

External EDI Specifications for Reference Lab Interfaces

(Contains Inbound Orders and Outbound Results)

For the LabCorp Communications Server (LCS)

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(Based on Health Level Seven, Version 2.3)

Table of Contents

1	PREF	ACE	4
	1.1	Introduction	4
	1.2	Document Composition	
	1.3	Health Level Seven (HL7)	
	1.4	Disclaimer	4
2	GENE	ERAL NOTES	5
3	COM	MUNICATIONS	7
	3.1	LabCorp Communications Server (LCS)	7
	3.2	Connecting to LCS	
	3.3	VPN (Virtual Private Network)	7
	3.3.1		
	3.3.2		
	3.3.3	•	
	3.3.4	1	
	3.3.8 3.3.6		
	3.3.7	, ,	9 0
	3.3.8		10
	3.3.9		11
	3.4	SFTP (Secure FTP)	
	3.4.1	1 SFTP - (SSH Hosted by LabCorp, Trading Partner initiates pushir	ng and pulling of
	data		
		nt Requirements:	12
	3.4.2	, , ,	ng and pulling of
	data		10
	3.5	nt Requirements: Encrypted EDI Over the Internet using LKTransfer	
4	BILLI	NG INFORMATION	_
	4.1	Bill Type Field Requirements	13
	4.2	Customer Contract Bill Scenarios	15
5	ORDI	ER MESSAGE FORMAT	16
	5.1	Order Message (ORM)	16
	5.1.1		
	5.2	Sample Order Message	
	5.3	Guide to formatting Order messages	
	5.3.1		
	5.3.2	.	
	5.3.4 5.3.4	, ,	
	5.3.4 5.3.8	• • • • • • • • • • • • • • • • • • • •	
	5.3.6	•	
	5.3.7		
	5.3.8	5	
	5.3.9		
	5.3.1		
	5.3.1	5	
	5.3.1	5	
	5.3.1	13 ZCY Segment – Bethesda Cytology	46

Table of Contents

	5.3.14	ZSA Segment – Maternal Serum Screening and Amniotic Fluid Alph	a-Fetopi	rotein
		52	•	
		ZRE Segment – Reproductive		
	5.3.16	ZON Segment – Oncology	66	
		ZPM Segment – Patient Medication		
	5.3.18	NTE Segment – Comment	71	
	5.3.19	SPM Segment – Specimen	72	
6	RESULT N	MESSAGE FORMAT		76
	6.1 Resu	ult Message (ORU)	76	
		esult Message Structure (ORU)		
		ple Result Message		
	6.3 Guid	e to formatting Result messages	77	
	6.3.1 MS	SH Segment – Message Header	77	
	6.3.2 PI	D Segment - Patient Identification	79	
	6.3.3 NF	K1 Segment - Next of Kin / associated parties segment	83	
	6.3.4 OF	RC Segment - Common Order Segment	85	
	6.3.5 OI	BR Segment – Observation Order Segment	88	
	6.3.6 O	BX Segment - Result Observation Segment	93	
		EF Segment – Encapsulated Data Format		
		TE Segment – Comment		
		PM Segment – Specimen		
	6.3.10	ZPS Segment - Place of Service	103	
7	STANDAR	D REQUISITION		105
8	STANDAR	D MANIFEST		105
9	LABCORP	2D BARCODE		105
10	DEVISION	8		106

1 **PREFACE**

1.1 Introduction

This document provides instructions for the development and management of an external clinical interface to support Electronic Data Interchange (EDI) between the Client and LabCorp following the standard established by the American National Standards Institute (ANSI). composition guidelines, used by LabCorp, were created by Health Level Seven (HL7) an ANSI accredited committee. LabCorp specification version 10.8 was developed based on HL7 specifications version 2.3 however the SPM segment has been pre adopted from HL7 2.5.

The LabCorp EDI specifications are for our Reference Lab interface. This document contains specification details for both the orders and results documents.

- For bi-directional interfaces, both orders (ORM) and results (ORU) messages are required.
- For unidirectional (results only) interfaces, only the results (ORU) message is required.

1.2 **Document Composition**

This document begins by introducing some terminology commonly used at LabCorp. Next is a basic discussion of what an interface does and how to use it. Finally, we will examine how to create messages to be used in the exchange of information with LabCorp.

