

Testing Data Completeness with DQe-c-v2

OHDSI Symposium 2019: Data Quality Workshop 09/17/19

Tim Bergquist, Graduate Research Assistant Biomedical Informatics & Medical Education University of Washington



WWAMI region Practice & Research Network



- 60+ Primary care WWAMI clinics
- ~20 data connected clinics
- CHCs and RHCs
- Underserved populations
- Many serving rural populations
- Collaboration with national network of practice based research networks
- Data QUEST represents over 250,000 patients https://dataquest.iths.org/

Data QUEST





Home

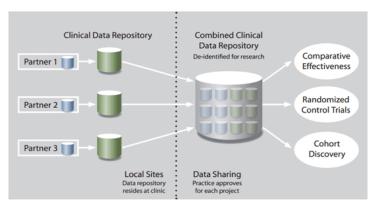
Explore Data

Success Stories

About Us

Data QUEST, supported by the Institute of Translational Health Sciences, is an electronic health data-sharing architecture across community-based primary care practices in Washington and Idaho.

Data QUEST is designed to provide access to research datasets generated from electronic medical record systems within our primary care community-based practice partner settings to catalyze both regional and national health discoveries.



Search

QUICK LINKS
Browse Data

Request Data

Request a Consult

From cohort discovery to clinical trials to comparative effectiveness research, you can use our innovative datasharing tools to streamline and enhance your next community-based research study.

Our expert team will work with you to determine how to conduct your project with our community-based partners. We also offer technical assistance to help you define datasets to drive your research.

Please click on the Browse Data button to begin browsing the data types and diagnosis categories contained in the Data QUEST data repository to get to know what data are available and if they suit your research needs.

Browse Data

Contact Us Today

Funding Opportunity

Do you have a research question you think could be answered by analyzing primary care electronic medical record data? If so, we can help by underwriting the cost of data extraction as part of our launch.

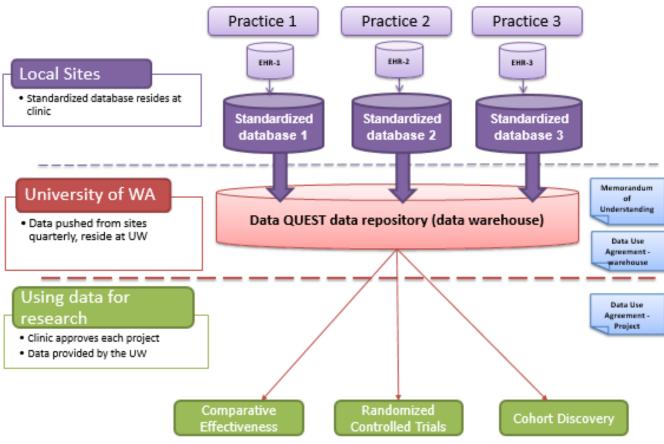
To be considered for this opportunity, please email a paragraph describing your research question, intended use of the data, and description of your professional role to Gina Keppel (gakeppel@uw.edu).

Data QUEST

20 data-connected clinics in the WPRN

Represents over 250,000 patients

An electronic health datasharing architecture across community-based primary care practices in the WPRN

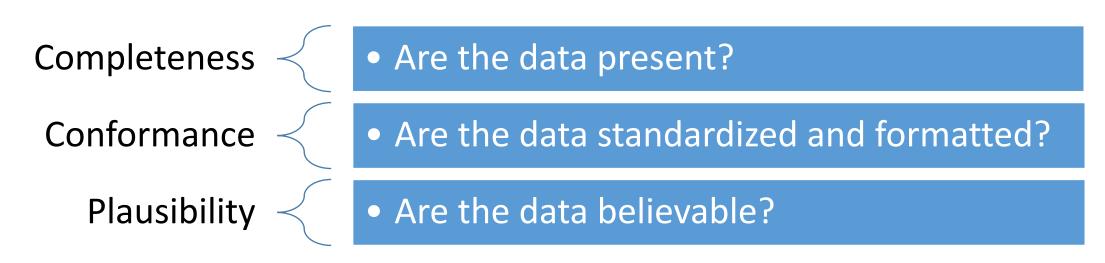






Measuring Data Quality Framework

Operationalizing the framework into: 5 conceptual tests and 17 discrete tests across:

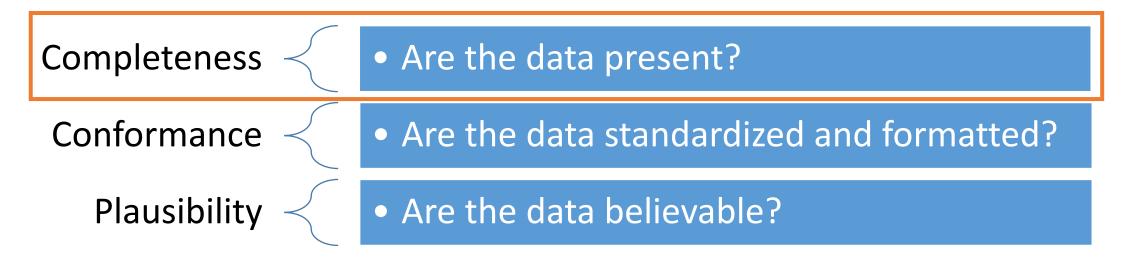


Kahn et al. (2016). A harmonized data quality assessment terminology and framework for the secondary use of electronic health record data. eGEMS, 4, 1244.

https://www.ncbi.nlm.nih.gov/pubmed/27713905

Measuring Data Quality Framework

Operationalizing the framework into: 5 conceptual tests and 17 discrete tests across:

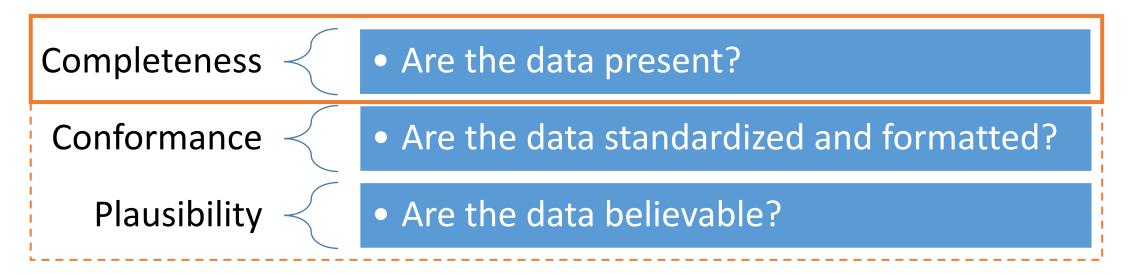


Kahn et al. (2016). A harmonized data quality assessment terminology and framework for the secondary use of electronic health record data. eGEMS, 4, 1244.

https://www.ncbi.nlm.nih.gov/pubmed/27713905

Measuring Data Quality Framework

Operationalizing the framework into: 5 conceptual tests and 17 discrete tests across:



Kahn et al. (2016). A harmonized data quality assessment terminology and framework for the secondary use of electronic health record data. eGEMS, 4, 1244.

