

# **SNOMED CT July 2025 International Edition - SNOMED International Release notes**



<b>Release Date</b>	<b>20250701</b>
<b>Release Status</b>	<b>PRODUCTION</b>
<b>Document Version</b>	<b>1.0</b>

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## **Introduction**

### **Background**

SNOMED CT terminology provides a common language that enables a consistent way of indexing, storing, retrieving, and aggregating clinical data across specialties and sites of care.

SNOMED International maintains the SNOMED CT technical design, the content architecture, the SNOMED CT content (includes the concepts table, the descriptions table, the relationships table, a history table, and ICD mappings), and related technical documentation.

### **Purpose**

This document provides a summarized description of the content changes included in the July 2025 release of SNOMED Clinical Terms<sup>®</sup> (SCT) International Edition.

It also includes notes detailing the known content or technical issues where the root cause is understood, the fix has been discussed and agreed to, but has yet to be implemented.

The SNOMED International release notes are available alongside the July 2025 International Edition.

### **Scope**

This document is written for the purpose described above and is not intended to provide details of the technical specifications for SNOMED CT or encompass every change made.



## Audience

The audience includes National Release Centers, WHO-FIC release centers, vendors of electronic health records, terminology developers and managers who wish to have an understanding of changes that have been incorporated into the July 2025 International Edition.

*Please note, you may have to register for a Confluence user account in order to access the links included in these release notes.*



## **Content Development Activity**

### **Summary**

Continuous quality improvement and enhancement of existing content is an ongoing process undertaken by SNOMED International in preparation for every release. The July 2025 International Edition has seen a continuation of the work driven by contributions from: Kaiser Permanente i.e. Convergent Medical Terminology (CMT), Global Medical Device Nomenclature Agency (GMDNA), Orphanet and other domain specific collaborations as well as requests received via the Content Request System (CRS).

Additionally quality improvement activities are advanced via project driven initiatives summarized below. Additional work items impacting every release are updates to the SNOMED CT derived maps such as ICD-10 and ICD-O; details are included in these release notes.

Information about editorial decisions may be found in the SNOMED CT Editorial Guide; mapping guidance for ICD-10 can be found [here](#).



## Quality Initiative

The Quality Initiative (QI) project is the implementation of the Quality Strategy. After a successful pilot project for the July 2018 Edition release, the next stage has been implemented for subsequent releases including July 2025.

Quality improvement tasks are being deployed to improve internal structural consistency and ensure compliance with editorial policy related to the stated modeling of content. Additionally, correction or addition of defining relationships is being carried out to accurately reflect current clinical knowledge and ensure the semantic reliability of descriptions associated with a concept.

## Description Update for Concepts Using "Arm" and "Leg" in the FSN

Concepts that use "arm" or "leg" without qualification are ambiguous, as the anatomical site may be misinterpreted. Information on this topic can be found in the Arm, leg, upper, lower, extremity, limb section in the editorial guide [here](#).

Work has progressed for the inactivation and replacement of concepts using "arm" and "leg" without qualification in the FSN within the Disorder and Procedure hierarchies.

## Inactivation of Clinical Finding/Procedure with Patient in Fully Specified Name

224 concepts which include the term 'patient' have been inactivated, with replacement as required. The remaining work in this area has been placed on hold given other priorities.

For further information please see this [briefing note](#).

## Body Structure

### SEP and Laterality Anatomy Reference Sets

The release file for the lateralizable body structure reference set has been updated and validated.

The release file for the SEP reference set has been updated and validated.

## Clinical Finding

### Description Update for Bowen's Disease

Bowen's disease related content has been updated to improve consistency for translation and to align these concepts with authoritative sources for neoplasms and editorial guidance regarding eponyms.

- 84999002 |Bowen's disease (morphologic abnormality)| has been inactivated and replaced by 1162893000 |Squamous cell carcinoma in situ (morphologic abnormality)|. Description naming patterns have been applied according to the |Finding site|.
- For concepts with a |Finding site| of skin structure, the following naming pattern has been applied:
  - FSN: Squamous cell carcinoma in situ of [body structure] (disorder)
  - PT: Squamous cell carcinoma in situ of [body structure]
  - SYN: Bowen disease of [body structure]
  - SYN: Bowen's disease of [body structure]
  - SYN: Intraepidermal squamous cell carcinoma of [body site]
- For concepts with a |Finding site| other than skin structure, the following naming pattern has been applied:
  - FSN: Squamous cell carcinoma in situ of [body structure] (disorder)
  - PT: Squamous cell carcinoma in situ of [body structure]

## Description Update for Oral Part of Tongue

The fully specified name and preferred term for concepts relating to neoplastic disorders have been updated to align with recent changes to the anatomy concepts. For example:

- FSN: Neoplasm of oral part of tongue (disorder)
  - PT: Neoplasm of oral part of tongue
- FSN: Neoplasm of inferior part of oral part of tongue (disorder)
  - PT: Neoplasm of ventral surface of tongue
- FSN: Neoplasm of dorsum of oral part of tongue (disorder)
  - PT: Neoplasm of dorsal surface of oral part of tongue

Number of concepts edited (approx): 27

## Adverse Reaction

26 new concepts have been added for adverse reaction relating to vaccines/antibody therapy.

