

# Streamlining rule-based NLP development and integration with production environment

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# A background story

- 1<sup>st</sup> operational NLP project for billing assistant
- Collaborate with EDW, clinical analysts

# Use case

- **Encephalopathy:** A broad term for any brain disease that alters brain function or structure.
- **Missing code** means **revenue loss**
- **Old way:** database keywords search + manual review

# Old Way

(encephalopathy, altered mental, delirium, confusion, AMS, confused, confussed, encephalopathic) ~near((no, encephalopathy), 5, TRUE) ~near(("not", encephalopathy), 8, TRUE) ~near((denies, encephalopathy), 5, TRUE) ~near((negative, encephalopathy), 5, TRUE) ~near((rule out, encephalopathy), 3, TRUE) ~near((mild, encephalopathy), 3, TRUE) ~near((borderline, encephalopathy), 5, TRUE)...



# A web-based interface for code review (Warthog)

INFERENCE REPORT FOR - AREGO - Enceph - 3 (PAST 30 DAYS)												
PAT ID	VISIT NO	NAME			HAR	UNIT	INFERENCE ID	INFERENCE	FIRST INFER DTM	CURRENT INFERENCE STATUS	CURRENT NOTE	STATUS/NOTE HISTORY
00000001	00000001	PATIENT NAME			00000001	00000001	00000001	Enceph - 3 -	08/03/2017 11:32			00000001
PAT ID	VISIT NO	SOURCE	RPT TYPE	RPT DESC	TEXT DATE	PREVIEW(RETURNS FIRST FOUND HIGHLIGHTED TERM)					RPT ID	
00000001	00000001	EPIC				-minimize nighttime interruptions, at high risk of delirium with ICU hospitalization					00000001	
00000001	00000001	PATIENT NAME			00000001	00000001	00000001	Enceph - 3 -	08/03/2017 11:31			00000001
00000001	00000001	PATIENT NAME			00000001	00000001	00000001	Enceph - 3 -	08/03/2017 11:31			00000001
00000001	00000001	PATIENT NAME			00000001	00000001	00000001	Enceph - 3 -	08/03/2017 11:31			00000001
00000001	00000001	PATIENT NAME			00000001	00000001	00000001	Enceph - 3 -	08/03/2017 11:32			00000001

## Questions were asked:

- Where to host the program ?
- How to add new inputs?
- How to trigger the execution?
- How to retrieve the NLP outputs?
- How much computing power is needed?
- Do we need redo everything for another project?
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## Questions were asked:

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# Research NLP VS Operational NLP

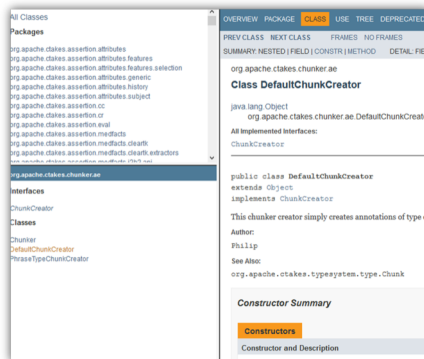
- Reusability — Development cost
- Computing cost
- Interoperability — with EHR and others
- Maintenance
- User support

# One for “all” solution regarding

- Interaction with Health IT systems
- Supporting different NLP tasks—with extensibility

# APIs

NLP



Health IT

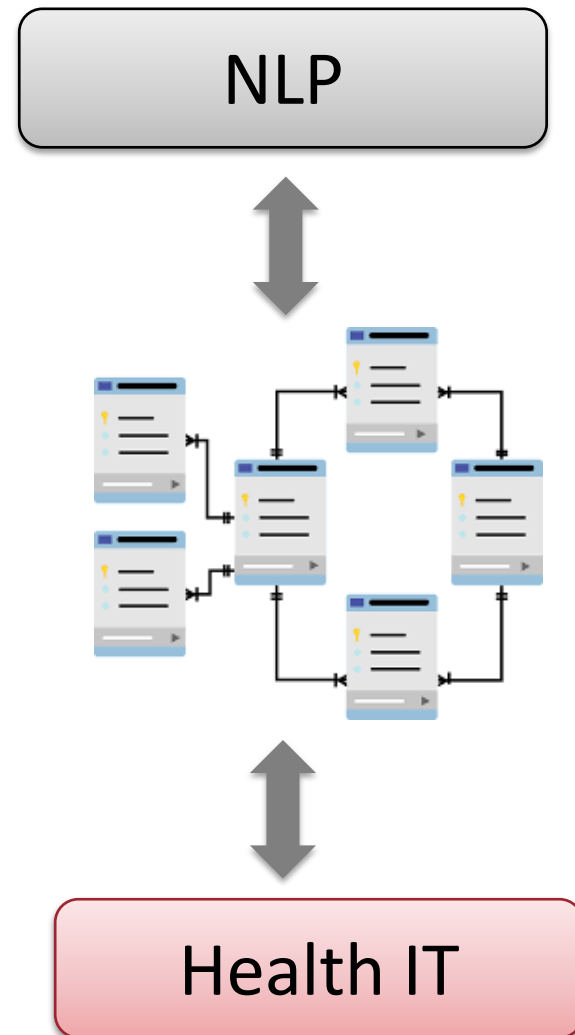
- Powerful to access low level functionalities
- Language constrains
- Expert only
- Maintenance strait

# Network Protocols



- Language independent
- Additional storage still needed
- Need client-side implementations
- Maintenance cost

