User Friendly Natural Language Processing (NLP) of Free-text Clinical Notes at UCSF: EMERSE and cTAKES



William Brown III, PhD, DrPH, MA

Shivani Mehta, MPH



#### Introductions





William Brown III, PhD, DrPH, MA,AssistantProfessor of Medicine & Epidemiology and Biostatistics

Shivani Mehta, MPH, student in the Department of Epidemiology and Biostatistics

# CODE Lab

#### **Clinical and Observational Data Excellence**

At CODE Lab our mission is to help researchers and healthcare workers contribute to creating a Learning Health System ... We accomplish these goals by:

► Developing innovative methods and tools for collecting data, improving adherence to biomedical protocols, and integrating diverse domain associated datasets.

► Educating researchers, students, and healthcare providers on the importance of informatics and on how to use informatics tools.

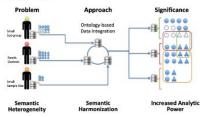
► Harmonizing data for new analysis, which will provide new knowledge to improve interventions and opportunities for new discoveries and collaborative research.

Lastly, **we committed to improving diversity, equity, and inclusion at UCSF** by leading existing efforts, and developing programs, that facilitate cross-cultural collaborations and recruitment and retention of underrepresented faculty, staff, and trainees.

#### <code.ucsf.edu>



The Clinical and Observational Data Excelence (COCB) Lab was founded and is directed by Assistant Professore Dr. William Blown, Lill, AC COCE Lab or mission is to help researchers and healthcare workers contribute to creating a Labrring Health System by levenging New Media (A.e., mHealth, social media) and Biomedical Informatics (i.e., semantic harmonization, natural language processing, machine saming, tabat subatazioni to colect data in eal-time, improve treatment and adherence, and integrate gathered data among and between clinical systems and other research datasets.



Message from CODE Lab's Director



I started CODE Las with the goal of helping to create a learning health system, where internal data and experience are systematically integrated with external evidence and that knowledge is put into practice. I believe that as a result, patients pet higher quality, safer, more delivery organizations become delivery organizations become delivery organizations become

## GOALS of the Workshop

- 1. Learn about NLP tools for research
- 2. Be introduced to user friendly NLP tools available at UCSF: EMERSE and cTAKES
- 3. Hear about "Use Cases" of NLP for Social Determinants of Health and Diabetes Research
- 4. Get help accessing these tools
- 5. Discuss and get your NLP questions answered

Agenda

**Hour 1** (50 minutes) - Overview of NLP tools at UCSF (10-minute break)

**Hour 2** (50 minutes) "Use Case" presentation (10-minute break)

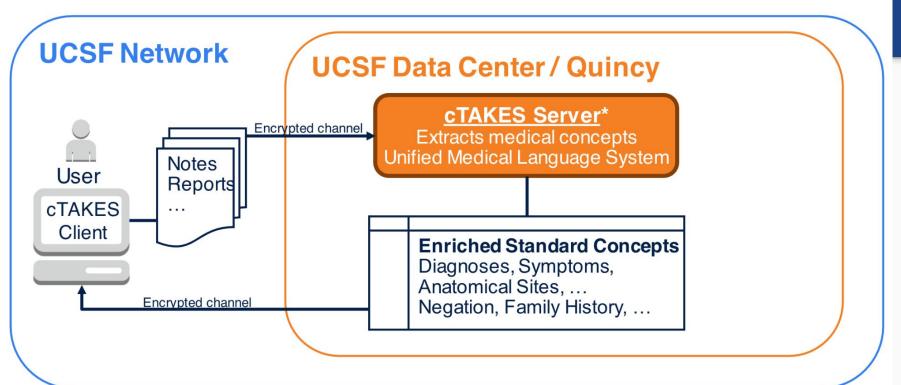
**Hour 3** - (50 minutes) Access Walk Through, Discussion, and Questions and Answers

#### Information Extraction on Clinical Notes

- Apache cTAKES<sup>™</sup> clinical Text Analysis Knowledge Extraction System
- UMLS Unified Medical Language System

Enriched context-specific attributes and co-references Concepts UMLS Database Medical Concepts dictionaries **Tokens** negation/uncertainty **HIPAA Symptoms** history Secured UMLS Diagnoses **Tokens** Notes Locations dictionaries **Medical Concepts Procedures** DB negation/uncertainty **Medications** UMLS history **Tokens Measurements** dictionaries parts-of-speech **Medical History** Medical Concepts person title negation/uncertainty date/time history numbers generic/subject measurement **De-identified** Notes **Information Commons** 

#### cTAKES-as-a-Service PHI-safe User Environment



\*uses Apache cTAKES<sup>™</sup> – clinical Text Analysis Knowledge Extraction System