1.3 Health Level Seven (HL7)

An American National Standards Institute (ANSI) accredited committee whose primary goal is to provide standards for the exchange of data among healthcare computer applications. eliminates or substantially reduces the custom programming and program maintenance that may otherwise be For more information on Health Level Seven data standards, contact HL7:

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ANSI Accredited Standards Developer

1.4 **Disclaimer**

This document contains the latest version of LabCorp's External HL7 interface implementation specification and supersedes all previous versions. Due to the changing needs of the reference laboratory industry, the contents of this document are subject to change at any time, without warning or prior notification. Please contact our Vendor Connectivity Management Department to obtain a current copy of the External EDI Specifications.

2 GENERAL NOTES

A lab code represents a receiving facility for order messages and a sending facility for result messages. Lab codes were originally just two characters, but now can be five characters. Additionally, it is possible for the sending facility in a result message to be the CLIA number, which is ten characters.

Different tests could be performed at different facilities so the OBX segment contains a footnote number that refers to a ZPS segment with the lab identification information.

```
MSH|^~\&|1100|POXYZ|TEST|TESTTEST|200009221625||ORU|0002|P|2.3<CR>
PID|1|ID15|A0123456789|ID15|LAST^FIRST^MIDDLE||19680828|F|||||(012)345-6789|||||32300111^^03^*F^N|111223333<CR>
ORC|RE|A0123456789^LAB|A0123456789^LAB|||||200009200000|||PHY ID 15<CR>
OBR|1|A0123456789^LAB|A0123456789^LAB|799452^799452 5 DRUG-BUND^L||200009201100|||||^C1C2C3|200009200000|||||025X1234567||200009251555|||F<CR>
OBX|1|ST|714816^Amphetamines^L||NEGATIVE||1000||N|F|19881006||200009201112|02<CR>
OBX|2|ST|716019^Cannabinoid^L||NEGATIVE||50|||N|F|19910930||200009201112|01<CR>
ZPS|1|01|LABCORP COMPUCHEM RTP|1904 ALEXANDER
```

DRIVE^^RTP^NC^277090000|9195726900||TITLE^LNAME1^FNAME1^M^^PHD<CR>ZPS|2|**02**|LABCORP BURLINGTON|1447 YORK COURT^^BURLINGTON^NC^272152230 |8882005439||TITLE^LNAME2^FNAME2^M^^MD<CR><LF>

NPI and other Ordering Provider ID Numbers are sent in ORC-12 and OBR-16, which are repeatable fields. If more than one type of Ordering Provider ID is entered the field will repeat with either a 'U' for UPIN, a 'L' for Local Provider ID, a 'N' for NPI Number, or a 'P' for Provider Number to identify the type of ID Number. Please see the following example.

ORC|NW|L2435^LAB||||||200501011200|||1234567890^LNAME^FNAME^M^^^N~23462^LNAME^FN AME^^^^L~0123456789^LNAME^FNAME^MI^^^N<CR>

OBR|1|L2435^LAB||001032^GLUCOSE^L|||20050101120101||||N||^SICK|||1234567890^LNAME^FNA ME^M^^^N~23462^LNAME^FNAME^M^^^L~0123456789^LNAME^FNAME^M^^^N||99999999999999999999999999

The following table explains information contained in the message segment tables. This table provides descriptions for each of the column headers and illustrates the values that may appear in the "Required field?" column. For optional segments, fields marked as required are only required when the segment is sent.

Heading	Description			
Field Mnemonic Code identifying a field within a message segment. This value is three alphanumeric of followed by a dash and a number. For example, OBR-1				
HL-7 Data Element This field contains the HL-7 ID number that uniquely identifies the data field through the standard. In the segment definition found in the standard, this information is in a literal #.				
Use/Value Field	This field contains the title of field and may contain use, notes, and a list of acceptable values for his field. Ex. – 'M', 'F', or 'N' for patient's gender. (Male, Female, or Not Indicated)			
	When noted, 'Alpha Characters' only letters A-Z are supported. No numeric or special characters such as hyphens, parenthesis, etc., should be sent.			
	When noted, 'Numeric Characters' only numbers 0-9 are supported. No alpha or special characters such as hyphens, parenthesis, etc., should be sent.			
	When noted, 'Alpha, Numeric, or Special Characters' all alpha, numeric, and special characters such as hyphens, parenthesis, etc. are supported, with the exception of the characters defined as delimiters in MSH-1 and MSH-2 field. To include any HL7 delimiter character (except the segment terminator) within a string data field, use the appropriate HL7 escape sequence (i.e.: \S\ for component separator, \T\ for subcomponent separator, and \R\ for repetition separator)			