https://www.ncbi.nlm.nih.gov/pubmed/27713905

Data Quality Tests

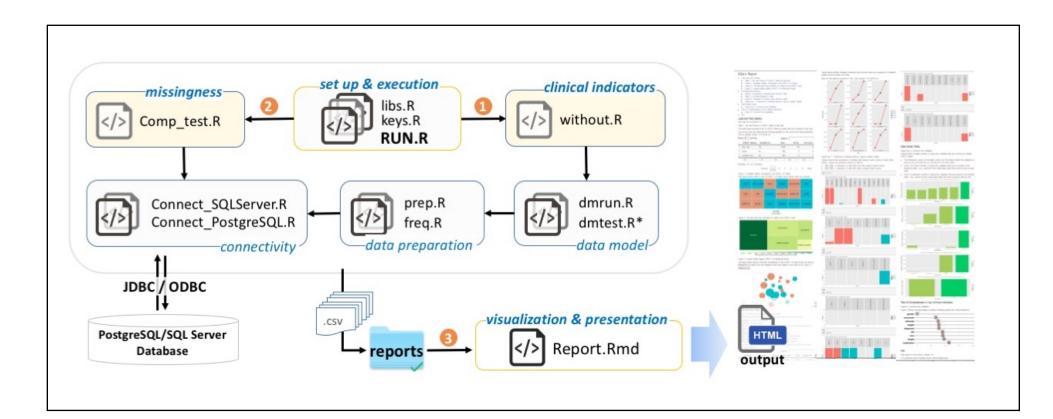
DQ Framework category	TEST
COMPLETENESS	Gender, Visit, Observation completeness (denominator and proportion with valid data)
COMPLETENESS	Key clinical status completeness (denominator and proportion with valid data): Smoking status, alcohol consumption
COMPLETENESS	Measurement completeness (denominator and proportion with valid data): Height, Weight, SBP, DBP
COMPLETENESS	Cross reference tables that are present in current dataset to expected tables in standard OMOP CDM
COMPLETENESS	Looks for NULL and invalid variable values in each column and visualizes percent missingness
CONFORMANCE	Check that primary and foreign keys relate properly; High Priority: Person_ID, Visit_Occurrence_ID
CONFORMANCE	Checks that orphan don't keys exist (a foreign key is present in a table but no primary key exists in the reference table)
PLAUSIBILITY	Comparison of new load to old load (Number of observations, Number of unique patients, Number of tables with rows)
PLAUSIBILITY	Size of tables and rows across the OMOP CDM

Original DQe-c Tool

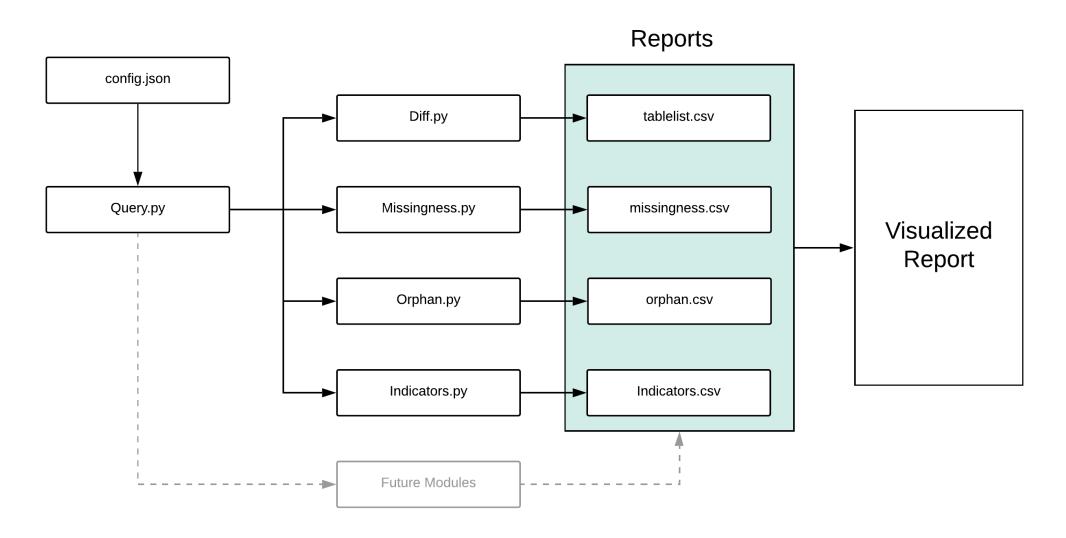
Modular tool developed in R for assessing **completeness** in EHR data repositories. Customization and configuration was difficult

Hard to add new modules

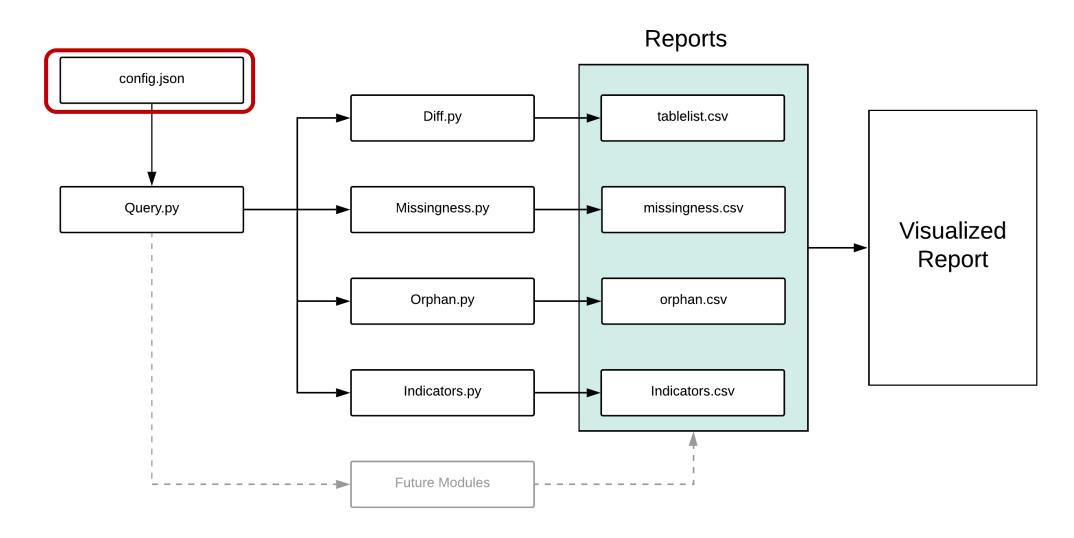
Difficult to add new CDMs (or new versions of CDMs)



Modular tool developed in python for assessing completeness in EHR data repositories.



Takes in the database credentials, CDM version, and configurations.



Takes in the database credentials, CDM version, and configurations.