#### Concepts found by cTAKES

Ms. \_\_\_\_\_ also stated that she had just ended a three week course of **prednisone** four days ago, which she had started about a month ago at 60 mg and tapered herself down over a few days by 10 mg. She began the course of **prednisone** last month because she felt as if she was about to have a **Crohn's** flare at the time. Ms. \_\_\_\_ was last hospitalized at UNC for **Crohn's disease** exacerbation in March 2007. She denies any recent hemoptysis, constipation, hematochezia, melena, and changes in her bowel habits since Wednesday. She has been compliant with taking her medications for **Crohn's** and has been stable on her **mesalamine**, **mercaptopurine**, and **omega-3**-acid supplement **41**: Fentanyl

Upon arrival to the ED, Ms. \_\_\_\_ was put on IV fluids, given fentanyl 50 mcg IVP, phenegran 12.5 mg diluted with 10 mL NS IVP, and Mg sulfate<sup>††</sup> IVP. Radiological images were obtained through an abdominal CT scan, ultrasound, and 2V XR. Ms. \_\_\_\_ was not given any other narcotics for her pain because of a past violation of a pain contract after a positive toxicology screen for cocaine resulted in her discharge from her family medicine provider and due to suspicions that she was narcotic-seeking.

Past Medical History

Crohn's disease, diagnosed 1998 Adenocarcinoma of terminal ileum 1998 - s/p resection of terminal ileum, rad and chemo, no mets. hx of small bowel obstruction<sup>†</sup> secondary to Crohn's Disease DM HTN DVT and PE 2001 PUD

			<b></b>		-			<b>A</b>	<b>A</b>
text	negated	location	domain	hx	conditional	сші	location snomed id	vocab term	vocab
Crohn Disease	×		diseases	×	×	C0010346		34000006	SNOM
Crohn Disease	×		diseases	×	×	C0010346		34000006	SNOM
<u>Hemoptysis</u>	~		symptoms	×	×	C0019079		66857006	SNOM
Constipation	~		symptoms	×	×	C0009806		14760008	SNOM
Hematochezia	×		symptoms	×	×	C0018932		405729	SNOM
Melena	~		symptoms	×	×	C0025222		2901004	SNOM
Defecation	×	Intestines	symptoms	×	×	C0011135	261093006	39211005	SNOM
Crohn Disease	×		diseases	×	×	C0010346		34000006	SNOM
mesalamine	×		medications	×	×	C0127615		52582	RXNO
mercaptopurine	×		medications	×	×	C0000618		1039008	SNOM
Omega-3 Fatty Acids	×		medications	×	×	C0015689		4301	RXNO
Fentanyl	×		medications	×	×	C0015846		373492	SNOM
Intravenous pyelogram	×		procedures	×	×	C0203108		32265006	SNOM
Intravenous pyelogram	×		labs	×	×	C0203108		32265006	SNOM
Intravenous pyelogram	×		procedures	×	×	C0203108		32265006	SNOM
Intravenous pyelogram	×		labs	×	×	C0203108		32265006	SNOM
Sulfates, Inorganic	×		medications	×	×	C0038720		95975008	SNOM
Sulfate measurement	×		procedures	×	×	C0474702		104948	SNOM

# EMERSE: Electronic Medical Record Search Engine

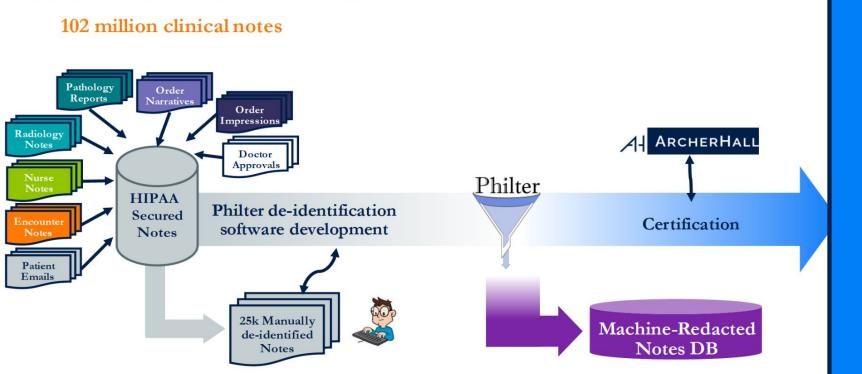
- Open-source software tool to search and browse notes data, without programming experience.
  - EMERSE was created by the University of Michigan.
- Clinical notes extracted from UCSF Electronic Health Record, Epic, and processed by software to remove 18 PHI elements.
- Patient's records are assigned synthetic identifiers that maintain the link between notes and the patient's structured data in DEID CDW.