General Notes

Required Field?	'R' - This field is always required.					
	'C' - This field is conditional and is needed for some processing options. Refer to the segment Use/Value Field for additional details.					
	'O' - This field is optional. Refer to segment Use/Value Field for additional details, if applicable.					
	'U' - This field is unused. LabCorp does not process any data received in the field.					
	'UO' - This field is unused for orders.					
	'UR' - This field is unused for results.					
	'B' - This field is for backward compatibility only.					
	'F' - This field is for future use but it is not currently used.					
LCA Length	Maximum field length in the LabCorp environment					
Field or Segment Delimiter	Used to mark the end of a field or segment. The ^ (caret) is used to separate items within a field. The field delimiter marks the end of a segment. The ~ (tilde) is used to mark the end of a repeating field.					

3 COMMUNICATIONS

3.1 LabCorp Communications Server (LCS)

LCS accepts EDI transmissions from clients, translates the information using the Cloverleaf interface engine, and routes the data to the appropriate location within LabCorp. When the results have been prepared, they are routed back to LCS for transmission to the client. After an interface has been tested and is ready to move into production, LabCorp will provide details on connecting to the production environment.

3.2 Connecting to LCS

The preferred connectivity methods supported by LabCorp to connect to LCS are:

VPN (Virtual Private Network)

SFTP (Secure FTP)

EDI over the Internet using LKTransfer

LabCorp will work with the client and the vendor supplying the interface to determine the connection method that best meets the interface requirements.

3.3 VPN (Virtual Private Network)

Transfer of data via a switch (AT&T or Nortel) either utilizing the internet via the ISP or via tcp/ip protocols utilizing firewall. In both cases, LabCorp networking staff will need to work directly with the client's networking group to be able to install and configure the switch in order to ensure that network security requirements are met and to ensure successful implementation before a communications test is scheduled.

3.3.1 Introduction

This is socket-to-socket "real time streaming data" communications. For the orders LabCorp listens and will receive the data when it becomes available. For the results the client will listen and receive the results when available.

3.3.2 Data Transfers

The data transfers will be real time streaming data from both the client and LabCorp sites. Firewall protocol is utilized. Acknowledgements are required. For orders an application will need to send to a port provided by LabCorp. For results an application will need to listen on a port provided by the receiving system. Minimal Lower Level Protocol (MLLP) is required.

3.3.2.1 Record Termination

Standard HL7 message structure.

Segment delimiters	<cr></cr>
Messages delimiters	<lf></lf>

3.3.2.2 Validation of Successful Result Delivery

ACKS/NACKS for orders from the client. ACKS/NACKS for results to the client.

3.3.3 Verification of Result Delivery

The receipt of an ACK will be accepted as a successful delivery. The receipt of data other than an ACK will be accepted as a NACK indicating unsuccessful delivery. Three successive NACK's will result in "moving on" and the result will be placed in the Error Data Base for review. If nothing is received the result will re-transmit indefinitely.

3.3.4 Client Requirements:

- 1. Set up firewall access using NAT'ed IP addresses.
- 2. Receive ACKS for orders.
- Send ACKS/NACKS for results.
- 4. Set up applications to send orders (client connection) on assigned port.
- 5. Set up application to listen/receive results (server connection).
- 6. Set up MLLP.
- 7. Proper handling of errors via sending of NACK or accepting the result (with an ACK) and processing internally.

3.3.5 TCP/IP Socket

Description

Example message with a short explanation on how a socket interprets data using control codes.

Legend

- 0b = 'VT' Vertical Tab
- 0d = 'CR' Carriage Return
- 0a = 'LF' Line Feed
- 1c = 'FS' File Separator

3.3.5.1 Start: TCP/IP - Message

- 1) 'VT' is the start of the message
- 2) 'CR' signals end of a segment and a new segment starts