Simply enter your credentials and configurations into the config.json file.

```
"DBMS": "sql server",
"database": "amalga",
"CDM": "OMOPV5_0",
"schema": "omop",
"vocabulary schema": "vocab".
"Credentials": {
  "User": "username",
  "Password": "password"
"ConnectionDetails": {
  "Host": "server_address",
  "Port": "8080",
  "Server": "server".
  "Driver": "{ODBC Driver 13 for SQL Server}"
"Organization": "University of Washington",
"Name": "Tim Bergquist"
```

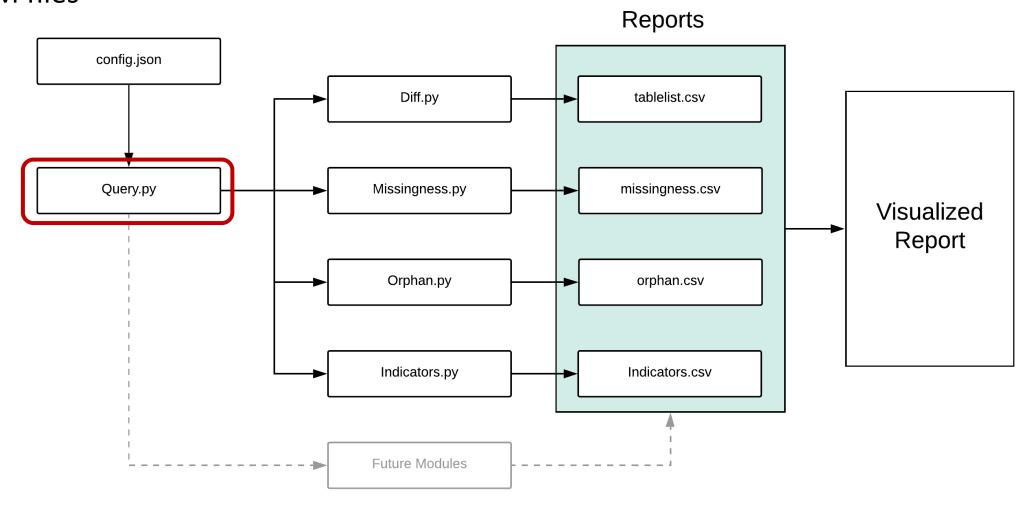
Takes in the database credentials, CDM version, and configurations.

Simply enter your credentials and configurations into the config.json file.

Run: python DQe-c.py -c /path/to/config.json

```
"DBMS": "sql server",
"database": "amalga",
"CDM": "OMOPV5_0".
"schema": "omop",
"vocabulary schema": "vocab".
"Credentials": {
  "User": "username",
  "Password": "password"
"ConnectionDetails": {
  "Host": "server_address",
  "Port": "8080",
  "Server": "server".
  "Driver": "{ODBC Driver 13 for SQL Server}"
"Organization": "University of Washington",
"Name": "Tim Bergquist"
```

Sets up the database connection, manages report output, and initiates the CDM files



Assesses conformance to a Common Data Model. Checks for missing tables and calculates size of tables.

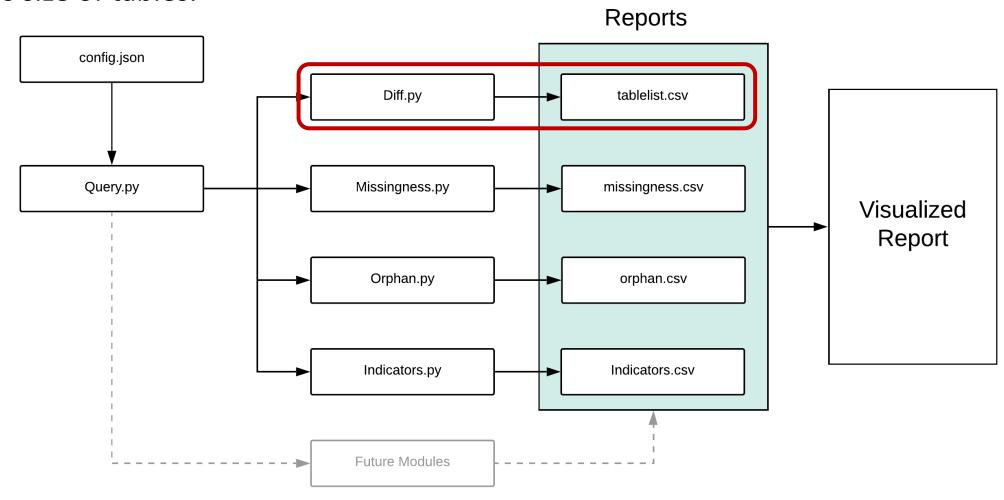


Figure 1. Available Tables, Compared to all CDM (OMOPV5_0) Tables

This figure shows which of the CDM tables are loaded and/or available.

```
## Warning in `[.data.table`(dtfDT, , `:=`("c", fact), with = FALSE):
## with=FALSE ignored, it isn't needed when using :=. See ?':=' for examples.
```



Table empty
Table Availability

Table not available

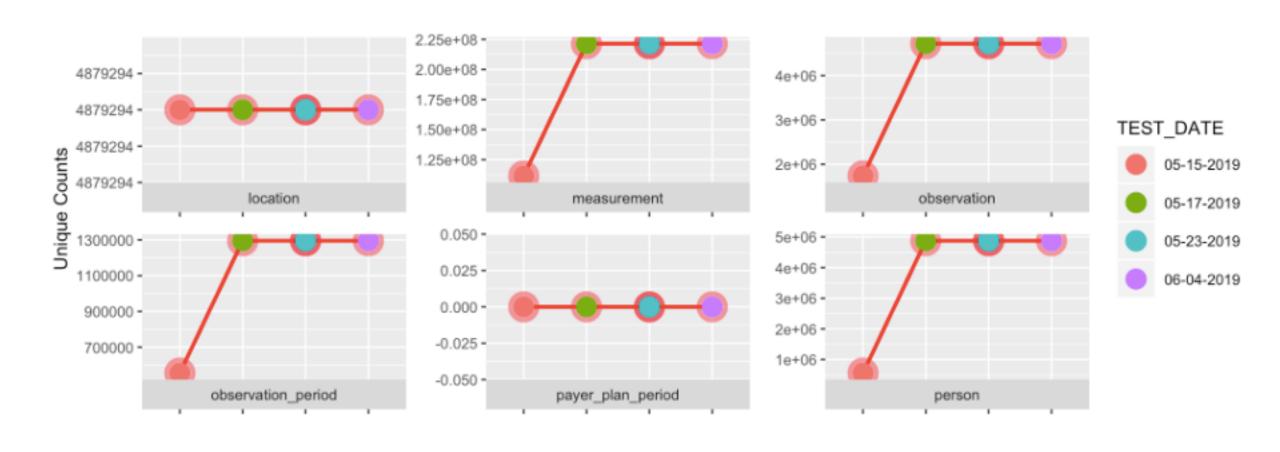
Figure 2. File Size and Row Numbers by Table in the (OMOPV5_0) Load



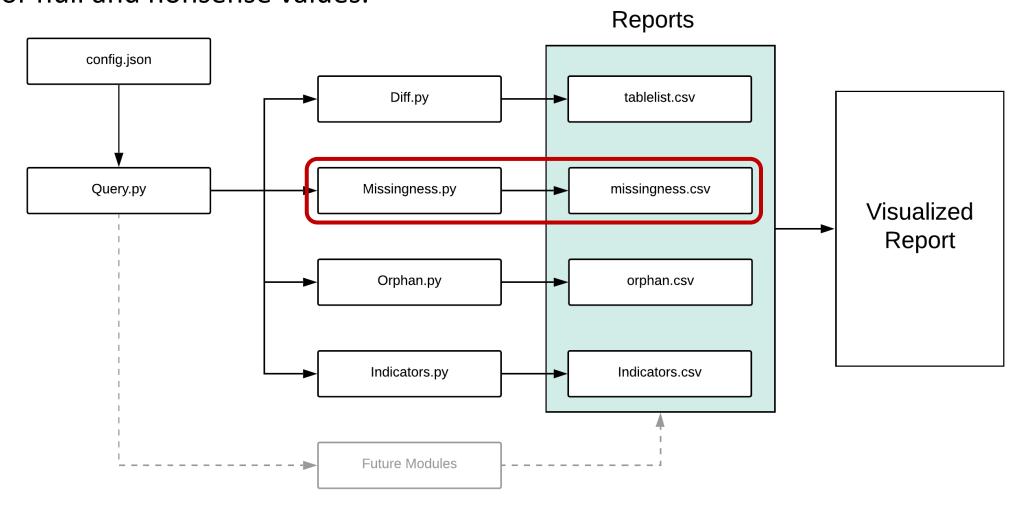
0 5 10 15 20 25 30

Size represents number of rows and color represent file size (in GB) for each table.

