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Which of the following terminology products did you use this year? UMLS (Unified Medical Language System (1) RxNorm (2) VSAC (Value Set Authority Center) (4) MetaMap (3) MedlinePlus Connect (21) NIH Common Data Elements (CDE) Repository (5) SNOMED CT - US Edition (11) SNOMED CT - International Release (10) LOINC (Logical Observation Identifier Names & Codes Terminology) (7) CPT (Current Procedural Terminology) (6) None of these (18) I don't know (20)

Other; please specify: (19) _

	logy or code system would you like to see added to the UMLS?
or what purp	pose(s) did you use UMLS?
	Process texts to extract concepts, relationships or knowledge (5)
	Facilitate mapping between terminologies (8)
	Develop an information retrieval system (3)
	Extract specific terminologies from the Metathesaurus (e.g., MedDRA, MeSH, SNOMED CT) (1)
	Create and maintain local terminology (2)
	Develop a terminology server or service (6)
	Research terminologies and ontologies beyond any of the above categories (7)
	Other; please specify: (16)
o you provid	le an application, tool, or system that utilizes the UMLS?
O Yes	(1)
O No ((2)

O 1-10	(1)
O 11-10	0 (2)
O 101-1	,000 (3)
0 1,001-	-10,000 (4)
O More	than 10,000 (5)
	e your application, tool, or system that utilizes the UMLS. How does it utilize the UMLS? Are UMLS o users? Who uses the application/tool/system?>
	and briefly describe any enhancements you would suggest to improve the UMLS.
	File Format (4)
	Mapping (5)
	Installation (6)
	Site Navigation (7)
	Customer Support (8)
	Use Case Examples (9)
	Training/Documentation (11)
	Other; please specify: (12)

How many users use your application, tool, or system that utilizes the UMLS?

How did you access RxNorm?	
	Browsing in RxNav (2)
	Download RxNorm files (3)
	Through the RxNorm API (5)
	RxNav-in-a-Box (container for installation of the RxNorm API and RxNav) (7)
	Files extracted from the Metathesaurus (4)
	Browsing on the UMLS Terminology Services (1)
	Other; please specify: (6)
Why did you use	RxNorm in the UMLS? What value does the UMLS add to your use of RxNorm?
For what purpose	e(s) did you use RxNorm?
	E-Prescribing (1)
	Information Exchange (2)
	Formulary Development (3)
	Reference Value Sets (4)
	Analytics (5)
	Access to information about obsolete RxCUIs and NDCs (for analytics) (7)
	Other; please specify: (6)

Do you provide an application, tool, or system that utilizes RxNorm?
○ Yes (1)
O No (3)
How many users use your application, tool, or system that utilizes RxNorm?
O 1-10 (1)
O 11-100 (2)
O 101-1,000 (3)
1,001-10,000 (4)
More than 10,000 (5)
Please describe your application, tool, or system that utilizes RxNorm. <div>How does it utilize the RxNorm? Are RxNorm data exposed to users? Who uses the application/tool/system?</div>
Please describe your application, tool, or system that utilizes RxNorm. <div>How does it utilize the RxNorm? Are</div>
Please describe your application, tool, or system that utilizes RxNorm. <div>How does it utilize the RxNorm? Are RxNorm data exposed to users? Who uses the application/tool/system?</div>
Please describe your application, tool, or system that utilizes RxNorm. RxNorm data exposed to users? Who uses the application/tool/system? Do you use MeSH out of the RxNorm release (not the UMLS)?
Please describe your application, tool, or system that utilizes RxNorm. <div>How does it utilize the RxNorm? Are RxNorm data exposed to users? Who uses the application/tool/system?</div> Do you use MeSH out of the RxNorm release (not the UMLS)? Yes (1)
Please describe your application, tool, or system that utilizes RxNorm. <div>How does it utilize the RxNorm? Are RxNorm data exposed to users? Who uses the application/tool/system?</div> Do you use MeSH out of the RxNorm release (not the UMLS)? Yes (1) No (4)
Please describe your application, tool, or system that utilizes RxNorm. <div>How does it utilize the RxNorm? Are RxNorm data exposed to users? Who uses the application/tool/system?</div> Do you use MeSH out of the RxNorm release (not the UMLS)? Yes (1) No (4) Do you use Semantic Types out of the RxNorm release (not the UMLS)?
Please describe your application, tool, or system that utilizes RxNorm. <div>How does it utilize the RxNorm? Are RxNorm data exposed to users? Who uses the application/tool/system?</div> Do you use MeSH out of the RxNorm release (not the UMLS)? Yes (1) No (4) Do you use Semantic Types out of the RxNorm release (not the UMLS)? Yes (1)

How did you acc	ess CPT?
	Download files from the American Medical Association (3)
	CPT Developer's Tool Kit (CPT DTK) (4)
	Files extracted from the Metathesaurus (2)
	Browsing on the UMLS Terminology Services (1)
	Other; please specify: (5)
Why did you use	CPT in the UMLS? What value does the UMLS add to your use of CPT?
How did you acc	ess LOINC?
	Download files from the Regenstrief Institute (loinc.org) (4)
	Browsing on search.loinc.org (2)
	RELMA (Regenstrief LOINC Mapping Assistant) (6)
	Browsing on the UMLS Terminology Services (1)
	Files extracted from the Metathesaurus (3)
	Other; please specify: (5)
Why did you use	LOINC in the UMLS? What value does the UMLS add to your use of LOINC?