Access and Q&A

Commons

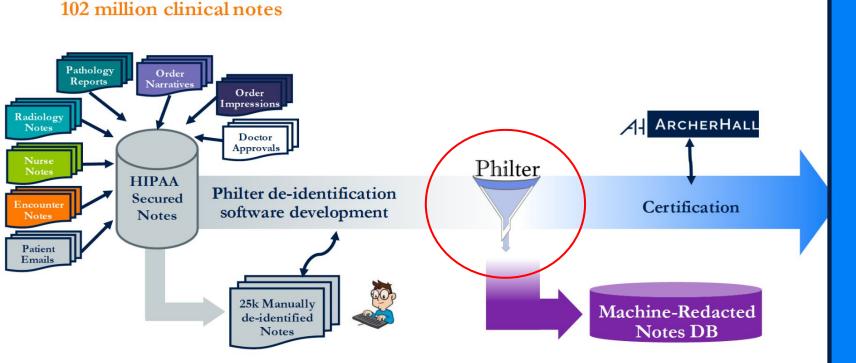
Information

## **Clinical Data and Notes**



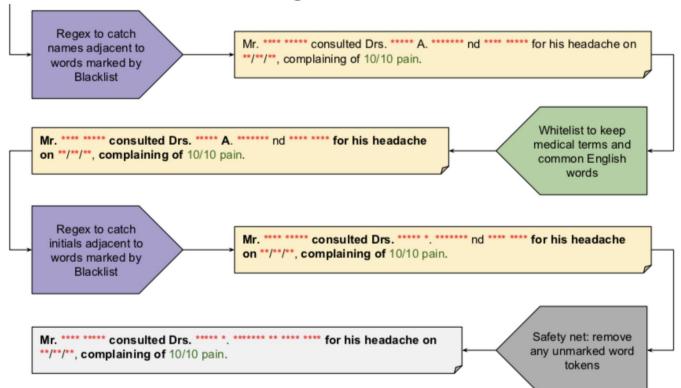
Access and Q&A

# Protected Health Information filter (Philter)



Protected Health Information filter (Philter): accurately and securely de-identifying free-text clinical notes. NPJ Digit Med. 2020; 3:57. Norgeot B, Muenzen K, Peterson TA, Fan X, Glicksberg BS, Schenk G, Rutenberg E, Oskotsky B, Sirota M, Yazdany J, Schmajuk G, Ludwig D, Goldstein T, **Butte AJ**. PMID: 32337372; PMCID: PMC7156708.

#### Illustration of Philter Algorithm



Protected Health Information filter (Philter): accurately and securely de-identifying free-text clinical notes. NPJ Digit Med. 2020; 3:57. Norgeot B, Muenzen K, Peterson TA, Fan X, Glicksberg BS, Schenk G, Rutenberg E, Oskotsky B, Sirota M, Yazdany J, Schmajuk G, Ludwig D, Goldstein T, **Butte AJ**. PMID: 32337372; PMCID: PMC7156708.

## Sample Note

#### **Before De-identification**

A900001 2011-1-20 18:40:00.000 7465789 1 EMERGENCY DEPARTMENT CHART [FINAL] ------- VISIT DATA --------- Patient SMITH, MARY (317 62 10-1), visit number 189487645, arrived at the ED at 1/20/2011 5:35:18 PM with a complaint at registration of PAIN ARM/LEG-EXTREMITIES. ----- HISTORY OF PRESENT ILLNESS ----- (Triage complaint: brick fell on RT foot yesterday at work. now c/o rt big toe pain. no swelling UC ), 29 y.o. M c/o of R big toe pain 1/10 mild after a brick fell on his R foot yesterday. He denies any other injury or pain or complaint. No fall. Able to walk without pain or difficulty. No pain or complaint proximally up his RLE. No numbness/tingling., --Medications None--Allergies None -- Past Medical History rt eye surgery --Tobacco: None --Alcohol: None --Recreational drugs: denies Other medical charts and records reviewed and interpreted: Triage and nursing notes ----- REVIEW OF SYSTEMS ------ --GENERAL ROS comments / Constitutional: negative, fever, chills. --EYES: negative . -- EAR NOSE MOUTH THROAT: see HPI

#### After de-identification

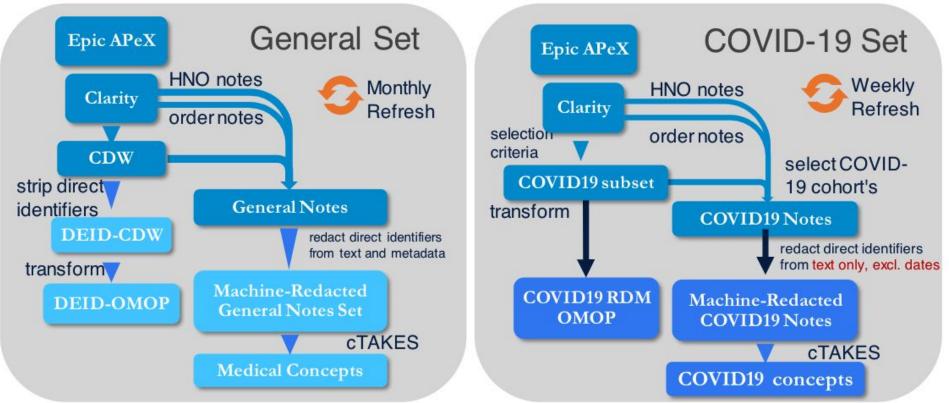
DB35CD2D4DD54A 01/05/2011 18:40:00.\*\*\*\*\* \*\*\*\*\* 1 EMERGENCY DEPARTMENT CHART [FINAL] -------VISIT DATA -------

