.5	My story.....	71

ISO 27269:2025(en)

27.6	Important content to me.....	71
27.7	Important people to me.....	72
27.8	Telling the story.....	72
Annex A (informative) This document's role in helping in pandemic situations		73
Annex B (informative) Purpose of IPS and the inclusion criteria used for this document.....		74
Annex C (informative) Implementation independence and terminologies		75
Bibliography.....		76

ISO 27269:2025(en)**Foreword**

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

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This document was prepared by Technical Committee ISO/TC 215, *Health informatics*, in collaboration with the European Committee for Standardization (CEN) Technical Committee CEN/TC 251, *Health informatics*, in accordance with the agreement on technical cooperation between ISO and CEN (Vienna Agreement).

This second edition cancels and replaces the first edition (ISO 27269:2021), which has been technically revised.

The main changes are as follows:

- the IPS Sections “Alerts” and “Patient story” have been added;
- “Cross-Border” and “Provenance” have been merged into one “Cross organization” section ([Clause 25](#));
- definitions in [Clause 3](#) have been aligned with ISO 13940:2015.

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at www.iso.org/members.html.

ISO 27269:2025(en)

Introduction

0.1 General

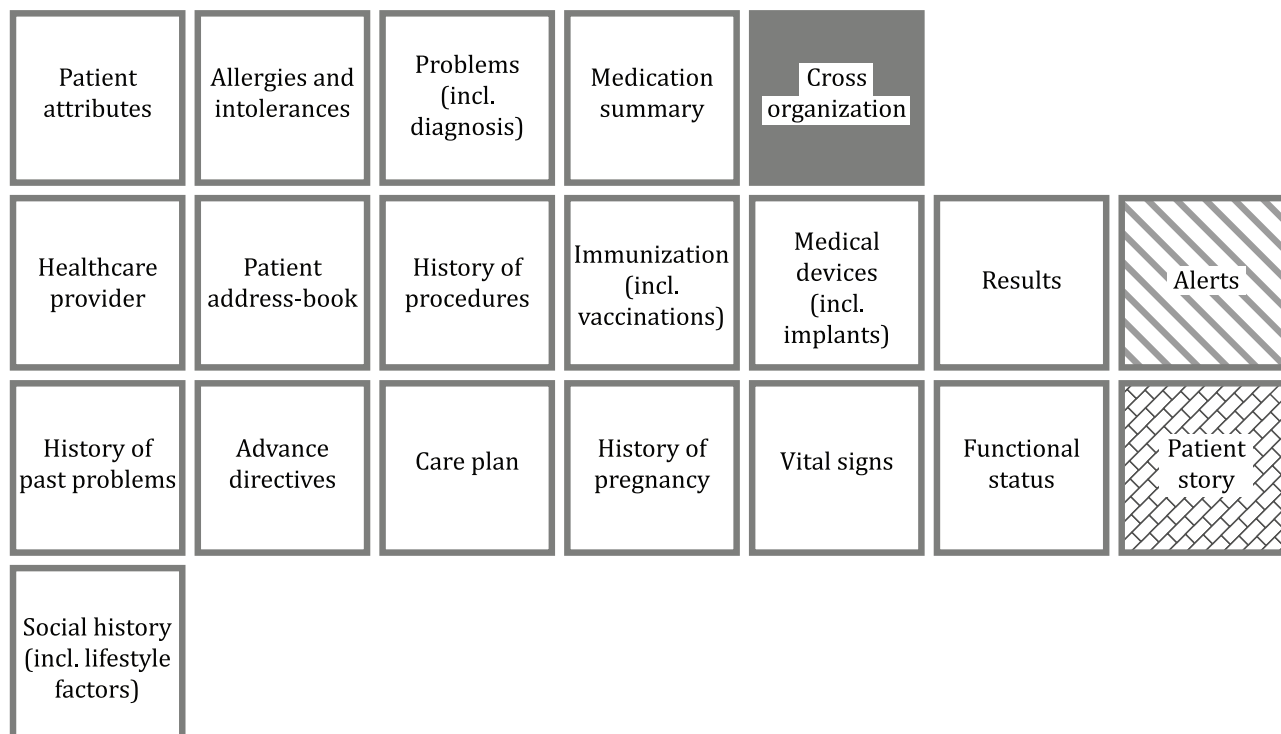
The first publication of this document was as a European norm in 2019. That regional standard was promoted to an international one with the first edition of this document (ISO 27269:2021).

The goal of this document is to define an international patient summary (IPS), comprising core content in a concise form to communicate efficiently.^[8] This document defines a minimal, structured IPS Data Set with associated business rules for a relevant patient.

The primary value of a patient summary, normalized by the IPS, is to facilitate and support appropriate clinical decision-making for the patient at the point of care (see ISO/TR 12773-1).

The IPS is designed to provide relevant information to assist planned and unplanned care across any organizational boundary, including country borders and their jurisdictional requirements (e.g. local, regional, state/provincial, national and international contexts).

The IPS Data Set is non-exhaustive. New IPS Data Blocks are introduced to meet new patient summary requirements whether they are clinical, administrative, or technological in nature. [Figure 1](#) shows the IPS Data Blocks present in this document, including 'Cross Organization' (conformance: mandatory), 'Alerts' (conformance: required if known) and 'Patient Story' (conformance: optional).