How did you acco	ess SNOMED CT?
	Download the US Edition of SNOMED CT (7)
	Download the International Release of SNOMED CT (2)
	Download the CORE Problem List Subset (3)
	Download the Spanish Edition of SNOMED CT (4)
	Browse on the UMLS Terminology Services (1)
	Files extracted from the Metathesaurus (5)
	Other; please specify: (6)
Why did you use	SNOMED CT in the UMLS? What value does the UMLS add to your use of SNOMED CT?
	nented SNOMED CT in an electronic health record system or a terminology service used by record systems?
O Yes (1)	
No (2) Which format of S	SNOMED CT did you use in your implementation?
	RF1 (1)
	RF2 (2)
	OWL (6)
	CORE Problem List Subset of SNOMED CT (3)
	Don't know (4)
	Other; please specify: (5)

In what ways d	o health providers interact with SNOMED CT within the system?
	Pulling problems, findings, etc into the problem list from SNOMED CT content (1)
via 3rd par	Enter problems, findings, as text or from institutional supported list and converted to SNOMED CT ty software (4)
	I don't know (5)
	Other; please specify: (6)
Do you use SN	OMED CT post-coordinated expressions in your system/application?
O Yes (2)
O No (3	
O Don't	know (4)
Please describ	e how you use SNOMED CT post-coordinated expressions in your system/application.
Please describ	e how you use SNOMED CT data in your application/system.
Which maps be	etween SNOMED CT and ICD-9-CM or ICD-10-CM have you used?
	SNOMED CT to ICD-10 CM Map (1)
	SNOMED CT to ICD-9-CM map (2)
	ICD-9-CM diagnoses to SNOMED CT map (3)
	ICD-9-CM procedures to SNOMED CT map (4)
	I have not used any of the maps (5)

Please describe	how you used the maps you selected in the previous question.
What can NLM c	lo to improve MetaMap?
How do you use	the VSAC and value sets?
	Author value sets (4)
	Report clinical quality measures (CQMs) to CMS (7)
	Access content through VSAC FHIR terminology service (8)
Would you be in:	Other; please specify: (9)terested in creating a program release for easy searching and downloading of your value sets?
O Yes (1	
O No (2)	
Are you interested	ed in creating intensional (logically-defined) value sets in VSAC?
O No (2)	
What changes o	r additional functionality do you need to create your intensional value sets in VSAC?
with RxNorm, LC	examples of intensional value sets you want to be able to create in VSAC in the future, especially DINC, and other code system functionality that is not included in this testing. (For example, a value ispensable drugs in RxNorm or a value set of all of the SNOMED CT codes that have a causative is B virus.)

What	can NLM do	o to improve the VSAC authoring environment?
- What	can NLM do	o to improve VSAC?
What	was your p	urpose for using the NIH CDE Repository?
		Exploring or browsing (1)
		Reference, verification, or comparison to other data (2)
		Seeking specific information (definitions, codes, mapping, etc.) (3)
		Teaching or learning tool (4)
		Use encouraged, recommended, or required by project or organization (5)
		Other; please specify: (6)

How did you use	the NIH CDE Repository?
	Search/browse CDEs (1)
	Search/browse forms (2)
	Export/download CDEs (3)
	Export/download forms (4)
	Create CDEs (5)
	Create forms (6)
	Other; please specify: (7)
Have you used o	or recommended a CDE or form in the NIH CDE Repository?
O Yes (1)	
O No (4)	
What can NLM d	lo to improve the NIH CDE Repository?
Please provide re products from NI	eferences (URLs, citations, publications, etc.) or details about your work that involves terminology _M.

For which termin	ology product(s) would you like to see new or additional educational materials?
(12)	UMLS (Unified Medical Language System - Metathesaurus, Semantic Network, and Lexical Tools)
	RxNorm (5)
	VSAC (Value Set Authority Center) (7)
	SNOMED CT (8)
	LOINC (15)
	NIH Common Data Element (CDE) Repository (9)
	MetaMap (13)
	None (10)
	Other; please specify: (11)
For which RxNo	rm topics would you like to see new or additional educational materials?
	Understanding term types (1)
	Navigating the RxNorm graph (2)
	Mapping your formulary to RxNorm (3)
	Mapping NDCs to RxNorm (4)
	Relating RxNorm to DailyMed (5)
	Extracting drug classes (6)
	Using the API (7)
	Using RxNav (9)

	Using RxMix (11)
	Using RxClass (12)
	Other; please specify: (10)
	LS topics would you like to see new or additional educational materials. Are there specific topics, ustions you would like to see addressed?
For which SN0	OMED CT topics would you like to see new or additional educational materials?
	Post-Coordinated Expressions (1)
	Reference Sets (RefSets) (2)
	Mapping Subsets (3)
	Accessing SNOMED CT (4)
	Requesting Content Changes (5)
	Other; please specify: (6)
Would you be NLM may con	willing to describe your use of NLM terminology products and services on the NLM Web site? (If s tact you)
O Yes	(4)
O No (5)
Do you use te	rminologies, ontologies, or code systems outside of the UMLS license?
O Yes	(1)
O No (4)

What tools, programs, and services do you use to access terminology products outside of the UMLS license?	
	NCI EVS (1)
	OHDSI (2)
	NCBO BioPortal (3)
	NCBI Entrez System (dbGAP, MedGen, ClinVar, etc.) (4)
	Other; please specify: (5)

Which of the following do you use outside of the UMLS license?		
	ICD10CM (1)	
	UCUM (2)	
	NDC (3)	
	WHO Drug Codes (4)	
	MedDRA (5)	
	GMDN (6)	
	NCIt, NCIm (NCI EVS) (7)	
	MedGen (8)	
	ClinVar (9)	
	dbSNP (10)	
	RefSeq (11)	
	COSMIC (12)	
	Other; please specify: (13)	
Why did you request a UMLS license/create a UTS account?		