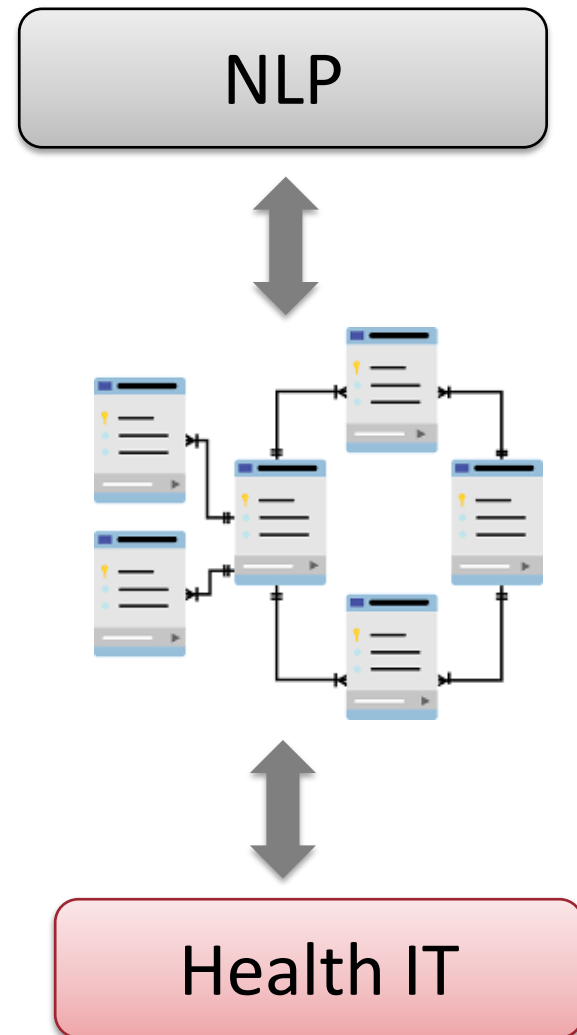
# Database



- Naturally integrated with EHR, EDW
- No technical barrier for EDW staff
- No programming workload for EDW staff
- No additional hurdle for current EDW users



# Database



- Need a unified table structure / schema

# Categories of Clinical NLP Tasks' Output

Output Categories	Description
<b>Mention level</b>	Identify the concepts or statements in a document
<b>Document level</b>	Classify a document based on the given conditions
<b>Encounter level</b>	Classify an encounter based on the given conditions
<b>Patient level</b>	Classify a patient based on the given conditions

# Harmonized Database Schema for NLP output

Output Categories	Column Names	Value Type	Brief description	
Mention level	MENTION_RESULT_ID	INTEGER	Mention level results ID	
	DOCUMENT_RESULT_ID	INTEGER	To be matched to the associated document level results ID	
Document level	DOCUMENT_RESULT_ID	INTEGER	Document level result ID	
	RUN_ID	INTEGER	Id to identify each NLP execution	
	NLP_PIPELIN_ID	INTEGER	Id to identify each NLP pipeline	
Encounter level	ENCOUNTER_RESULT_ID	INTEGER	Encounter level result ID	
	DOCUMENT_ID		Id to identify a set of input documents defined by the users, it can be all of the documents in a visit.	
	NLP_INPUT_ID	INTEGER		
	ENCOUNTER_ID	INTEGER	The Id of an encounter	
	ENCOUNTER_TYPE	TEXT	The encounter level conclusion	