NOTE The Data Blocks 'Cross organization', 'Alerts' and 'Patient story' are new in this document compared to the first edition (ISO 27269:2021).

Figure 1 — IPS Sections and Features

0.2 The IPS collaboration

The IPS facilitates a shared vision^[9] with collaborating SDOs (initially ISO/TC 215, CEN/TC 251, HL7 International, IHE International and SNOMED International), each contributing IPS Artefacts to an IPS suite. From this document it is possible to derive compliant logical models that constrain it. Implementation guides

ISO 27269:2025(en)

are formalized in the HL7 CDA IG® and HL7 FHIR¹⁾ IG® and in the IHE IPS® profile. The IPS Data Set is not bound by any specific terminologies (see [Annex C](#)), although it does anticipate the terminologies conforming to the ISO standards on the identification of medicinal products (IDMP).^[10] IDMP is expected in the future to be the recommended target for medication in the IPS.

SNOMED International®²⁾ has provided the SNOMED CT IPS Terminology and IPS Reference Set (Free Set), which are directly maintained in response to global requirements for the IPS.

The IPS emphasizes the need to provide generic solutions for global application and, where possible, reference is made to international standards rather than to local ones. However, different international contexts can offer a variety of requirements that need to be considered to ensure that patient safety is not compromised. This document is aligned to ISO 13940:2015 and uses the eHN Guideline^[11] as the initial source for the patient summary requirement. Terminology and its binding are addressed in [Annex C](#).

0.3 Maintenance of this document

To address the over-riding need for interoperability, the IPS stakeholder community requires that this document be kept current and relevant. Revision of this document needs to consider the capacity and capabilities of stakeholders requiring conformance to the IPS. Feedback from early implementers also needs to be addressed. To make these improvements achievable, an ISO maintenance agency (MA) has been created. The name and contact information of the maintenance agency for this document can be found at www.iso.org/maintenance_agencies. The MA allows new requests to be addressed in a timely fashion, to assess the clinical and technical impact, and to strive for backward compatibility for any agreed change. Updates are available online (see Reference [\[12\]](#)). The inclusion criteria within this document (see [Annex B](#)) provide a transparent means of assessing new requirements.

The work undertaken in ISO to develop this document has attracted considerable interest from initiatives and organisations that would like to see extensions to its areas of clinical content coverage. Those items that would represent a minor adaptation to this version, and which have maturity and stability, have been added to this document.

The MA will keep track of proposals for potential extensions (e.g. proposals for data elements that are of primary relevance to children or to the elderly) and consider their maturity and relevance for inclusion in future editions of this document.

0.4 Structure of this document

This document focuses on the overall structure of the patient summary as well as the individual data elements that comprise it. The layout of this document (see [Table 1](#)) uses a hierarchy of levels (H0 to H7) to facilitate more detailed description with the purpose of supporting consistent implementation of the data set. The level H0 describes the complete IPS Document, while levels H1 to H7 describe the IPS Data Blocks in more detail; seven levels have been sufficient for this edition but that is not a fixed upper limit, and it is possible that future editions will require more. A common set of descriptors are used to further define the data elements in a consistent way.

Table 1 — Description of IPS Data Set concepts and their hierarchical relationships

Hierarchy	H0	H1	H2 – H7
IPS mega Data Block	IPS Document	All relevant IPS Data Blocks are identified	Further details are provided within the IPS Data Blocks clauses
IPS macro and meso Data Blocks	–	Individual IPS Sections, and IPS Features	Hierarchical description for individual Data Blocks

1) HL7 FHIR is the registered trademark of Health Level Seven International. This information is given for the convenience of users of this document and does not constitute an endorsement by ISO of the product named.

2) SNOMED International is the registered trademark of the International Health Terminology Standards Development Organization. This information is given for the convenience of users of this document and does not constitute an endorsement by ISO of the product named.

ISO 27269:2025(en)

The amount of information describing each Data Block is variable. To manage the variability, this document presents the data as a set of tables with a consistent set of descriptors; each table has a hierarchical structure with explicit links to subclauses providing further information.

Rows in the table without further links to detail are either self-explanatory or explained by the hierarchical context. The order of sibling attributes is arbitrary and has no implications for implementations of this document. The name of the Data Block is contextualized by the hierarchy to avoid any misunderstanding. For example, the term 'Device Type' is used rather than just 'type' even though it refers to a data element positioned within the IPS Data Block describing a medical device.

Health informatics — International patient summary

1 Scope

This document defines the core data set for a concise international patient summary (IPS), which supports continuity of care for a person and assists with coordination of their care.

This document provides an abstract definition of a patient summary from which derived models are implementable.

This document does not cover the workflow processes of data entry, data collection, data summarization, subsequent data presentation, assimilation, or aggregation. Furthermore, this document does not cover the summarization act itself, i.e. the intelligence, skills and competences, that results in the data summarization workflow. It is not an implementation guide that is concerned with the various technical layers beneath the application layer. Representation by various coding schemes, additional structures and terminologies are not part of this document.

2 Normative references

There are no normative references in this document.

koniec náhľadu – text ďalej pokračuje v platenej verzii STN