3.3.5.2 End: TCP/IP - Message

0x00000450	(01104)	7c7c4232	35303133	5e4d5545	4c4c4552	B25013^MUELLER
0x00000460	(01120)	5e465241	4e434953	5e575e5e	5e5e557c	^FRANCIS^W^^^^U
0×000000470	(01136)	7c7c7c7c	7c7c7c0d	4f42527c	317c3030	.oBR 1 00
0×000000480	(01152)	30303030	3030387c	7c313634	3237375e	0000008 164277^
0×000000490	(01168)	48544c56	2d492f49	4920416e	7469626f	HTLV-I/II Antibo
$0 \times 0000004 = 0$	(01184)	64696573	2c205175	616c2e5e	4c7c7c7c	dies, Qual.^L
0x000004b0	(01200)	32303035	30363239	31363234	7c7c7c7c	200506291624
0x000004c0	(01216)	4e7c7c7c	7c7c7c7c	7c7c7c7c	7c7c7c7c	и
0x000004d0	(01232)	7c7c7c7c	7c7c7c7c	7c7c7c7c	7c7c7c7c	
$0 \times 0000004 = 0$	(01248)	7c7c7c7c	7d0d0a1c	Od		11111

- 1) 'CR' signals end of a segment
- 2} 'LF' signals end of current message
- 3) 'FS' signals end of current send
- 4) 'CR' goodbye

3.3.6 Sample Acknowledgement Message

Example:

First segment of a result message sent from the LabCorp system to the receiving system:

MSH|^~\&|1100|MB|VENDOR|TEST9999|200005170913||ORU|0053|P|2.3<CR>

Message sent back from the receiving system to the LabCorp system stating the message was accepted:

MSH|^~\&|VENDOR|TEST9999|1100|MB|200005170916||ACK|0053|P|2.3<CR> MSA|AA|0053|Optional Description of Error<CR>

ERRIMSG^1^5^Code Identifying Error<CR><LF>

3.3.7 Message Header Segment

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
MSH-0		Segment Type ID	R	3	
		Use: To identify the segment			
		• 'MSH'			
MSH-1	00001	Field Delimiter	R	1	
		Use: To separate fields			
		• "			
MSH-2	00002	Component Delimiter	R	1	
		Use: To separate components			
		• '^'			
		Repeat Delimiter	R	1	
		Use: To identify repeating fields			
		• '~'			
		Escape character	R	1	
		Use: To identify when a delimiter is used in the data as opposed to being used as a delimiter			
		• "\"			
		Sub-component delimiter	R	1	
		Use: To separate sub-components			
		• '&'			
MSH-3	00003	Sending Application (LCS Vendor Mnemonic when sending ACK to LabCorp)	R	15	I
		Use: To identify vendor			
		Alpha, Numeric, or Special Characters			
		Assigned by LabCorp and used for translations			
		For ACK message this value can be obtained from MSH-5 of the incoming message			
MSH-4	00004	Sending Facility (Client Site ID when send ACK to LabCorp)	R	10	
		Use: To identify client			
		Alpha, Numeric, or Special Characters			
		Assigned by LabCorp and used for routing purposes			
		For ACK message this value can be obtained from MSH-6 of the incoming message			

Communications

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
MSH-5	00005	Receiving Application (Responsible Lab System when sending ACK to LabCorp)	R	15	I
		Use: To identify the LabCorp Lab System sending the results. For ACK messages this value can be obtained from MSH-3 of the incoming message			
		'1100' - LabCorp Lab System			
		'DIANON' - DIANON Pathology Systems			
		'ADL' – Acupath Diagnostic Laboratories			
		'EGL' – Esoterix Genetic Laboratories			
		For backward compatibility only: 'CMBP' 'LITHOLINK' 'USLABS'			
MSH-6	00006	Receiving Facility (Responsible Lab Code when sending ACK to LabCorp)	R	10	I
		Use: Routing purposes throughout LabCorp systems.			
		Alpha, Numeric, or Special Characters			
		LabCorp assigned code representing the responsible laboratory			
		For ACK messages this value can be obtained from MSH-4 of the incoming message that was sent			
MSH-7	00007	Date/Time of Message	R	12	-
		Use: Record of the date and time the electronic acknowledgement was created.			
		Numeric Characters			
		Format: YYYYMMDDHHMM			
MSH-8	80000	Security	U	N/A	- 1
		Not currently saved, used, or returned			
MSH-9	00009	Message Type	R	3	
		Use: To identify an Acknowledgement Message is being sent			
		'ACK' - Acknowledgement Message			
MSH-10	00010	Message Control ID	R	20	- 1
		Use: Message identifier.			
		Alpha and Numeric characters			
MSH-11	00011	Processing ID	R	1	
		Use: To identify 'Production' order			
		• 'P'			
MSH-12	00012	Version of HL7 utilized for the format of this data structure	R	8	<cr></cr>
		Use: To identify HL7 specification version			
		• '2.3'			