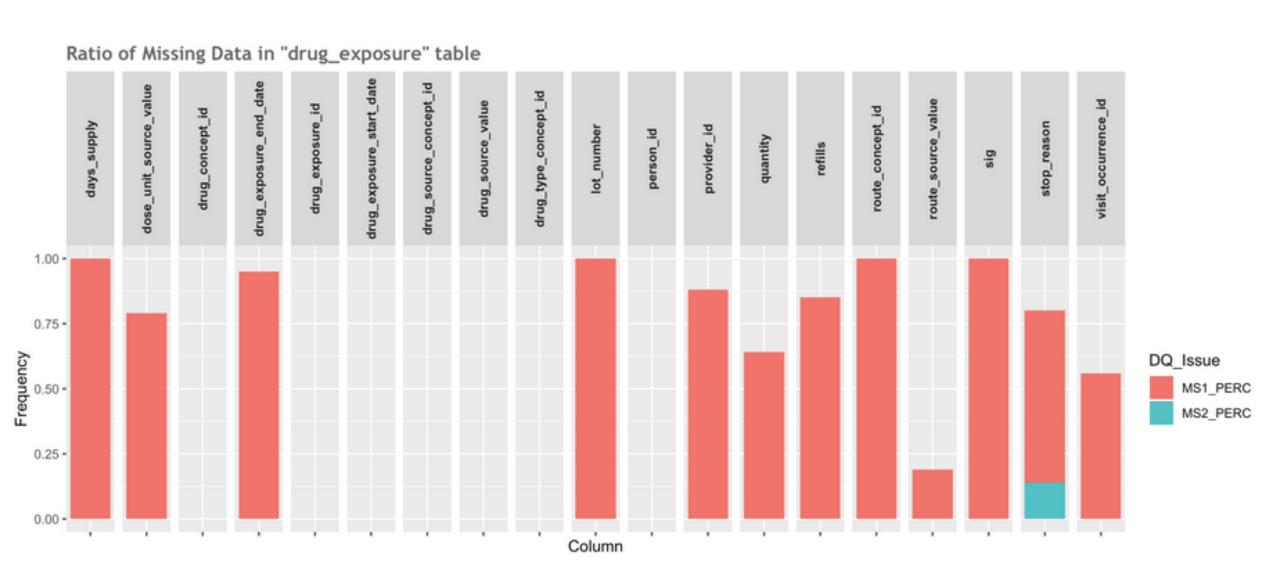
Quickly check that the new data is growing as expected



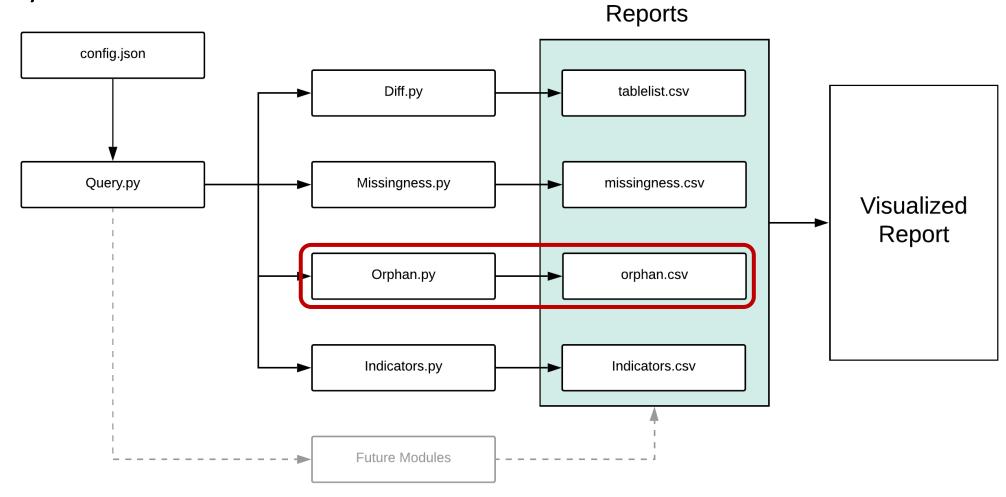
Assesses **completeness** of all columns in the available tables in the database. Checks for null and nonsense values.

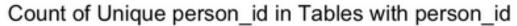


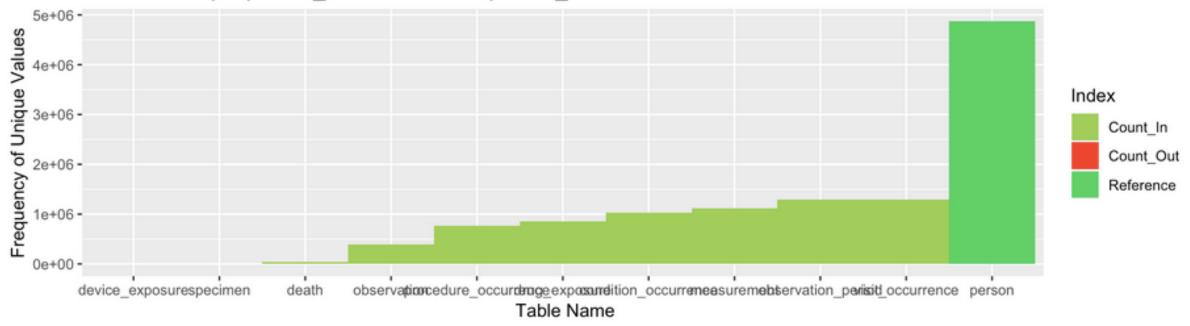
Identify empty or useful columns in each of your OMOP tables.



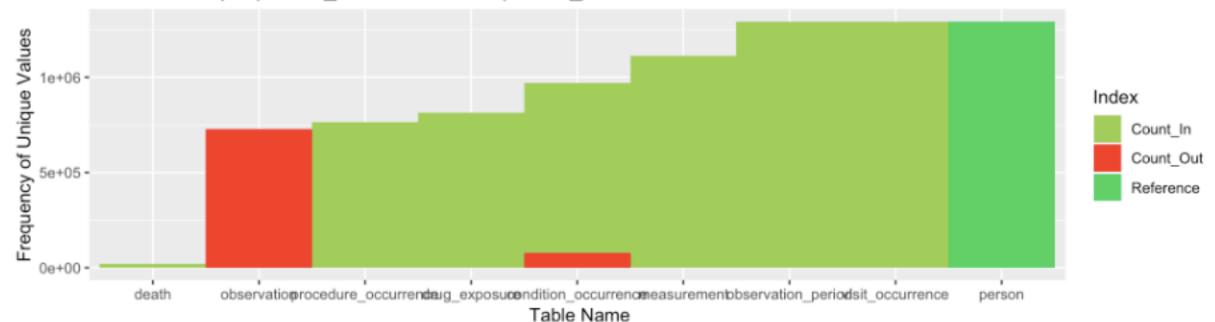
Checks for orphan keys, foreign keys not present in the primary table.