Patient \*\*\*\*\*, \*\*\*\*\* (\*\*\*\*\* \*\*\*\*\* \*\*\*\*\*), visit number \*\*\*\*\*, arrived at the ED at 01/05/2011 5:35:18 PM with a

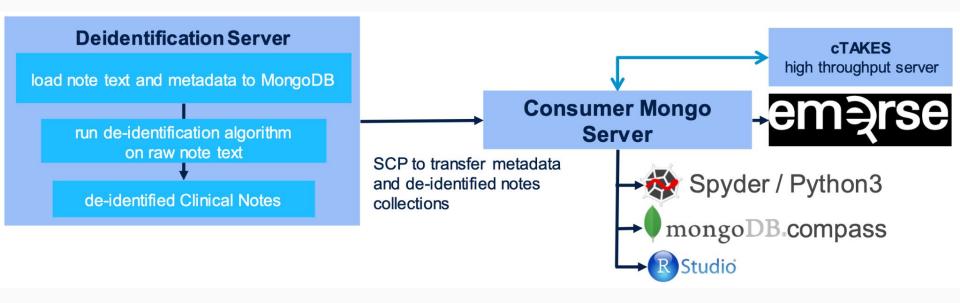
complaint at registration of PAIN ARM/LEG-EXTREMITIES. ----- HISTORY OF PRESENT ILLNESS ----------- (Triage complaint: \*\*\*\*\* fell on RT foot yesterday at work. now c/o rt big toe pain. no swelling UC ), 29 v.o. M c/o of R big toe pain 1/10 mild after a \*\*\*\*\* fell on his R foot yesterday. He denies any other injury or pain or complaint. No \*\*\*\*\*. Able to walk without pain or difficulty. No pain or complaint proximally up his RLE. No numbness/tingling., --Medications None--Allergies None --Past Medical History rt eye surgery -- Tobacco: None -- Alcohol: None -- Recreational drugs: denies Other medical charts and records reviewed and interpreted: Triage and nursing notes ------ REVIEW OF GENERAL ROS comments / Constitutional: negative, fever,

GENERAL ROS comments / Constitutional: negative, fever, chills. --EYES: negative . --EAR NOSE MOUTH THROAT: see HPI.

## **UCSF** Clinical Notes

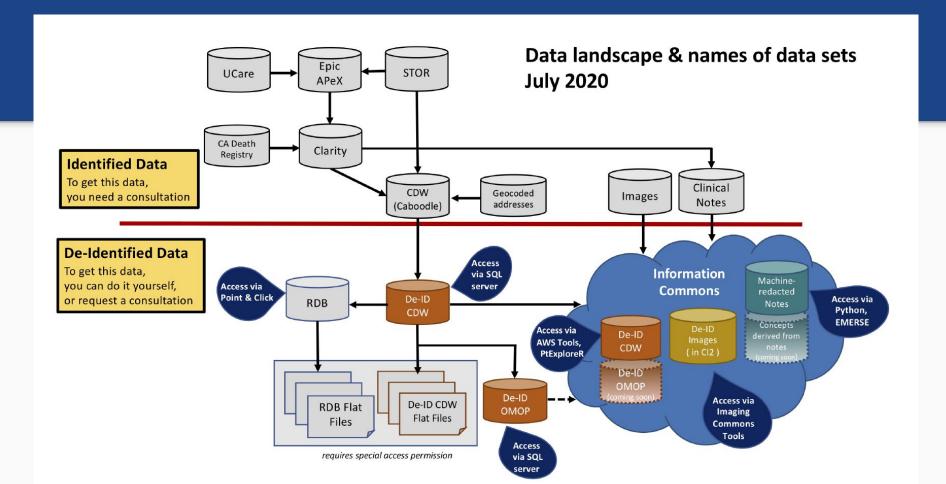


## **M-R Notes Data Flow**



<b>Q</b> EMERSE		William Brown ^
Patients     All Local Patients (2)       Filters     Image: social state of the social s	friendly     "fun loving"     genial     gregarious     outgoing     sociable       HENTS     FIND PATIENTS	
Temporary Terms Name/Description	Terms to include	UPLOAD TERMS SAVE TERMS
Manage Terms View Terms Sharing Clear/Delete Export	Please add terms or multi-word phrases, one at a time using the field below.  Add term   ①lgnored  ADD	Please add phrases to exclude one at a time using the field below.  Add Phrase ADD
	Included terms       Included terms       Image: social state s	Excluded phrases None
	Image: Provide the second	
	gregarious     ""       Image: Optimized constraints     ""       Image: Optimized constraints     ""       Image: Optimized constraints     ""	