# Harmonized Database Schema for NLP input

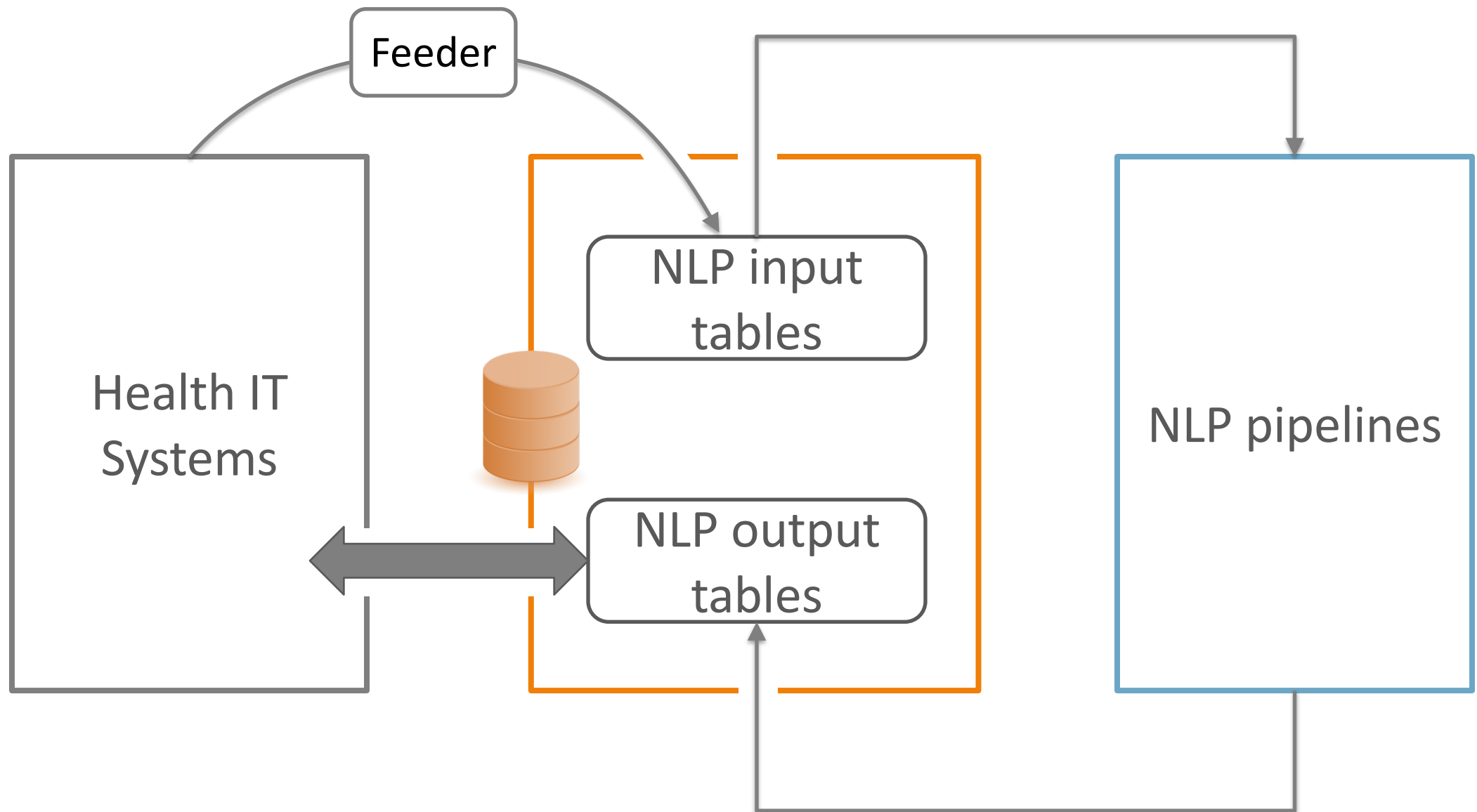
## NLP input cohort table

Column Name	Value type	Brief Description
NLP_INPUT_ID	Integer	An ID for a group of documents that needs to be processed
PIPELINE_ID	Integer	NLP pipeline ID
....		

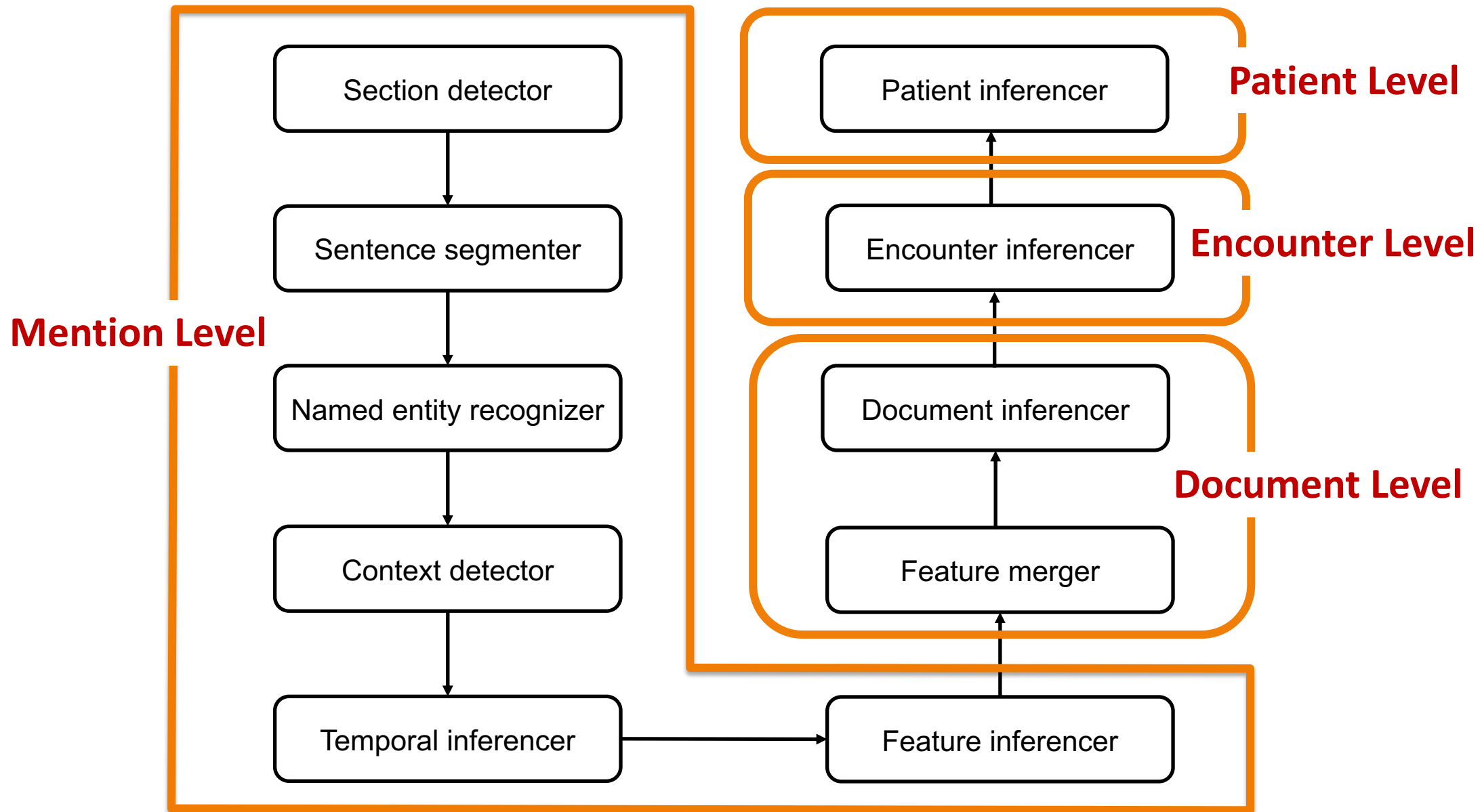
Column Name	Value type	Brief Description
NLP_INPUT_ID	Integer	An ID for a group of documents that needs to be processed
NOTE_ID	Integer	Note ID
....		