Count of Unique person_id in Tables with person_id



Checks for missingness in clinical indicators. (What percent of patients have a heart rate measure, blood pressure measurement, etc.)

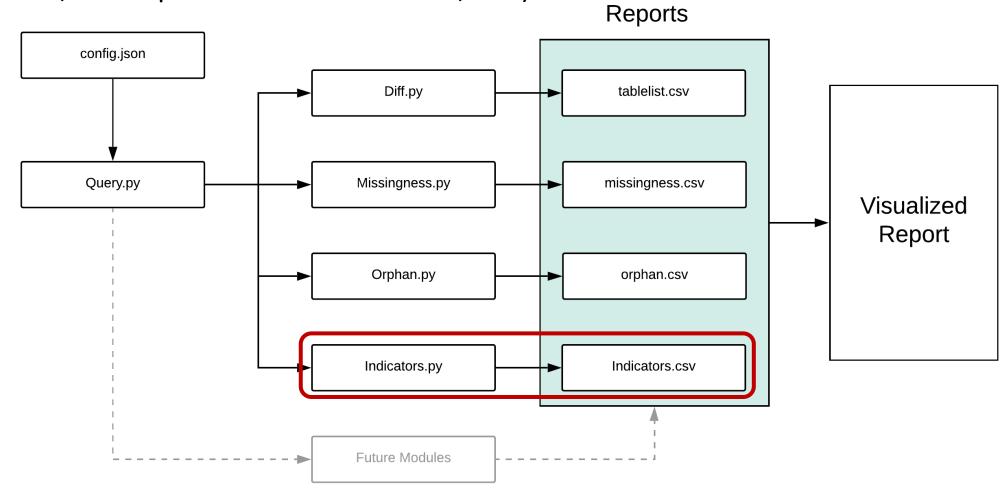
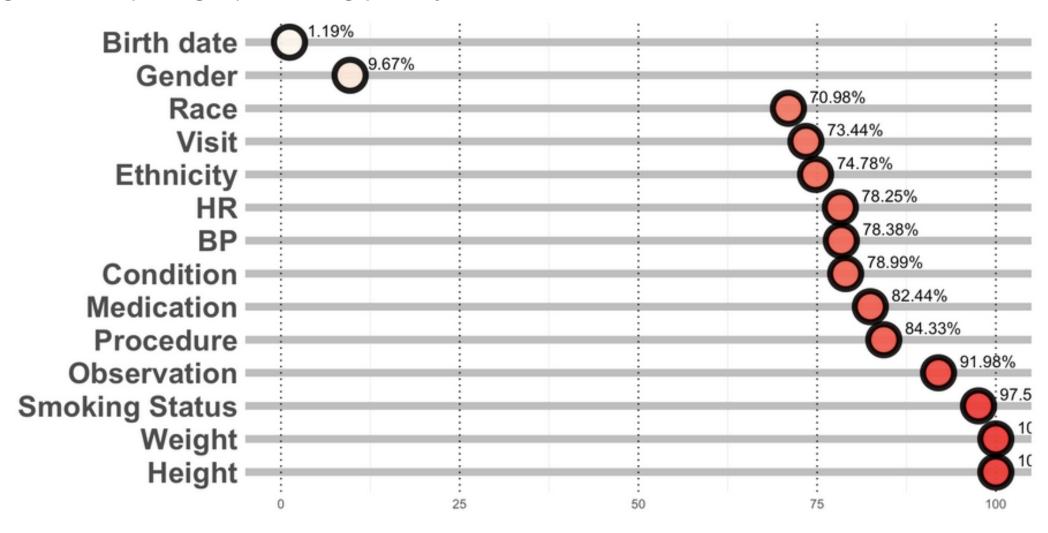


Figure 5. Common Key Variables

Figure 5 shows the percentage of patients missing specific key clinical indicators.



Adding a new indicator test is straight forward!

Completion as the presence of a concept.
Calculates what percentage of patients have the identified concept(s).

Completion as the presence of a non-null.

Calculates what percentage of patients have a non-null value in the identified table-column.

```
"indicator name": "heart rate",
"table": "MEASUREMENT",
"col": "measurement_concept_id",
"label": "HR",
"concepts": [4239408]
"indicator name": "Medications",
"table": "drug_exposure",
"col": "drug_exposure_id",
"label": "Medication",
"concepts": false
```

We can add a new indictor test by just adding five new fields.

Adding testing for A1C Hemoglobin.

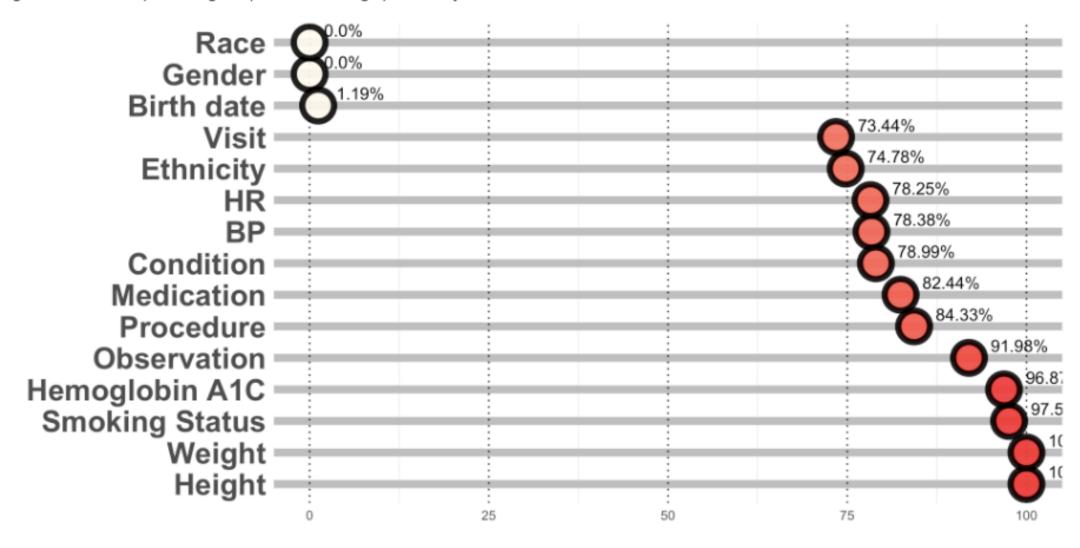
Calculates what percentage of patients have a hemoglobin A1C measurement.

```
"indicator name": "Hemoglobin A1C",
"table": "measurement",
"col": "measurement_concept_id",
"label": "Hemoglobin A1C",
"concepts": [
    3003309,
    3004410,
    3005673,
    3007263,
    3034639,
    40789263,
    42869630]
```

