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**Health informatics - Classification of traditional Chinese  
medicine data sets**

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### Foreword

This standard was drafted in accordance with the rules given in GB/T 1.1-2009.

This standard uses the redrafting method to modify and adopt ISO /T S22558..2019 "Classification of TCM Datasets in Health Informatics".

The technical differences between this standard and ISO /T S22558..2019 and the reasons are as follows.

--- Regarding the normative reference documents, this standard has made adjustments with technical differences to suit China's technical conditions and the situation of adjustment.

The situation is reflected in Chapter 2 "Regulatory Reference Documents", and the specific adjustments are.

\* Added reference to GB/T 7027-2002 (see Chapter 4);

\* Added references to GB/T 10113-2003 (see Chapter 3);

\* Added references to GB/T 20001.3-2015 (see Chapter 4);

\* Deleted the international standard ISO /IEC 20944-1..2013;

\* Deleted the international standard ISO /IEC 11179-2..2005;

--- Revised the terms and definitions of "Chinese medicine" (see Chapter 3);

--- Added "taxonomy" terms and definitions (see Chapter 3);

--- Removed the term "codeset" (see Chapter 3);

--- In the creator type code table, added a description of each type (see Table 1);

--- In the topic type code table, a first-level category "Chinese Minority Medicine" has been added, and 9 second-level categories have been set up under this category.

Category (see Table 3).

The following editorial changes have been made to this standard.

--- References supplement the source documents for terms and definitions of this standard.

This standard is under the jurisdiction of China National Institute of Standardization.

This standard was drafted. Institute of Chinese Medicine Information, China Academy of Chinese Medical Sciences, China Institute of Standardization, Chinese Academy of Traditional Chinese Medicine

Institute of Basic Medical Sciences, Nanjing University of Traditional Chinese Medicine, Beijing Yingfusen Software Co., Ltd.

## Introduction

With the development of the Chinese medicine industry, Chinese medicine data resources are increasingly abundant, including medical data, scientific research data, industrial data, and other activities.

Data generated by governments; data sources are diverse, and government departments, medical institutions, scientific research institutions, educational institutions, industrial institutions, etc. have produced a large number of data

The time range of data covers ancient to modern times. Such a complex data resource needs to be classified and managed. Data sets are data resources

The result of manual ordering is a collection of data with a certain theme that can be identified and processed by a computer system. Classification of Traditional Chinese Medicine Data Sets

The standard specifies the classification method, category name and category code of the traditional Chinese medicine data set, which can be used as element modification of the metadata of the traditional Chinese medicine data set

Words, used for content description, classification indexing, metadata rendezvous and classification retrieval of Chinese medicine datasets.

According to this standard, traditional Chinese medicine data sets with certain common characteristics are merged together, and traditional Chinese medicine data sets without common characteristics are distinguished.

To enable computer systems or humans to identify and process them to ensure that TCM data resources are effectively managed and support efficient retrieval service.

This standard is based on the full reference of GB/T 20001.3-2015 and GB/T 7027-2002,

combined with Chinese medicine data sets.

Features compiled.

The order and rank of all categories and codes in this standard only indicate their position in this classification system, and have nothing to do with the degree of importance.

Classification of TCM Datasets in Health Informatics

## 1 Scope

This standard specifies the classification method, category name and category code of the traditional Chinese medicine data set.

This standard applies to the investigation and management of TCM data resources, as well as content description, classification indexing, and metadata transfer of TCM data sets.

And search by category.

## 2 Normative references

The following documents are essential for the application of this document. For dated references, only the dated version applies to this article

Pieces. For undated references, the latest version (including all amendments) applies to this document.

GB/T 7027-2002 Basic principles and methods of information classification and coding

GB/T 10113-2003 General terms for classification and coding

GB/T 20001.3-2015 Standard drafting rules Part 3. Classification criteria

## 3 terms and definitions

The terms and definitions defined in GB/T 10113-2003 and the following apply to this document. For ease of use, the following is repeated

Certain terms and definitions in GB/T 10113-2003.

### 3.1

Dataset

A collection of data with a certain theme that can be identified and processed by a computer system.

[ISO 19115-1..2014, definition 4.3]

### 3.2

### Traditional Chinesemedicine

Traditional medicine, which originated in China, is characterized by holism and dialectical governance.

Note. Traditional Chinese medicine is a collective term for medicines of all nationalities in China, including Han and minority medicines.

[ISO /T S17938..2014, definition 2.1]

### 3.3

#### Classification standard

Regularly arrange or plan products, processes, or services based on similar attributes (or characteristics) such as source, composition, performance, or use

Points.

Note. Classification criteria sometimes give or contain classification principles.

[GB/T 20000.1-2014, definition 7.4]

### 3.4

#### Classification

The classification objects are distinguished according to the selected attributes (or characteristics), and the classification objects with certain common attributes (or characteristics) are grouped together.

process.

[GB/T 10113-2003, definition 2.1.2]