3.3.8 Message Acknowledgement Segment

Field	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
MSA-0		Segment Type ID	R	3	1
		Use: To identify the segment.			
		• 'MSA'			
MSA-1	00018	Acknowledgement Code	R	2	- 1
		Use: To provide the acknowledgement Code.			
		'AA' - Application Acknowledgement: Accept			
		'AE' - Application Acknowledgement: Error			
		'AR' - Application Acknowledgement: Reject			
		'CA' – Commit Accept			
		'CE' - Commit Error			
		'CR' – Commit Reject			

Communications

Field	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
MSA-2	00010	Message Control ID	R	20	1
		Use: To identify the message.			
		Normally the Message Control ID from MSH-10 of the incoming message.			
MSA-3	00020	Text Message	0	80	<cr></cr>
		Use: To describe the error.			
		Text description of error			

3.3.9 Error Segment

Field	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ERR-0		Segment Type ID	R	3	1
		Use: To identify the segment			
		• 'ERR'			
		This segment is optional but this field is required if the segment is sent.			
ERR-1	00024	1.1	С	3	۸
		Error Code and Location - Segment ID			
		Use: To identify an erroneous segment in another message, when the MSA Acknowledgement Code is AE, AR, CE, or CR.			
		Alpha, Numeric, or Special Characters			
		Required if failure is due to a specific field or segment.			
		1.2	С	4	۸
		Error Code and Location – Sequence			
		Use: To identify the sequence number of the erroneous segment in another message, when the MSA Acknowledgement Code is AE, AR, CE, or CR.			
		Numeric Characters			
		Required if failure is due to a specific field or segment.			
		1.3	С	3	٨
		Error Code and Location - Field Position			
		Use: To identify the field position of the erroneous segment in another message, when the MSA Acknowledgement Code is AE, AR, CE, or CR.			
		Numeric Characters			
		Required if failure is due to a specific field or segment.			
		1.4	R	70	~ or
		Error Code and Location - Identifying Error			<cr></cr>
		Use: To provide a locally defined error code when the MSA Acknowledgement Code is AE, AR, CE, or CR.			
		Alpha, Numeric, or Special Characters			
		This segment is optional but this field is required if the segment is sent.			

SFTP (Secure FTP) 3.4

SFTP, or secure FTP, is a program that uses SSH to transfer files. It encrypts both commands and data, preventing passwords and sensitive information from being transmitted over an unencrypted network. Use of SFTP does not require a VPN tunnel

3.4.1 SFTP - (SSH Hosted by LabCorp, Trading Partner initiates pushing and pulling of data)

Client Requirements:

- 1. Must provide a Public Static IP address or host name for our firewall
- 2. Inbound port must be 20022
- 3. open port range must be 20100 to 20200

3.4.2 SFTP - (SSH Hosted by Trading Partner, LabCorp initiates pushing and pulling of data)

Client Requirements:

- 1. Must provide a SSH kev.
- 2. Must provide an IP address host name with a valid port number, a user ID and a password or SSH key pair.
- 3. Set up applications to send orders (client connection) on assigned port.
- 4. Set up application to listen/receive results (server connection).

3.5 **Encrypted EDI Over the Internet using LKTransfer**

LKTransfer Connectivity allows for encrypted HIPAA-compliant communications through a highspeed Internet Connection. All connectivity for transmitting orders and results uses an SSL tunnel with secure RSA 2048-bit certificate. LKTransfer provides a fast, safe, and reliable form of communications. LKTransfer requires the installation of a receiving application (the LKTransfer Agent) on the clients system, which will automatically download and decrypt data from LabCorp.

LKTransfer provides end-to-end secure messaging services between laboratories and electronic medical record systems (EMR). When laboratory orders are created in an EMR, LKTransfer picks-up the laboratory orders and securely delivers them to the laboratory. When the laboratory completes the results, LKTransfer picks-up the results and delivers them to the EMR.

LKTransfer has the following system requirements:

Operating Systems (one of the following):

- A Windows-based workstation (Windows Vista, Windows 7, Windows 8.x, or Windows 10).
- A Windows-based server (Windows Server 2008 R2, or Windows 2012).