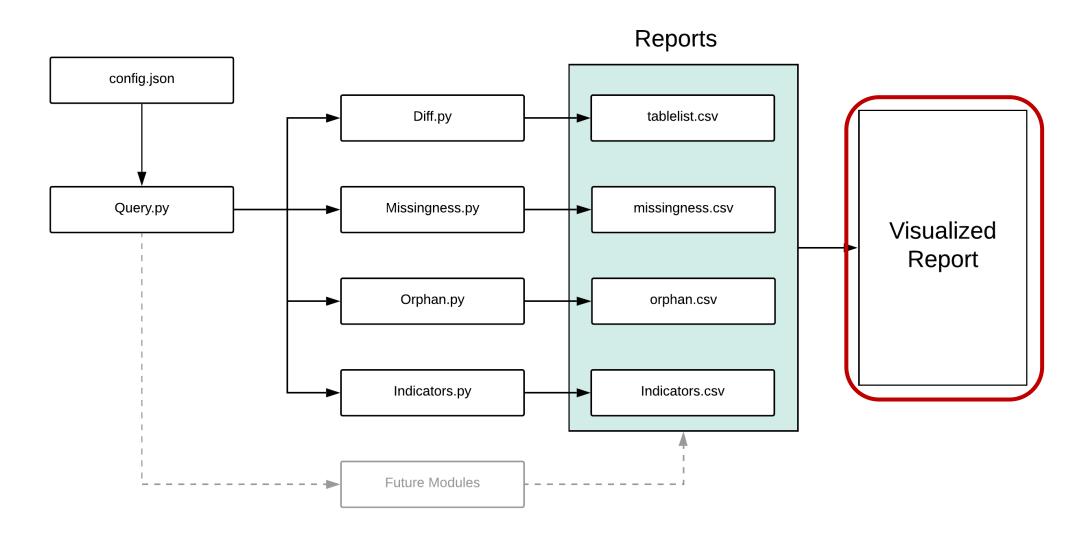
Test of Completeness in Key Clinical Indicators

Figure 5. Common Key Variables

Figure 5 shows the percentage of patients missing specific key clinical indicators.



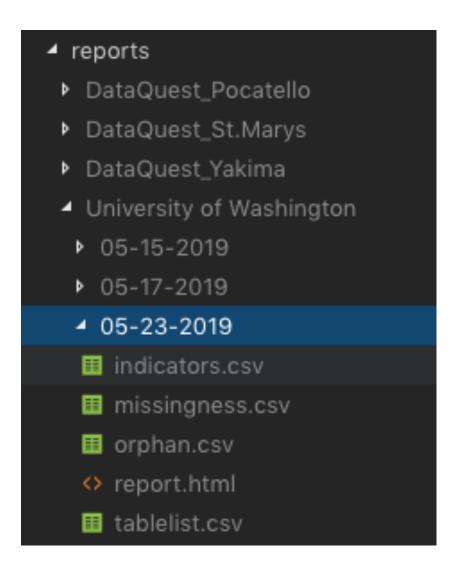
All reports are combined into a visualization dashboard



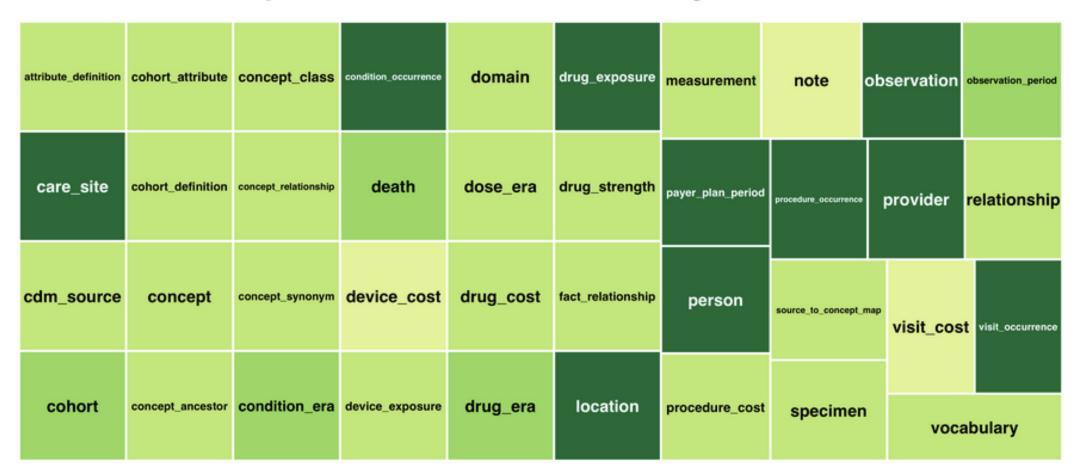
All these modules output csv reports. The output folders are

managed by Query.py Reports config.json Diff.py tablelist.csv Query.py missingness.csv Missingness.py Visualized Report Orphan.py orphan.csv Indicators.py Indicators.csv Future Modules

All these modules output csv reports. The output folders are managed by Query.py to account for different test dates and organizations.

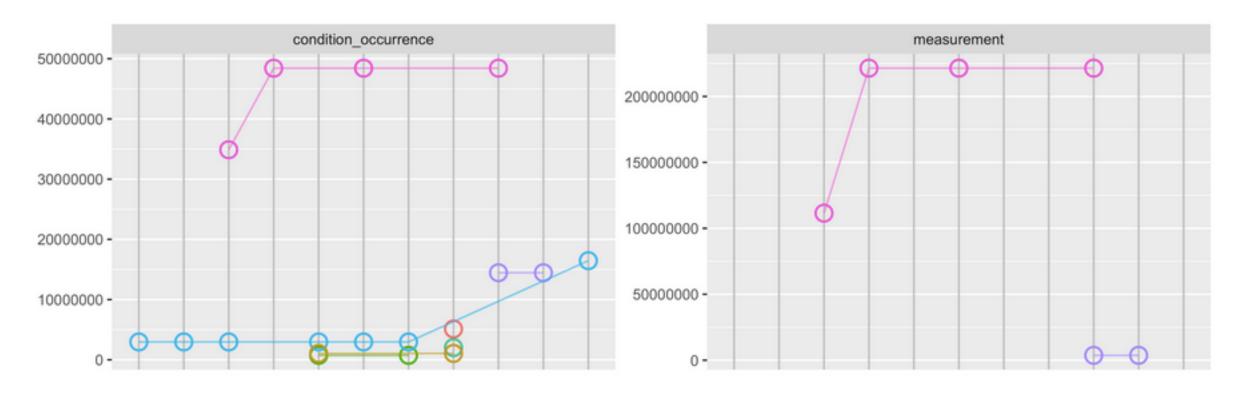


A network-level preview of table availability



Network-wide changes in the main clinical tables by site and across data reload

This is an aggregate view of the primary loads across tables for the entire network. This allows a comparison



Network-wide missingness in available tables.