## NLP input document table

# Overall setup

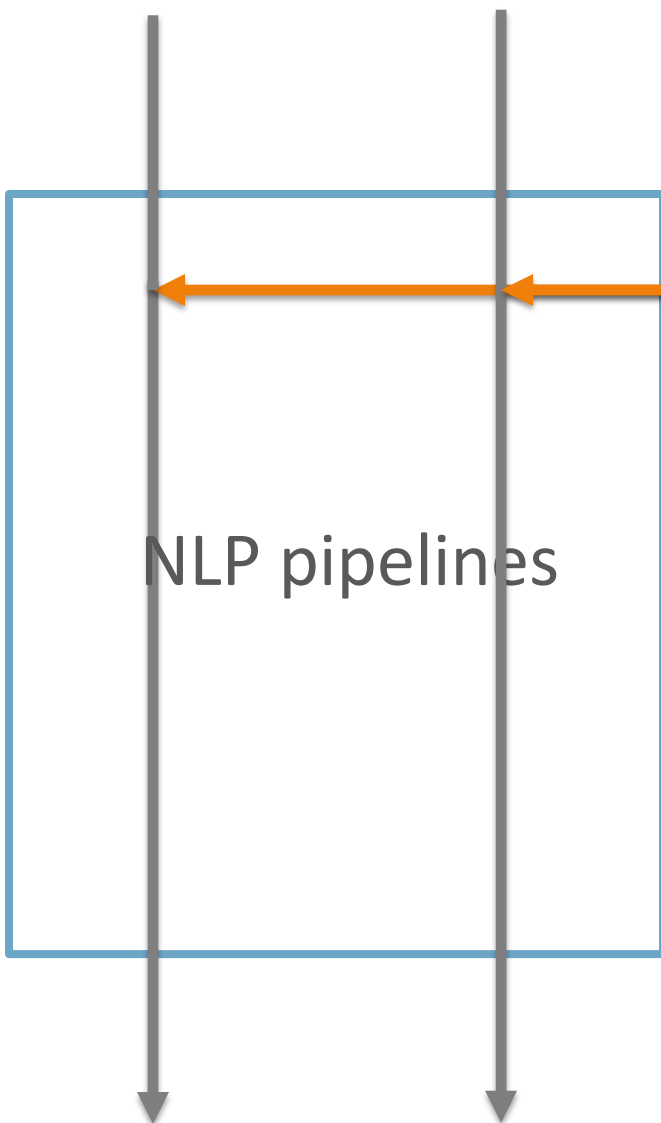


# Workflow of a Generic Rule-based NLP Pipeline



# One for “all” rule-based NLP

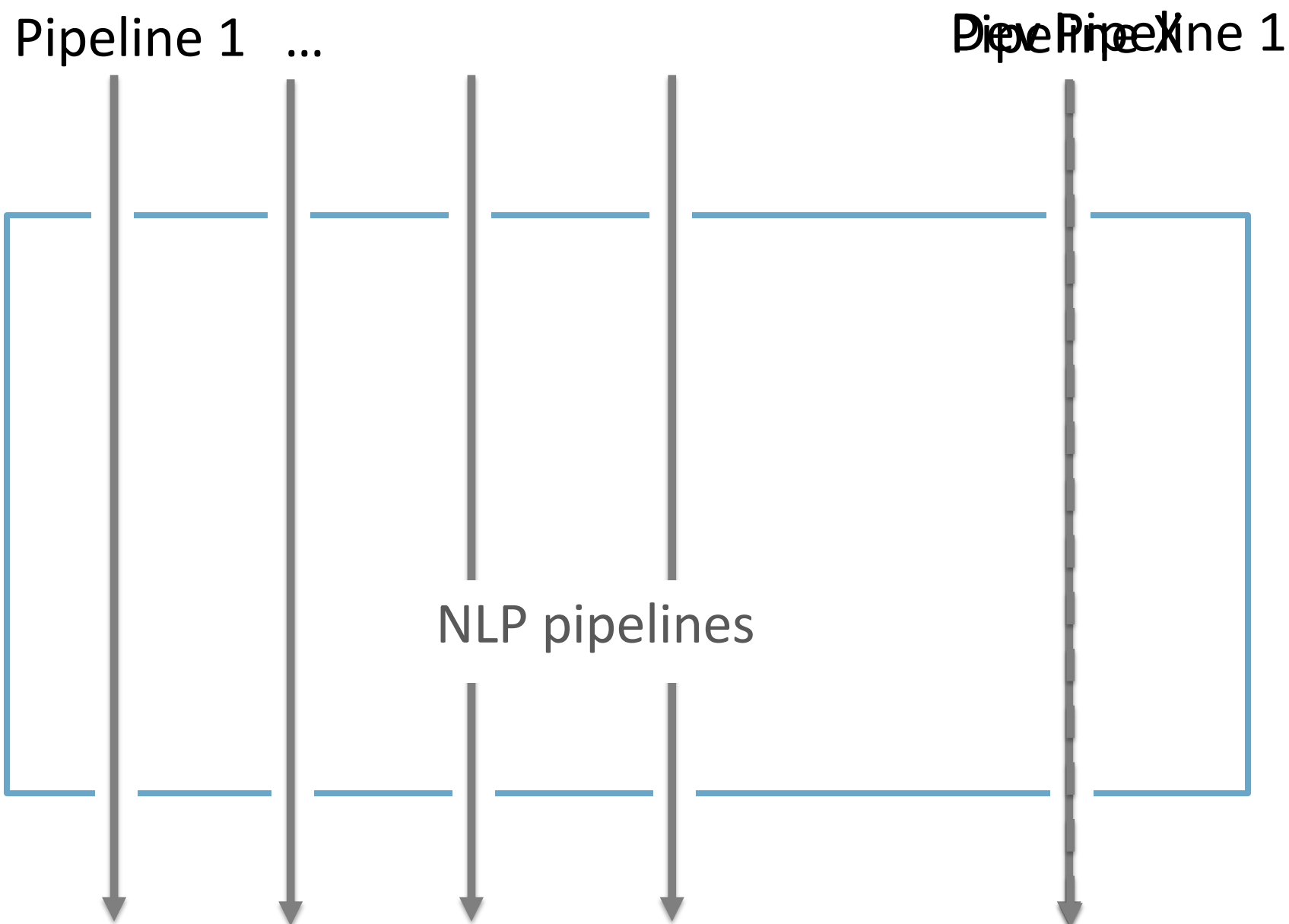
Pipeline 1 Pipeline 2



PipelineID	Component	Rules
1	SectionDetector	
1	NER	
...		

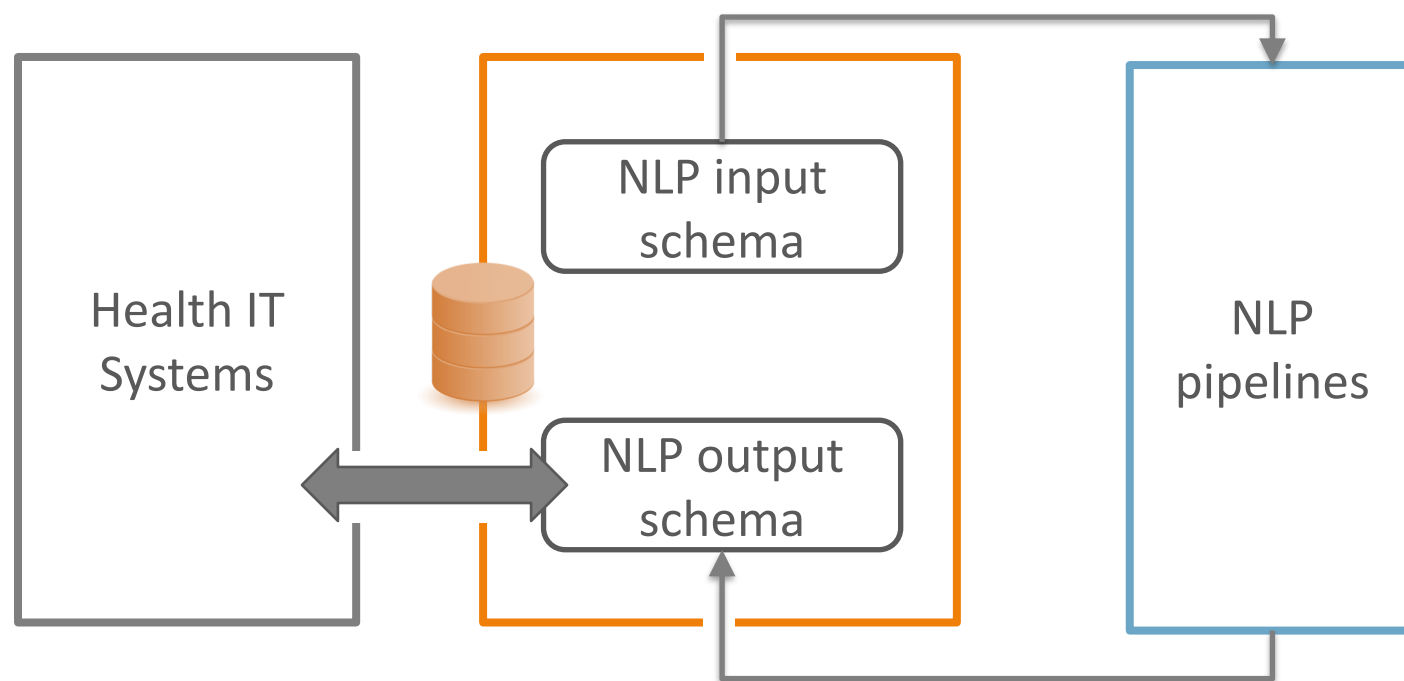
2	SectionDetector	
2	NER	
...		

# From Dev To Production





# Overall setup



Rule Configuration

PipelineID	Component	Rules
1	SectionDetector	
1	NER	
...		

# Rule development needs

- Focus on rule development rather than coding
- Operate with different databases
- Support debugging rules
- ...

# Tool for Rule Development

**Home**  
Jianlin Shi edited this page on Sep 28, 2017 · 29 revisions

EasyCIE(GUI) is a rule-based clinical information extraction tool designed for non-NLP(natural language processing) expert users. It a GUI wrapper on top of [EasyCIE](#), an UIMA-based command line version that allows executing on servers.

## Downloads

The most recent compiled releases can be found at: <https://drive.google.com/drive/folders/0B0hTn1B4kXcPM2hOZDZwY2NOTG8?usp=sharing>

Although this GUI component is designed to be easily extensible for adapting different databases and wrapping other pipelines without hard coding, this wiki is mainly written as a user guide for EasyCIE(GUI).