Access and Q&A



# Patient ExploreR

- User friendly interactive interface with drill-downs
  - https://patientexplorer-i c.ucsf.edu/app/pe
- De-identified row level EHR data
- Search and export patient cohorts

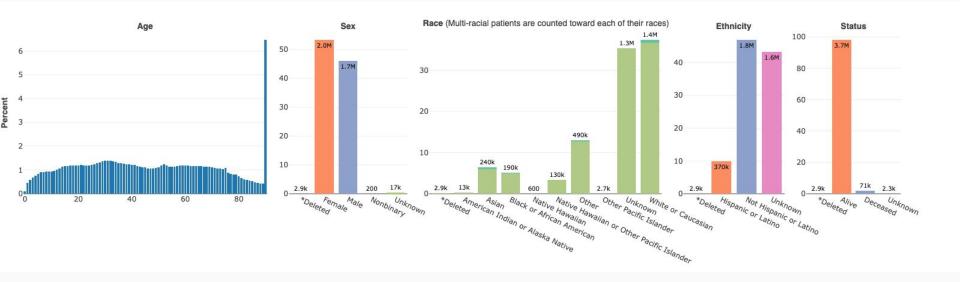
UCSF PatientExploreR	Patient Finder	Patient Explorer	About	Help	Logout		
							Patients in the system: <b>3,746,588</b> Latest data refresh: <b>11/30/2021</b>
Search M	lode: SE	ARCH BY CRITERIA	ALL F	PATIENTS	PATIENT LOOKUP		
Step 1. Filter by Search Criteria:							P\$
OR AND	13	+ Add clinical event	+ Add p	atient detail	+ Add group of items		
		U Clinical Event - [	Diagnosis				
Step 2 (optional). Filter by Event Sequence		🗕 Clinical Event - L	ab				
Step 2 (optional). The by Event Sequence		R Clinical Event - N	Medication				
Select up to two 🕚 items in Step 1 to filte	er them by ev	📺 Clinical Event - F	Procedure				
		Clinical Event - F	Provider				
Simplified Search Preview:		😻 Clinical Event - V	/itals				View actual SOL
Simplified Search Fleview.		🚉 Clinical Encount	er				View actual SQL
		FIND MATCHING	9 PATIENTS	RE	SET SEARCH		

# Patient ExploreR

- Diagnoses
- Encounters
- Lab
- Medications
- Patient demographics
- Procedures
- Providers
- Vitals

Patient Finder					Patients in the system: <b>3,746,588</b> Latest data refresh: <b>11/30/2021</b>
Search Mode: 🥂 s	EARCH BY CRITERIA	ALL F	ATIENTS	PATIENT LOOKUP	
Step 1. Filter by Search Criteria:					
OR AND	+ Add clinical event	+ Add pa	tient detail	+ Add group of items	
	V Clinical Event - I	Diagnosis			
Step 2 (optional). Filter by Event Sequences:	📕 Clinical Event - I	Lab			
Step 2 (optional). Filter by Event Sequences.	🧏 Clinical Event - I	Medication			
Select up to two ① items in Step 1 to filter them by e	Clinical Event - I	Procedure			
	Clinical Event - I	Provider			
Simplified Secret Provide:	😻 Clinical Event - '	Vitals			View actual SOL
Simplified Search Preview:	Clinical Encount	ter			view actual SQL

# Patient ExploreR



#### Questions?

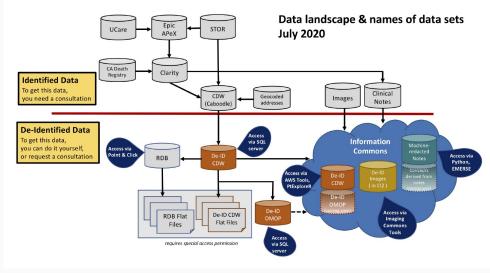


#### Use Case

#### Comparative Analysis of Social Connections/Isolation and Stress Documentation in Structured and Unstructured Machine De-Identified Data using PatientExploreR and EMERSE

# Main use cases for EMERSE

- 1. Bring a list of patient IDs into EMERSE,
  - a. E.g. PatientExploreR, De-ID CDW queries, etc.
- 2. Search within EMERSE to create a list of patient IDs
- Reviewing clinical notes using basic or advanced natural language processing (NLP) features



#### EMERSE: Use-case example

- Comparative Analysis of Social Connections/Isolation and Stress Documentation in Structured and Unstructured Machine De-Identified Data using PatientExploreR and EMERSE
- Social determinants of health (SDOH) embedded in the clinical notes can be captured using NLP, but a corpi are hard to generate and data access can be challenging, often requiring advanced programming skills.