Software: Microsoft .NET Framework 2.0 or Higher

Memory: minimum of 1 GB RAM

Web Browsers:

- To install the LKTransfer agent, Microsoft Internet Explorer, Microsoft Edge, Chrome, Firefox, and Safari can be used.
- Internet Explorer must also be installed on the computer for the LKTransfer Agent to work properly. (TLS Protocols enabled)

4 BILLING INFORMATION

Bill types supported by LabCorp are Client Bill, Patient Bill, Third Party Bill, and Customer Contract Bill. The following table shows the specific fields that are needed for Client, Patient, Third Party, and Customer Contract Bill. Customer Contract Bill is a customizable value based on specific client billing needs and will be discussed at the time of implementation if applicable for the project. Any additional bill types must be approved by LabCorp. The IN1 is not a required segment for Client and Patient Bill. The IN1-3.2 value will be a LabCorp assigned code which routes billing based on specific customer defined contracts as needed. Refer to the Order Message section of the Specifications for detailed format information for each segment field.

4.1 Bill Type Field Requirements

The following definitions apply to the Field Requirement column:

Client Bill (PID-18.4 is 'C') places the responsibility for reimbursement on the LabCorp client.

Patient Bill (PID-18.4 is 'P') places the responsibility for reimbursement on the patient.

Third Party Bill (PID-18.4 is 'T') places the responsibility for reimbursement on a third party entity (i.e., **Medicare**, **Medicaid**, and **Private Insurance**).

Customer Contract Bill (PID-18.4 is 1 - 5 digit code) LabCorp assigned values will be used when customer contract scenarios (e.g. indigent, sliding scale, or grant funding) cannot be sent as Third Party with an IN1 segment. Values will be determined during interface development implementation if applicable for the project. Customer-Contract codes will be Practice-specific. Specific billing agreements that are in place between the client and lab will be obtained from the Billing EDI Analyst assigned to each project during implementation.

'A' – This field is always needed for the specified bill type.

'D' – This field is desirable but not always needed for the specified Bill type.

'N/A' – This field is not applicable for the specified Bill type.

This table is not intended to represent any non-billing requirements.

Field Identifier	Field Description	Client	Patient	Third Party	Customer Contract
PID-2	External Patient ID	Α	Α	Α	Α
PID-5.1	Patient Last Name	Α	Α	Α	Α
PID-5.2	Patient First Name	Α	Α	Α	Α
PID-5.3	Patient Middle Name	D	D	D	D
PID-7.1	Patient Date of Birth	Α	Α	Α	Α
PID-8	Patient Gender	Α	Α	Α	Α
PID-11.1	Patient Address	D	Α	Α	Α
PID-11.3	Patient City	D	Α	Α	Α
PID-11.4	Patient State	D	Α	Α	Α
PID-11.5	Patient Zip or Postal Code	D	Α	Α	Α
PID-13.1	Patient Home Phone Number	D	Α	Α	Α
PID-18.1	LabCorp Client ID# (Client Account Number)	А	Α	Α	А
PID-18.4	Bill Type	Α	Α	Α	А

Billing Information

Field Identifier	Field Description	Client	Patient	Third Party	Customer Contract		
IN1-3.1	Insurance Company Identification Number	N/A	N/A	D	D		
IN1-3.2	Insurance Carrier Code	N/A	N/A	D	D		
IN1-4	Insurance Company Name	N/A	N/A	Α	D		
IN1-5.1	Insurance Company Address (Line 1)	N/A	N/A	Α	D		
IN1-5.2	Insurance Company Address (Line 2)	N/A	N/A	D	D		
IN1-5.3	Insurance Company City	N/A	N/A	Α	D		
IN1-5.4	Insurance Company State	N/A	N/A	Α	D		
IN1-5.5	Insurance Company Zip Code	N/A	N/A	Α	D		
IN1-8	Group Number of Insured Patient	N/A	N/A	D	D		
IN1-11	Insured's Group Employer Name	N/A	N/A	D	D		
IN1-17	Insured's Relationship to Patient	N/A	N/A	Α	D		
IN1-31	Type of Agreement (Workman's Compensation Flag)	N/A	N/A	А	N/A		
IN1-36	Policy Number (Insurance Number)	N/A	N/A	Α	D		
GT1-3.1	Guarantor Last Name	N/A	D	Α	Α		
GT1-3.2	Guarantor First Name	N/A	D	Α	Α		
GT1-5.1	Guarantor Address	N/A	D	Α	Α		
GT1-5.3	Guarantor City	N/A	D	Α	Α		
GT1-5.4	Guarantor State	N/A	D	Α	Α		
GT1-5.5	Guarantor Zip Code	N/A	D	Α	Α		
GT1-6	Guarantor Home Phone Number	N/A	D	Α	Α		
GT1-11	Guarantor Relationship to Patient	N/A	D	D	D		
GT1-16	Guarantor's Employer Name	N/A	D	D	D		
DG1-3.1	Diagnosis Code Identifier	D	D	Α	Α		
DG1-3.2	Diagnosis Code Text Description	D	D	D	D		
DG1-3.3	Name of Coding System	D	D	Α	Α		
ORC-12.1 or OBR-16.1	Ordering Provider ID Number (NPI number is expected)	А	А	А	Α		
ORC-12.2 or OBR-16.2	Ordering Provider Last Name	А	А	А	А		
ORC-12.3 or OBR-16.3	Ordering Provider First Initial	А	А	А	А		
ORC-12.8 or OBR-16.8	Source Table	А	А	Α	А		