## EasyCIE(GUI) functionalities

Tasks	Parameter	Value	Description
import	documents		
easyCIE	corpusDir	dataInput	the directory that stores the txt files

# Import and Execute pipeline

EasyCIE(\_\_tt\_config.xml\_\_)

File Help

Tasks	Parameter	Value	Description
import	documents		
easycie	corpusDir	data/input	The directory that stores the txt files
debug	includeFile...	txt	Filter files by extension names (separate by comma). If not fi...
compare	excelData		
export	filePath	data/test.xlsx	The excel file that store the txt data
settings	sheetName	Sheet1	The excel sheet name that you want to import. Default is Sh...
	docNameC...	1	The position of document name column (A is 1, B is 2...)
	docTxtColu...	2	The position of document text column (A is 1, B is 2...)
	docDateCol...	3	The position of document date column (A is 1, B is 2... if don'...
	startRowNum	2	Start to import from row #(you need to skip header columns...
	annotations		support Brat and eHOST format, the format will be automati...
	projectDir	data/annotations/	the directory that hosts the eHOST project
	includeAnn...		
	convertTyp...	conf/tt/00_ehost_type_conversions.tsv	Configuration file of type conversions
	enableSent...	true	
	overWriteA...	gold	if a name is set, all the annotations' annotator will be overwr...
	metaregex	(\d+)_(\d{4}-\d{2}-\d{2})_(\d+_w+)_(\d{...}	If your file name contains meta information, use this to pars...
	bunch_id	1	1st group that matched in metaregex
	adm_dtm	2	2nd group that matched in metaregex
	doc_id	3	3rd group that matched in metaregex
	doc_dtm	4	4th group that matched in metaregex
	ontology		

Execute functions

ImportDocuments ImportExcelData ViewImportedDocs ImportAnnotations ViewImportedAnnotations

Status: Load: conf/tt/tt\_config.xml

Reset Save Cancel

# Debug

EasyCIE(\_\_tt\_config.xml\_\_)

File Help

Tasks

- import
- easycie
- debug
- compare
- export
- settings

DocView RefView AnnoView CompareView Debi

( RD.RUN\_ID=1 AND (RS.RUN\_ID=1 OR RS.RUN\_ID IS NULL) ) Refresh

DOC_FEA...	RSID	TYPE	SNIPPET	DATE
ote: -DISEA 1	1	DISEASE	...N: Congestive heart failure. HISTORY OF P...	
ote: -DISEA 2	2	POSS_CONDITION	...ed BNP suggestive of congestive heart failure.	
ote: -DISEA 3	3	DISEASE	...RS: History of hypertension, no history of di...	
ote: -DISEA 4	4	NEGA_CONDITION	...ion, no history of diabetes mellitus, active s...	
ote: -DISEA 5	5	HIST_CONDITION	... Hypertension, hyperlipidemia, smoking his...	
ote: -DISEA 6	6	DISEASE	...hortness of breath, congestive heart failure...	
ote: -DISEA 7	7	POSS_CONDITION	...rsus decompensated congestive heart failure.	
ote: -DISEA 8	8	DISEASE	...oking history, hypertension, ar...yperlipid...	
ote: -DISEA 9	9	DISEASE	... 1. Type 1 diabetes mellitus, insulin pump. ...	
ote: -DISEA 10	10	DISEASE	...s mellitus, insulin pump. 2. Hypertension. 3...	
ote: -DISEA 11	11	DISEASE	...for followup management of type 1 diabetes...	

2. Ischemic cardiomyopathy with abnormal stress test, inferior defect, ejection fraction 39% with elevated BNP, possibly secondary to underlying infection versus decompensated congestive heart failure.

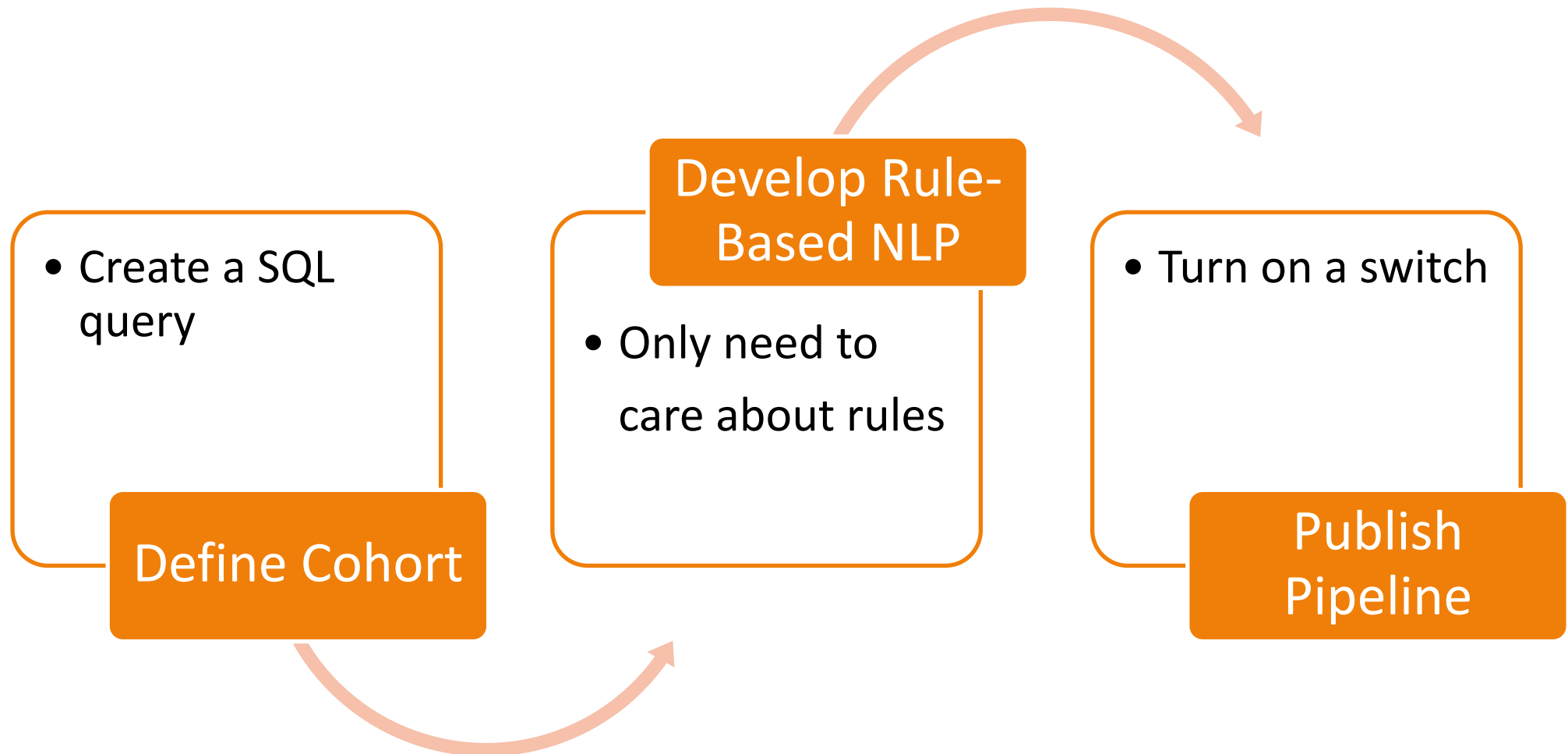
Feature	Value
Certain...	'possi...
Category	null
Text	null
Section	Document..
Negation	affirm
Certainty	uncertain
Temporality	present
Experiencer	patient
Annotator	null