Access and Q&A

# **EMERSE: Building Patient Cohorts**

- We identified 4,274 adult
   (≥18 years) patients
   receiving primary care for
   their diabetes (type I and
   type II: ICD-10-CM: E10,
   E11) at UCSF from
   January 1, 2018, to
   December 31, 2019.
  - Patient cohort was built using PatientExploreR

<b>emerse</b>		Shivani Mehta ^
Vatients         All (2,508,721)           illers	PATIENTS	
emporary Patient List Saved Patient Lists All	All Local Patients Network	
Name/Description Add/Upload Patients View Patients Patient Demographics Sharing Clear Export Export Exection	a can add patients to your patient list by typing or pasting their medical record numbers (MRNs) in the field below r patient list must not exceed 100,000 patients. Wumber of patients on the list: 0 Number of patients that can be added to the list: 100,000 Add Patients Kedical Record Numbers Enter Medical Record Numbers	or uploading a text file. Add by Bulk Upload Uploading will append patients to the list. Choose File No file chosen UPLOAD FILE

#### **EMERSE:** Search Filters

<b>Ə</b> EMERSE	
Patients	All (2,508,721)
Filters	
Terms	
Results	HIGHLIGHT DOCUMENTS FIND PATIENTS

ILTERS	Only documents dated b	etween the following dates will b	e found in search and whe
Encounter Dates	reviewing patients' charts	5.	
Age (current)	The date range for select	ion is from 02/01/2008 to 01/03,	/2022
Sex			
Race	Start Date:	MM/DD/YYYY	
Ethnicity			
Vital Status	End Date:	MM/DD/YYYY	
Document Source			

Access and Q&A

#### **EMERSE: Basic Search Terms**

<b>Q</b> EMERSE		Shivani Mehta ^
Patients All (2,508,721) Filters Terms isolated ionely isolati Results HIGHLIGHT DOCUMENTS Temporary Terms Saved Terms Act	FIND PATIENTS	
Temporary Terms Name/Description Manage Terms	Terms to include	UPLOAD TERMS SAVE TERMS Phrases to exclude
View Terms Sharing Clear/Delete	Please add terms or multi-word phrases, one at a time using the field below.  Add term  ADD	Please add phrases to exclude one at a time using the field below.  Add Phrase  ADD
	Included terms	Image: state

Access and Q&A

#### **EMERSE: Basic Search Terms Results**

		Shivani Mehta ^
Patients	Diabetes (4,100)	
Filters	Encounter Dates Document Source	
Terms	isolated lonely isolation	
Results	HIGHLIGHT DOCUMENTS FIND PATIENTS	
Summaries	Demographics Trends	

#### 1,446 patients matched the search criteria

within the patient list "Diabetes"

TAG PATIENTS IN LIST	MOVE TO TEMPORARY PATIENT LIST
----------------------	--------------------------------

To review these patients in more detail, move to a Temporary Patient List and then click the Highlight Documents button.

Access and Q&A

#### **EMERSE: Basic Search Terms Results**

	E	
Patients	Diabetes (4,100)	
Filters	Encounter Dates Document Source	
Terms	isolated lonely isolation	
Results	HIGHLIGHT DOCUMENTS FIND PATIENTS	
Summaries	Demographics Trends	
(DEID CI	DW)	01/29/2019
0.00	re all the PVs were <mark>isolated</mark> . He had an SVC atrial erformed an SVC <mark>isolation</mark> . We also ablated a high	
000000000000000000000000000000000000000	ent had a PV <mark>isolation</mark> and atrial flutter ablation on of 117 bpm <b>Isolated</b> ***** were frequent (6.2%,*****), SVE	
	e( <b>Isolated</b> VEs were rare (	
well s/p r	redo PV <mark>isolation</mark> in 2014. He has a	

Access and Q&A

## **EMERSE: Basic Search Terms Results**

<b>Ə</b> EMERS	
Patients	Diabetes (4,100)
Filters	Encounter Dates Document Source
Terms	isolated lonely isolation
Results	HIGHLIGHT DOCUMENTS FIND PATIENTS
Summaries	Demographics Trends
(DEID CI	DW) 02/03/2018
	ssion-based precautions: DROPLET Microorganism <mark>isolated</mark> : Rhinovirus/Enterovirus In addition to I precautions, please maintain DROPLET <mark>isolation</mark> for the duration of Mr

## EMERSE: Advanced Search

- Advanced terms search feature offers precise control of searches
- Uses underlying JavaCC Lucene package, a search engine query parser
- Allows for many types of searches including nested Boolean operators, wildcard searches, proximity searches, fuzzy searches, term boosting
  - https://lucene.apache.org/core/7\_2\_1/queryparser/org/apache/lucene/queryparser/class ic/package-summary.html#Overview