The descriptions for 29 published concepts have also been updated.

Improvements have been made to the 425706005 |Immune reconstitution reaction (disorder)| sub-hierarchy, including the addition of two new concepts.

## Concept Inactivation Administrative Findings

11 administrative finding concepts relating to registration and requests to come in, have been inactivated.

## Concept Inactivation Virgo Intacta

The following concepts have been inactivated due to ambiguity:

- 161815000 |Virgo intacta (finding)|
- 169446008 |Virgo intacta – contraception unnecessary (finding)|
- 248850008 |Integrity of hymen (finding)|

The concepts have been replaced by

- 1367857008 |Hymen intact (finding)|

The replacement concept enables accurate documentation based on direct anatomical observation.

## Procedure

### Inactivation of Initial and Follow Up Assessment Procedure Concepts

The identification of assessment procedures as "initial" or "follow-up" is discouraged by editorial policy. These procedures are being inactivated with targets to the generic procedure not described as "initial" or "follow-up", or else the inactivated concept's current parent.

For further information please see this briefing note.

Number of concepts edited (approx): 60

## Radiographic Imaging

Work is progressing for [this content tracker](#) for information please see [the informational briefing note here](#).

## Situation with Explicit Context

### Update History of Abuse

The hierarchy 313214000 |History of abuse (situation)| and suspected abuse concepts have been reviewed and content changes made as required, in relation to the role of the subject of the record as the victim or the perpetrator. To support this work, new finding concepts have been created as required.

## Qualifier Value

### New Concepts for Staining Technique

Around 100 new concepts have been added to the 703857004 |Staining technique (qualifier value) subhierarchy.

## Collaboration/Harmonization Agreements

### Convergent Medical Terminology (CMT)

28 new CMT concepts have been added with a focus on injuries, device disorders, ophthalmology and cardiology domains.

### Orphanet

Working in collaboration with Orphanet efforts are ongoing to update rare disease concepts in SNOMED CT to maintain alignment with Orphanet for the annual update of the SNOMED CT to Orphanet Maps. In scope content has been annotated with attribution to Inserm Orphanet.

All of the concepts added for the Orphanet project have been mapped to ICD-10.



## Cancer Synoptic Reporting

Cancer synoptic reports are used by many member countries to record pathology examination of cancer specimens including the College of American Pathologists (US and Canada), Royal College of Pathology (UK), Royal College of Pathology Australasia (Australia, New Zealand), PALGA (The Netherlands), Swedish Society of Pathology, and others.

For more information about this project, please see [Cancer Synoptic Reporting Clinical Project Group](#)

## International League Against Epilepsy (ILAE)

In line with approved harmonized terminology, this project is working on alignment including restructuring to update the hierarchy << 313307000 |Epileptic seizure (finding)|.

Concepts in the areas of 1275631007 |Developmental and epileptic encephalopathy (disorder)| and subtypes, and 723125008 |Epileptic encephalopathy (disorder)| and subtypes have been reviewed with changes to content which include

- Inactivation of outdated content
- Creation of new concepts
- Updated descriptions to align with current disorder naming
- Addition of definitions and attribution of same to the International League Against Epilepsy

Further information about this collaboration is available [here](#).

## Internal Quality Improvement

### Machine Readable Concept Model (MRCM) Changes

There have been no changes for MRCM in the July 2025 International Edition.



Future changes that are currently in progress can be viewed via the MRCM Daily Build Browser

Please see Early Visibility Release Notifications for future planned changes to MRCM.

## Annotation Reference Set

The addition of content for the Annotations refset was commenced in the July 2024 International Edition release and is ongoing for attribution of in scope content that is part of a collaboration agreement. Where content with attribution no longer falls into scope for a collaboration agreement, the attribution has been inactivated.

## SNOMED CT derived products

### SNOMED CT - ICD-10 map

The SNOMED CT to the International Statistical Classification of Diseases and Related Health Problems, Tenth Revision (© World Health Organization 1994) 2016 Version map (SNOMED CT to ICD-10 Map) is included in the SNOMED CT International Edition as a Baseline. The SNOMED CT to ICD-10 Map was created to support the epidemiological, statistical and administrative reporting needs of SNOMED International member countries and WHO Collaborating Centers.

The SNOMED CT to ICD-10 Map is released in Release Format 2 (RF2) only. It is located in the file `der2_iisssccRefset_ExtendedMapFull_INT_20200731.txt`, which is in the Map folder under Refset, in each of the three RF2 Release Type folders.

The SNOMED CT to ICD-10 Map is released as Refset 447562003 |SNOMED CT to ICD-10 extended map (foundation metadata concept).