4.2 Customer Contract Bill Scenarios

Logic must be developed to allow the appropriate Customer Contract Bill types to be associated to the patient's record/lab order but that will not interfere with the Practice's office-visit billing or reporting functionality.

Example Only: Bill Type dashboard (The Bill Type Value will be sent in PID-18.4 in the HL7 order message. The Bill Type Description and Value should print on the requisition.)

Bill Type Description*	Bill Type Value
	(PID-18.4)*
OClient Bill	?????*
OPatient Bill	?????*
OUninsured/Self Pay	?????*
OIndigent	?????*
OSlide Fee A	?????*
OSlide Fee B	?????*
OSlide Fee C	?????*
OSlide Fee D	?????*
OSlide Fee E	?????*
OSlide Fee F	?????*
OSlide Fee G	?????*

^{*} Where '?' = a 1 to a 5 digit code assigned by LabCorp. The Bill Type Description and Values must be customizable to allow the ordering provider to send accurate billing instructions for the lab order, based on practice-specific billing needs.

5 ORDER MESSAGE FORMAT

An **Order** message is a request for testing services sent to LabCorp by a physician or their authorized designee. An **Order** message must be formatted according to HL7 guidelines before it can be processed by LabCorp.

5.1 Order Message (ORM)

The order message contains patient demographics (name, date of birth, address, etc.), billing information, and test codes.

NOTE 1: Do not attempt to send data for multiple patients in a single order message. A unique order message must be created for each patient.

NOTE 2: If a patient has multiple testing requirements, create a single order message containing all test codes for that patient. For example, if a patient requires three individual tests, create one order message for that patient which includes each of the required test codes. Do not create an order message for each test, except in cases where specimen splitting must occur.

The following table lists the segments that could appear in an order message.

Segment	Description
MSH	Message Header
PID	Patient Identification
NK1	Next of Kin
ZCC	Courtesy Copy
IN1	Insurance
GT1	Guarantor
DG1	Diagnosis
ZCI	Patient General Clinical Information
ORC	Common Order
OBR	Observation Request
ZAP	Dianon Pathology
ZBL	Patient Blood Lead Clinical Information
ZCY	Patient Bethesda Cytology Clinical Information
ZSA	Patient Maternal Serum Screening or Amniotic Fluid Alpha-Fetoprotein Clinical Information
ZRE	Reproductive (only for Integrated Genetics)
ZON	Oncology (only for Integrated Oncology)
ZPM	Patient Medication
NTE	Notes and Comments (use is not recommended)
SPM	Specimen Information

5.1.1 Order Message Structure (ORM)

The example below illustrates the structure of an **Order** message.

```
MSH (One per message.)
PID (One per message.)
[NK1]
[ZCC]
{[IN1]}
[GT1]
{[DG1]}
```

```
[ZCI] (Only one per patient.)
{
ORC (At least one per patient/paired with OBR)
OBR (At least one per patient/paired with ORC)
{[ZAP]}
[ZBL]
[ZCY]
[ZSA]
[ZRE]
[ZON]
{[ZPM]}
{[SPM]}
```

Segments or segment groups enclosed in braces "{ }" may be repeated as needed. Segments enclosed in brackets "[]" are optional.