# **EMERSE:** Application of Advanced Search

SDOH DOMAIN	SUBDOMAIN (ICD-10 codes)	TERMS			
Social connections / isolation	Social Exclusion and Rejection (Z60.4, R45.8, R45.89, Z65.9, Z91.8, Z91.89, Z65.9, Z91.8)	("social isolation"~10) OR ("socially isolated"~10) OR ("Lonely", "Loneliness") NOT ("no loneliness", "not lonely", "no social isolation")			
	Social isolation prompted by family-related disruptions (Z60.2, Z63.0, Z63.5, Z63.9)				
	Lack of social environment and social support (Z60.8, Z63.8, Z73.4)				
	General terms (F43.2, F43.20, F43.9, Z73.3, Z73.2)	("stress", stressor*, "stressful") OR ("feeling stressed"~10) NOT (stress scor*, "stress lab", "echocardiogram", "ecg", stress imag*, stress test*, "stress myocardial perfusion", "stress			
	Work-related stress (Z56.3, Z56.6, Z63.7)	ulcer", "post traumatic stress disorder", "stress induced", "stress reduction", "stress fracture", "stress reaction", "pharmacologic stress", "post stress", "stress dose", "exercise stress", "no			
Stress	Family/home-related stress (Z63.7, Z63.79, Z63.8)	stress", "stress induce ischemia", "stress echo") NOT ("stress study"~5) NOT ("stress calculated"~5)			
	Life-management related stress (Z73.8, Z73.89, Z91.8, Z91.89)				

# **EMERSE:** Application of Advanced Search

<b>Ə</b> EMERS	E	
Patients	Diabetes (4,100)	
Filters	Encounter Dates Document Source	
Terms	("social isolation"-10) OR ("socially isolated"-10) OR ("Lonely", "Loneliness") NOT ("no loneliness	", "not lonely", "no social isolation")
Results	HIGHLIGHT DOCUMENTS FIND PATIENTS	
Summaries	Demographics Trends	
(DEID C	DW) aly, going to move back to ***** ***** where she will have more family and can afford	07/10/2018
(DEID C	DW)	02/14/2018
mild/mo go to lib	wanting more to do and feeling <b>lonely</b> . Discussed behavioral activation as method of addressing oderate anxiety, especially in setting of <b>loneliness</b> and *****, ***** up with plan to patient to orary daily in morning to help address feeling of isolation and <b>loneliness</b> , especially given , depression, feelings of <mark>loneliness</mark> , and psychosocial stressors including relationship	

Access and Q&A

# **EMERSE:** Summary of Search Options

#### Table 3. Feature Comparison between the Temporary Terms, the Saved Terms, and the Advanced Terms

Feature	Temporary Terms	Saved Terms	Advanced Terms
Maximum number of terms per list	no limit <sup>1</sup>	no limit <sup>1</sup>	no limit <sup>1</sup>
Supports 18 colors for terms	Yes	Yes	No
Full control over the choice of colors for terms	Yes	Yes	No
Ideal for teams working together	No	Yes	No
Supports sharing with other users	No	Yes	No
Saved between sessions	No	Yes	No
Has a Term Upload feature	Yes	Yes	No
Can take advantage of Synonym suggestions	Yes	Yes	No
Spell Checking of Terms	Yes	Yes	No
Supports the ability to search for terms in a case-sensitive manner	Yes	Yes	Yes
Supports advanced search features including customizable proximity searches, fuzzy searches, Boolean searches (AND, OR NOT), and regular expressions	No	No	Yes

<sup>1</sup> While there is no limit on the number of terms, a large number (more than 100) will cause the system to run quite slow.

Access and Q&A

# EMERSE: Highlighting Documents and Tagging Patients

		Shiva
Patients	Diabetes (4,100)	
Filters	Encounter Dates Document Source	
Terms	("social isolation"-10) OR ("socially isolated"-10) OR ("Lonely", "Loneliness") NOT ("no ioneliness", "not ionely", "no social isolation")	
Results	HIGHLIGHT DOCUMENTS FIND PATIENTS	
Overview		

MRN	Name	DEID CDW	Main EHR	Pathology	Other	Radiology	Comment	Tag
3B3440D2FFBD2	DEID, DEID DEID							
							0 / 255	
445248DBC91CA	DEID, DEID DEID							
							0 / 255	
F4290441F77E1	DEID, DEID DEID							
							0 / 255	
69FD215E09CE5	DEID, DEID DEID							
							0 / 255	
0B11B6756DC571	DEID, DEID DEID							
							0 / 255	
B5F714050A6DD	DEID, DEID DEID							