The ICD-10 Mapping Technical Guide (including exemplars) is hosted here <https://confluence.ihtsdotools.org/display/DOCICD10>.



## Content Development Activity Summary

The map is a directed set of relationships from SNOMED CT source concepts to ICD-10 target classification codes. The SNOMED CT source domains for the map are constrained to subtypes of [404684003 |Clinical finding \(finding\)|](#), [272379006 |Event \(event\)|](#), and [243796009 |Situation with explicit context \(situation\)|](#). The target classification used is the ICD-10 WHO version 2016 (<https://icd.who.int/browse10/2016/en#/>).

### Mapped content for July 2025 release

The map provided for this release has been updated and represents a complete map from the July 2025 release of the SNOMED CT International Edition to the ICD-10 WHO version 2016.

This includes:

- Addition of 827 new mapped concepts
- Reactivation of 3 previously published maps
- Updates to 348 existing mapped concepts
- Retirement of 329 mapped concepts

The SNOMED CT to ICD-O morphology map has zero (0) additions for this release.

We welcome feedback on any issues that users may detect when deploying the map. Issues can be reported to [mapping@snomed.org](mailto:mapping@snomed.org).

## SNOMED CT to OWL conversion and classification

The repository containing the toolkit enabling simple SNOMED CT to OWL conversion and classification can be found here, including documentation on its use: <https://github.com/IHTSDO/snomed-owl-toolkit>

Please contact SNOMED International at [support@snomed.org](mailto:support@snomed.org) if you would like to provide any feedback on ways to extend and improve the new toolkit.







## [Technical notes](#)

### Known Issues

Known Issues are content or technical issues where the root cause is understood, and the resolution has been discussed and agreed but has yet to be implemented. This can be due to a number of reasons, from lack of time within the new monthly editing cycles, to the risk of impact to the stability of SNOMED CT if the fix were to be deployed at that stage in the Product lifecycle.

For the current SNOMED CT International Edition, the following Known Issues were identified, and agreed to be resolved in future editing cycles:

Key	Summary	Description
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No issues found

## Resolved Issues

Resolved issues are Known Issues which were not fixed as part of the previous release lifecycle, but which have now been resolved in the latest release. They can also be issues found during testing of the current release, which were resolved before the final deployment of the Production release. Finally they can be issues which were reported or found during the testing phase, but which have been closed without any action taken.

The Resolved Issues for the current SNOMED CT International Edition can be found here:

Key	Summary	Description	Resolved
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No issues found

## Technical updates

### RF2 package format

The RF2 package convention dictates that all relevant files are included, regardless of whether or not there is content to be included in each release. Therefore, the package contains a mixture of files which contain both header rows and content data, and files that (intentionally) include only header records. The reason that these "empty" files are included in the package is to draw a clear distinction between:

1. ...files that have been deprecated (and therefore removed from the package completely), due to the content no longer being relevant to RF2 in future releases



2. ...files that happen to contain no data in this particular release (and are therefore included in the package with just a header record), but are still relevant to RF2, and could therefore contain content in future releases.

This allows users to easily distinguish between the two scenarios, as otherwise if files in option 2 were left out of the package it could be interpreted as an error, rather than an intentional lack of content in that release.

## Proposal to increase the maximum length of Description Types

Please find below the link to the recent announcement on the proposal to increase the limit of characters allowed in Descriptions:

- <https://confluence.ihtsdotools.org/pages/viewpage.action?pageId=238158325>

A community consultation was launched to solicit feedback on a proposal to increase the size limits of SNOMED CT concept descriptions to 4096 from the current limit of 255 characters. While this change does not represent a modification of the existing specification, it could be disruptive to implementers who have coded fixed length limits into their systems.

Please read the full proposal, along with the latest Q&A blog post which details the proposed change, its potential benefits, the feedback process and timelines, and the issues that may need to be considered in such an update:

- <https://confluence.ihtsdotools.org/mag/community-consultations/snomed-international-proposal-to-increase-description-length-limit>
- <https://www.snomed.org/news/blog%3A-snomed-international-seeks-community-feedback-on-proposed-description-character-limit-increase>

As always, SNOMED International greatly appreciated all feedback provided before the deadline (which was Dec 31, 2024). A summary of the feedback will be collated and disseminated in 2025, alongside a plan for the transition.

## Early visibility of impending changes in the upcoming 2025 Monthly International Edition releases

Please see the Early Visibility Release Notifications Confluence page for details of forthcoming changes.



## Document links

All links provide information that is correct and current at the time of this Release. Updated versions may be available at a later date, but if so these will need to be requested from the relevant SNOMED International teams.

**NOTE:** To access any of the links in the pdf document, please visit the Release Notes <https://confluence.ihtsdotools.org/display/RMT/SNOMED+CT+July+2025+International+Edition+-+SNOMED+International+Release+notes>(see page 2)