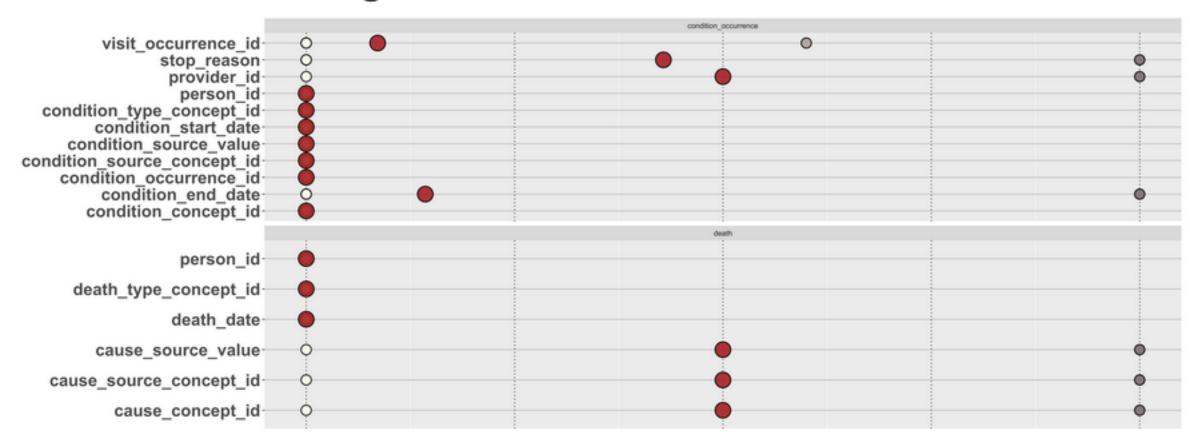
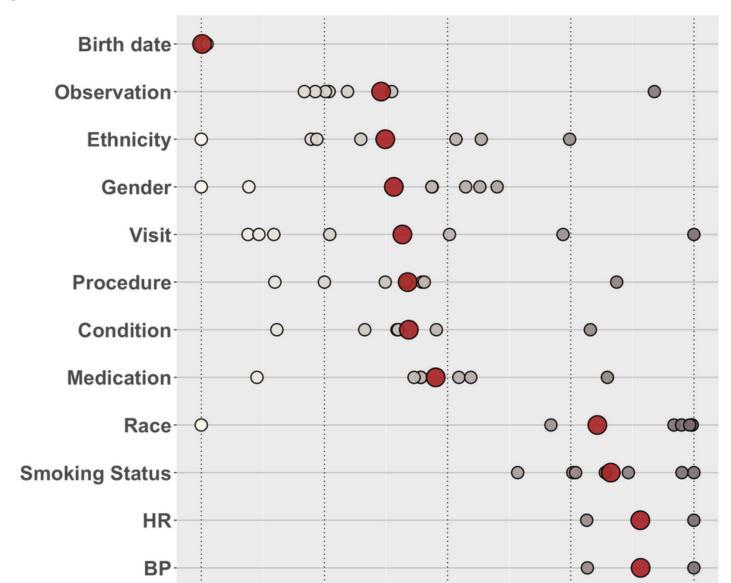
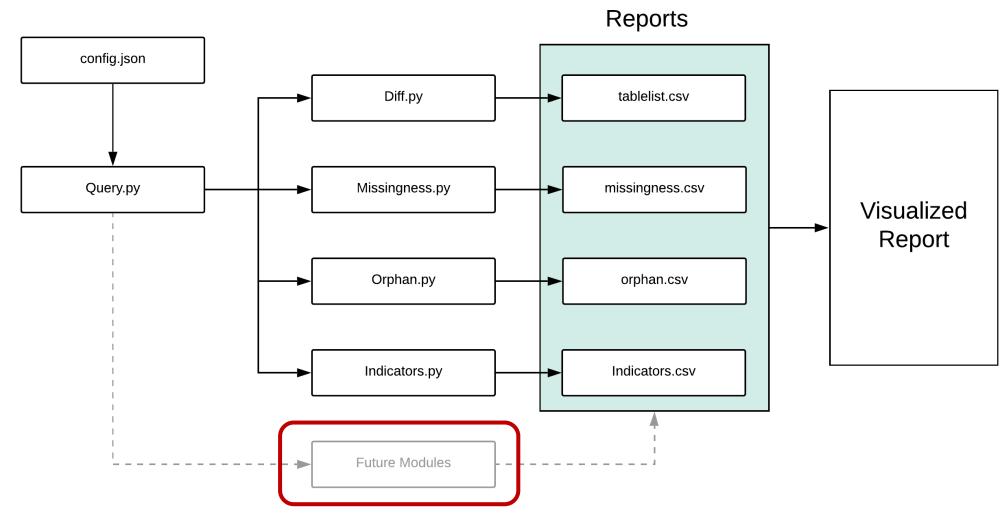


Figure 9. Indicator differences across the network

Figure 9 shows the different indicator measurements from across the network.



Reports are visualized into an HTML file. Easy to embed into a website



Adding New Modules

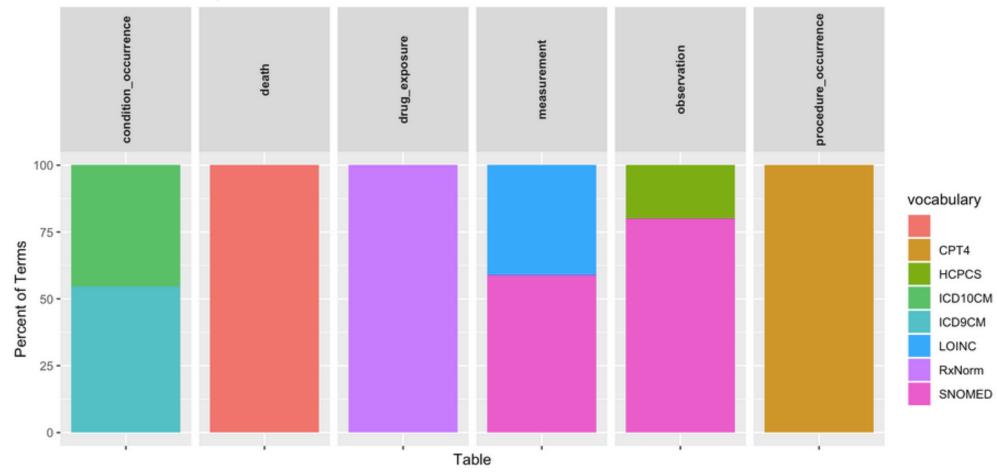
```
class Example:
   def __init__(self, query):
       self.query = query
   def runTest(self):
       # write your script here
       # If you have SQL queries make sure to accomodate the different query structures
       # at the end you should have some pandas dataframe with statistics
       # final_output_report = some_pandas_dataframe
       # write your report to the current report folder with the query function outputReport
        # self.query.outputReport(final_output_report, "output.csv")
```