Status: Processing Complete.

Reset Save Cancel



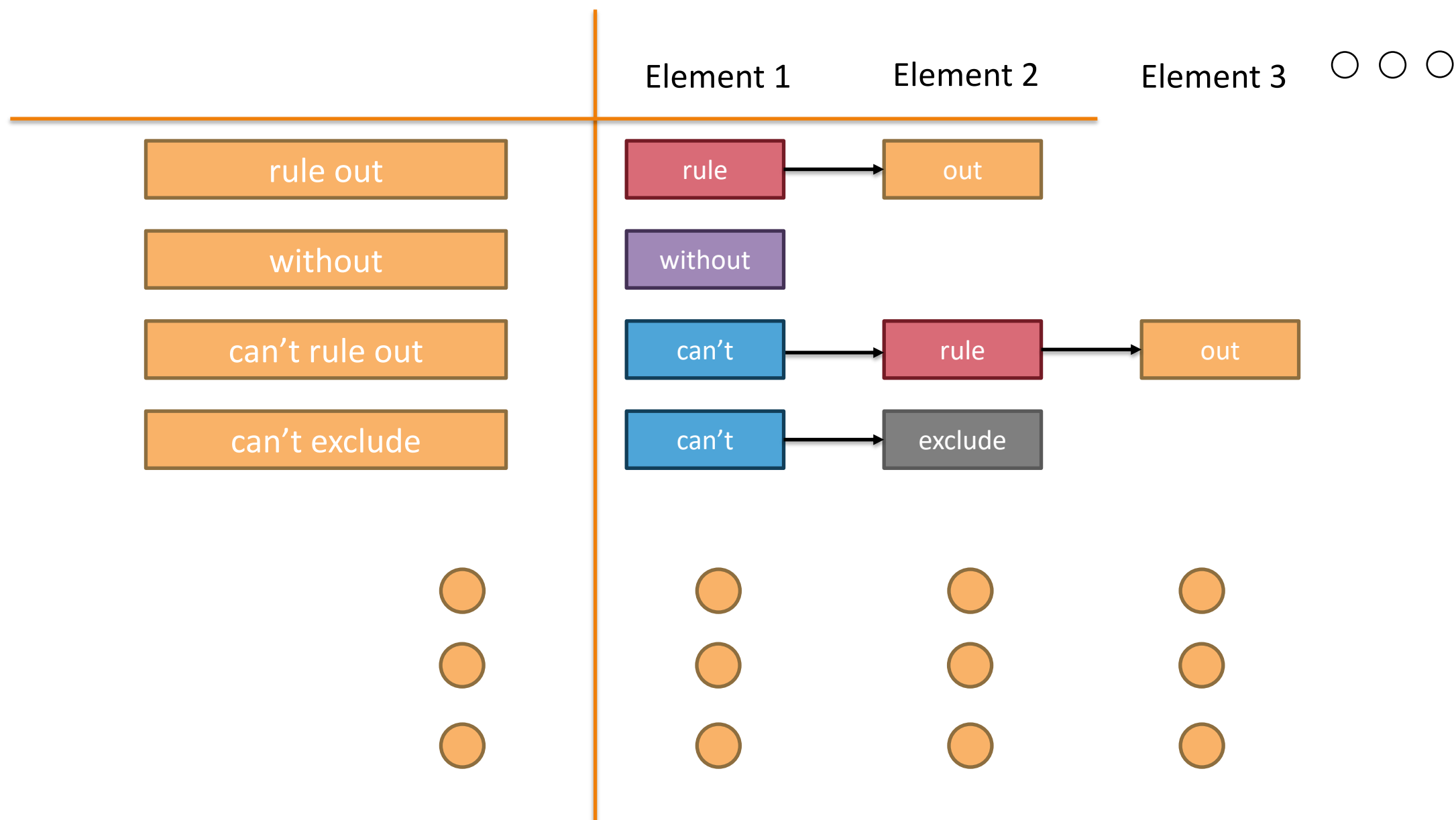
# Streamlining rule-based NLP



Thank you!

