The equivalent section in FHIR is:

**Inter-version Compatibility**

There is no explicit version marker in the XML. Subsequent versions of this specification may introduce new elements at any point in the content models, but the path and meaning of existing data elements will not be changed. Given that, in a typical scenario, mixed versions may need to exist, applications SHOULD ignore elements that they do not recognize unless those elements are marked with a "must understand" attribute. However, in a healthcare context, many application vendors are unwilling to consider this approach because of concerns about clinical risk. Applications are not required to ignore unknown elements, but must declare whether they will do so in their conformance statements using the `acceptUnknown` element.

In addition, the section on Control of Extensions says:

To minimize complexity for implementers, HL7 will not elevate content defined in an HL7-approved extension to be content defined in a core resource in future versions of the resource.

The combination of these two things means that change to resource content is extremely unlikely. Change rules for extensions have not yet been created, but they will likely be quite limited as well. Most change will be handled through deprecating old extensions and introducing new ones.

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Note: Unless explicitly stated otherwise, the opinions and positions expressed in this e-mail do not necessarily reflect those of my clients nor those of the organizations with whom I hold governance positions.

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Version: 2012.0.2221 / Virus Database: 2441/5304 - Release Date: 10/02/12