Vocabulary Summary

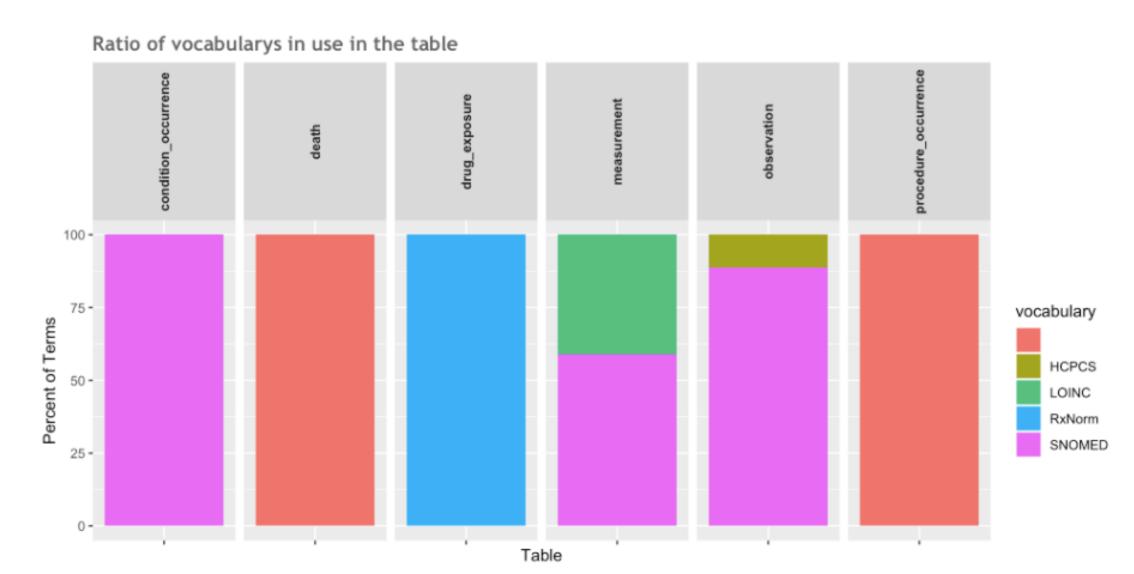
Figure 6. Vocabularys in Use by Clinical Table

Figure 6 shows the percentage of all concepts in the clinical tables. The tests are derived from the tests/vocabulary.json files.

Ratio of vocabularys in use in the table



Vocabulary Summary

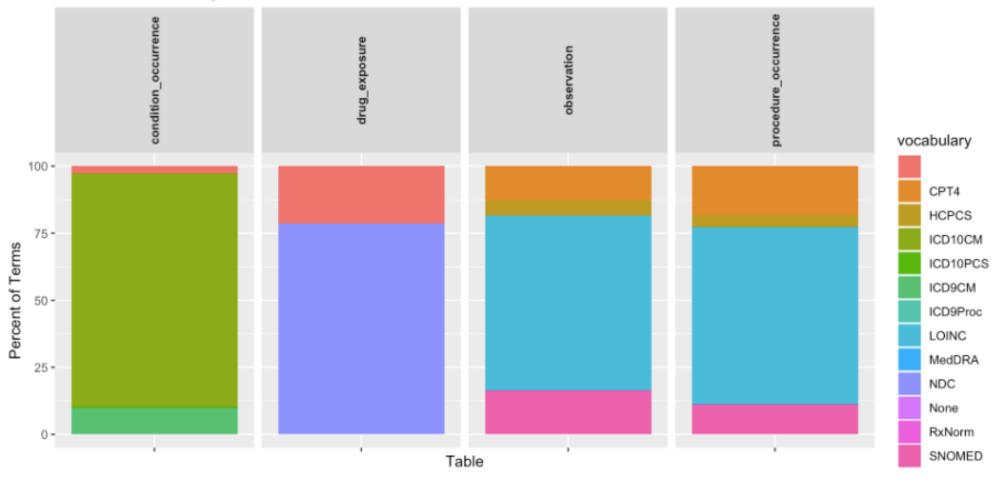


Vocabulary Summary

Figure 6. Vocabularys in Use by Clinical Table

Figure 6 shows the percentage of all concepts in the clinical tables. The tests are derived from the tests/vocabulary.json files.

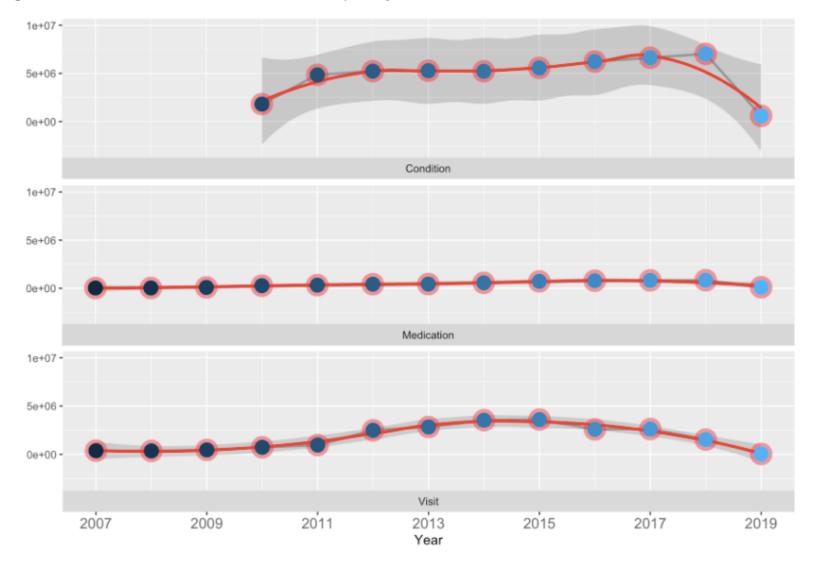
Ratio of vocabularys in use in the table



Temporal Plausibility

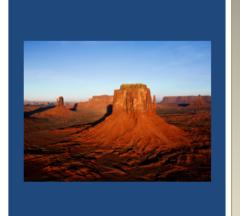
Figure 7. Changes in Record Numbers across Time

Figure 7 shows the number of records over time in the repository.



Operationalizing use of DQe tools for data quality testing

- * Data QUEST
- * DARTNet Institute
- * CD2H



DQe-c/DQe-v Reports Standard Operating Procedure (SOP)

Version 2

December 2016

DQe-c Overview		
-		
How to Use the Tables in the DQe-c Report2		
Load and Test Detail Section4		
Table 1.List and Status of OMOP Tables in this Load4		
Figure 1.Available Tables, Compared to all OMOP V4 Tables4		
Figure 2.File Size and Row Numbers by Table in the OMOP Load5		
Figure 3.Loaded Tables against OMOP V4 Relational Model6		
Completeness Results Section8		
Table 2.The Master Completeness Results Table		
Table 3.A Small Sample of Flags		
Figure 4.Changes in Primary Keys across Loads		
Figure Set 1.Proportion of Missing Data by Type in Loaded Tables10		
Data Model Tests Section11		
Figure Set 2.Common Key Variables		
Test of Completeness in Key Clinical Indicators Section		
Figure 5.Common Key Variables		
DQe-c Aggregated Report Overview14		
Figure 1. Overall missingness across OMOP tables and columns		
Figure 2. Overall missingness in key indicators		
DQe-v Overview16		
Variability Preview Tab		
Exploratory Analysis Tab		
Density Plot Tab		
Regression-Based Analysis Tab		
Appendix A. Data Quality Tests		

TABLE OF CONTENTS

Questions?

- We are looking for collaborators and contributors!
- Contact me if you need help getting the tool up and running.
- We are always looking for feedback.

CD2H Data Quality Project

https://ctsa.ncats.nih.gov/cd2h/data-quality-methods-and-tools-to-support-ctsa-hub-data-sharing/



Thanks to Kari Stephens, Hossein Estiri, WPRN, ITHS, and CD2H!

Contact: Tim Bergquist trberg@uw.edu

https://dataquest.iths.org/

https://ctsa.ncats.nih.gov/cd2h/

https://github.com/data2health/DQe-c-v2