## **EMERSE: Exporting Patient Cohorts**

<b>Ə</b> EMERSE								
Patients	Diabetes (4,100)							
Filters	Encounter Dates Document Source							
Terms	("social isolation"-10) OR ("socially isolated"-10) OR ("Lonely", "Loneliness") NOT ("no loneliness", "not lonely"-10, "no social isolation")							
Results	HIGHLIGHT DOCUM	ENTS FIND PATIENTS						
Temporary Pati	ent List Saved Pa	atient Lists All Local Patients Net	work					
Diabetes Name/Des	cription	Add a password to protect th	e Excel file					
Add/Uploa	d Patients	Enter password		0				
View Patients			A strong password is re-	A strong password is required				
Patient Der	mographics	Re-enter password		0				
Sharing								
Clear/Delet	te	DOWNLOAD						
Export								

## **Additional Resources**

- For access
  - <u>https://wiki.library.ucsf.edu/pages/viewpage.action?spaceKey=UCNFR&title=EMERSE</u>
- Navigating EMERSE
  - <u>https://ucsf.app.box.com/s/x3ulqxupj6dlk5ttf3pixsqgzzckv6zd</u>
- Training resources from UMich
  - http://project-emerse.org/tutorials.html
  - http://project-emerse.org/documentation/user\_guide.html

#### Questions?



#### How to get permission

• Active **CAMPUS** or **SOM** account.

If user has a UCSFMC account, a new CAMPUS account can be requested via Account
 Request Form <a href="https://ucsf.service-now.com/ucsfit?id=ucsf">https://ucsf.service-now.com/ucsfit?id=ucsf</a> sc cat item&sys id=dcd937132b779a0019d7c71317da151f

Request Instruction can be found on the wiki https://wiki.library.ucsf.edu/x/UitXHw

#### Questions?



# Audience guided interactive session



#### Questions?



User Friendly Natural Language Processing (NLP) of Free-text Clinical Notes at UCSF: EMERSE and cTAKES



William Brown III, PhD, DrPH, MA

Shivani Mehta, MPH



#### **IRB** Approval for Machine-Redacted Notes Research

Machine Redacted Notes are clinical notes extracted from UCSF EPIC, which have been processed by software to remove PHI. The data extracted includes clinical text for any patient who has UCSF EMR records. Clinical notes are extracted from EPIC, and then undergo machine redaction (PHI de-identification software), for removal of 18 PHI elements as identified by HIPAA. Dates are not removed, but instead shifted for each patient following the same methodology as de-identified Clinical Data Warehouse (de-id CDW). Each patient's records are assigned synthetic identifiers, following de-id CDW process, which enables linking notes to structured data in de-id CDW.

•The process of machine redaction and resulting data are currently undergoing formal certification by third party vendor. While this process is time consuming, "Machine-redacted pre-certified data for Machine Learning and Analysis" UCSF IRB Study #19- 27988 was in put in place with the aims to (1) speed-up access time to machine-redacted clinical data for research purposes and (2) to gain researcher feedback. Until the database receives de-identification certification, these data are treated as identified data. The data are stored in designated secure environments in IT data center. Researchers can access the data via secure software end-points, that require user authentication. The software enables researchers to query and analyze the data, download data and combine with other data sets.

•If researchers include the use of Machine Redacted Notes for purposes of their IRB-approved study, it is researcher responsibility to (1) limit data analyses to those approved for their study, (2) use the minimum data necessary for their study, (3) combine machine redacted data sets with other data only as approved by IRB for their study, (3) securely transfer and store downloaded data as approved by their IRB study, (4) not attempt to re-identify patients (5) comply with data sharing practices as approved by their IRB study and UCSF Data Sharing task force.

#### Access Requirements

- Copy of approved IRB document
- Users requesting access should be listed as study personnel
- IRB text allowing Machine-Redacted Notes research https://wiki.library.ucsf.edu/x/BwRXHw

#### - Active CAMPUS or SOM account.

 If user has a UCSFMC account, a new CAMPUS account can be requested via Account Request Form https://ucsf.service-now.com/ucsfit?id=ucsf\_sc\_cat\_item&sys\_id=dcd937132b779a0019d7c713 17da151f

Request Instruction can be found on the wiki



#### Machine-Redacted Notes

Clinical notes extracted from UCSF Electronic Health Record, Epic, and processed by software to remove 18 PHI elements. Each patient's records are assigned synthetic identifiers that maintain the link between notes and the patient's structured data in DEID CDW. There are two datasets of UCSF Machine Redacted Notes, known as 1) General Set and 2) COVID-19 Set.

#### EMERSE: Electronic Medical Record Search Engine

An open-source software tool to search and browse notes data, without programming experience. UCSF has installed two instances of EMERSE here at UCSF against our 1) machine-redacted notes and 2) COVID-19 notes. EMERSE was created by the University of Michigan.