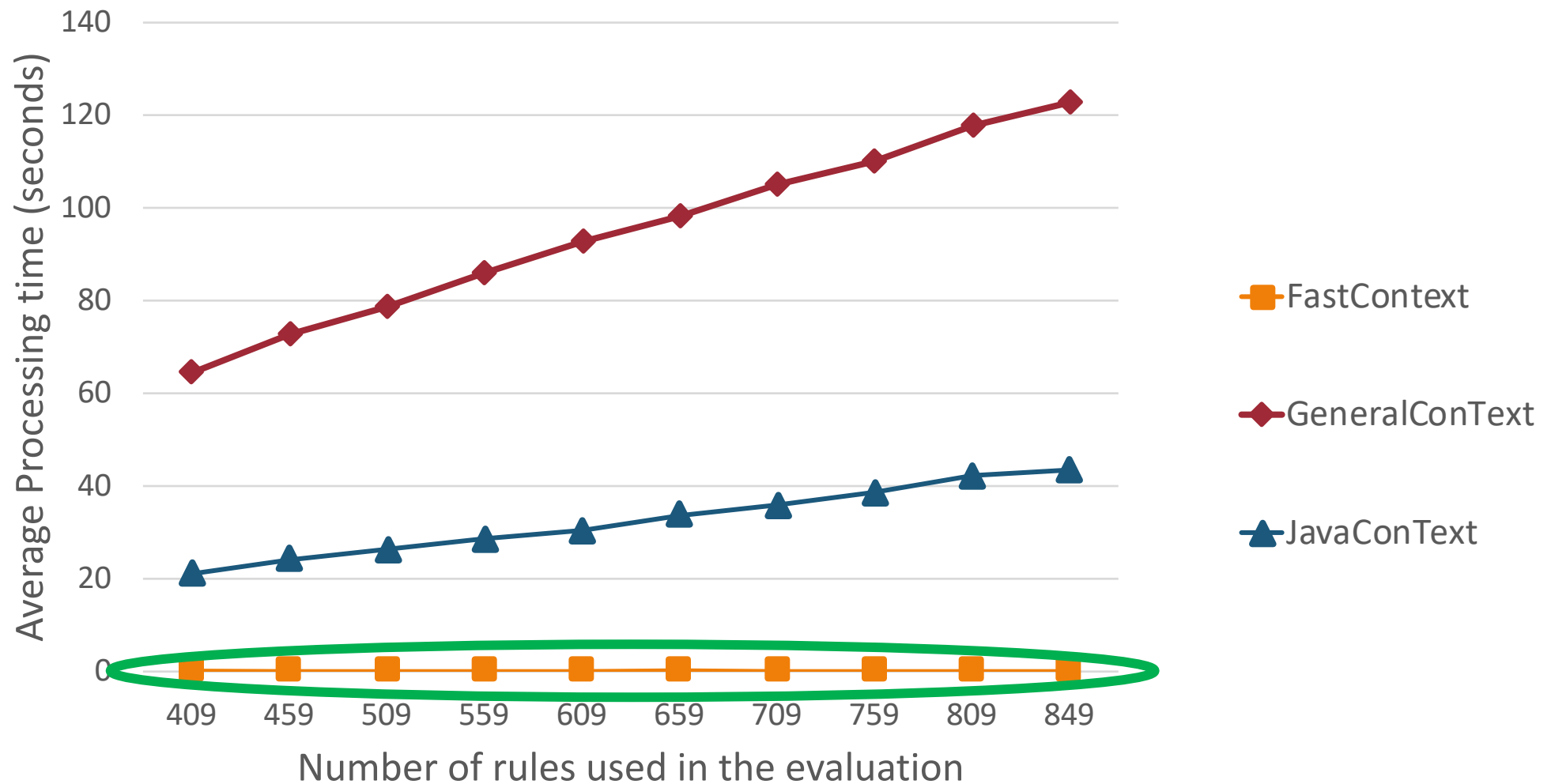


# n-Trie demo



# FastContext — Speed Evaluation

Average processing time of the whole dataset in 200 runs



# Encephalopathy pipeline evaluation

Totally sampled 665 visits,  
including 8068 documents

	Found encephalopathy mentions (# of visit)	Verified by review (# of visits)
Old Warthog	50	13
NLP powered Warthog	208	178

Precision improves 231%,  
Recall improves 1269%

# Methods---PE Identifier Evaluation

- A **local** dataset (400 annotated CT pulmonary angiography reports)
- **Stanford** dataset (944 reports)
- **PEfinder** dataset (859 reports)
- Compared with
  - Intelligent Word Embedding (IWE)<sup>1</sup>
  - PEfinder<sup>2</sup>

1. Banerjee I, Chen MC, Lungren MP, et al. Radiology report annotation using intelligent word embeddings: Applied to multi-institutional chest CT cohort. J Biomed Inform 2018;77:11–20. doi:10.1016/j.jbi.2017.11.012
2. Chapman BE, Lee S, Kang HP, et al. Document-level classification of CT pulmonary angiography reports based on an extension of the ConText algorithm. J Biomed Inform 2011;44:728–37. doi:10.1016/j.jbi.2011.03.011

# PE Identifier Evaluation