5.2 Sample Order Message

An order message contains all of the information needed to perform testing services, to report the results of the ordered tests, and to bill the responsible party for services rendered. Here is an example of segments that could be in an order message. It contains examples of optional segments, not all of which would be included in a single message:

```
MSH|^~\&|VENDOR|LC999999|1100|LC|200501011201||ORM||P|2.3<CR>
PID|1|89300043|||PATIENT^JOHN^MIDDLE||19600505|M|||99 MAIN
   STREET^^MYTOWN^NC^111119999||1112229999|||||99999999^^^T<CR>
NK1|1|NKLAST^NKFIRST^NKMIDDLE|GRD^GUARDIAN^HL70063|101 CENTRAL
   PIKE^^NKCITY^TN^333334444|8881112222<CR>
ZCC|A^12345678^University Medical Center~A^1234567890^Dr. Black~F^3365552121^Dr.
   Brown~P<CR>
IN1|1||MEDICARE/COMERCIAL|P.O. BOX C32086^SECOND LINE OF
   ADDRESS^RICHMOND^VA^232619999|||499032980|||EMPLOYER
   GT1|1||ODONNELL^RICHARD^W||7982 WELLINGTON
   DR^^WARRENTON^VA^221869999|7033492732|||||3||||Employer Name<CR>
DG1|1||Z00^ENCNTR FOR GENERAL EXAMINATION WITHOUT COMPLAINT^I10<CR>
ZCI|019|005^^10|10|Y<CR>
ORC|NW|L2435|||||||||A12345^LNAME^FNAME^M^^^U~23462^LNAME^FNAME^M^^^L~123456789
   0^LNAME^FNAME^M^^^N~1234567890^LNAME^FNAME^M^^^P<CR>
OBR|1|L2435||001032^GLUCOSE^L|||200501011201||||N||SICK|||A12345^LNAME^FNAME^M^^^U~2
   3462^LNAME^FNAME^M^^^L~1234567890^LNAME^FNAME^M^^^N~1234567890^LNAME^FN
   AME^M^^^P||99999999999<CR>
ZAP|1|PRDRE^DRE|C|L00009^SUSPICIOUS~L00012^MULTIPLE NODULES<CR>
ZBL|1|1|V|I<CR>
ZCY|Y|Y|Y|Y|Y|Y|Y|Y|Y|20121201|Y||Y|Y|Y|Y|Y|1/1/2013 TEST DATE
   ZSA|N|||Y||2|||||Y||Y||85.0^20130111^70.0|0.9^2.0|Y^25|Y|N|Y|N|N|^^Y|LAST^FIRST^GH7890^Y|AB1
   234|ZZ1234<CR>
ZRE|UPPER|GCLAST^GCFIRST^GCMIDDLE|Y|Y|UNKNOWN|PE|12345678|CBLAST^CBFIRST^CB
   MIDDLE|Y^Y^Y^Y^Y^Y^Y^Y^Y^Y^Y<CR>
ZON|INTEGRATEDONCOLOGYTESTNAME|ONCOLOGYSPECIMENTYPE|C|CLIENTSPECIMENID|
   P|01|02|LEUKEMIA|M|R|TREATINGPHYSICIANLASTNAME|TREATPFIRSTNAME|TREATMIDDL
```

ENAME|V|LTE2CM|N|PROCUREMENT FACILITY|100 MAINSTREET|SUITE 100|NEW

ZPM|1|COMPONET|BRAND|DOSAGE|FREQUENCY|308416^ASPIRIN^RXNORM|N|N|<CR><LF>SPM|1|A|||||ABDMN^ABDOMEN^L|R^RIGHT^L~INN^INNER^L~UPP^UPPER^L|||||SPECIMEN

YORKINY|10001|JONES|MARY|ANN|1112223333|1112224444<CR>

DESCRIPTION|||201304301201<CR><LF>

5.3 Guide to formatting Order messages

The following table provides information on formatting an order message.

General Notes regarding Orders:

- All information should be provided in Upper Case. Data received in mixed or lowercase may be returned in upper case.
- Do not send fields marked Unused. LabCorp reserves the right to use these in the future.
- The following segments are required on all Orders: MSH, PID, GT1, ORC, OBR

5.3.1 MSH Segment - Message Header

- MSH segments can be sent multiple times within a file; however LabCorp can not handle more than 999 MSH segments per file.
- Each MSH segment must be unique to a patient. One Patient per MSH.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
MSH-0		Segment Type ID	R	3	
		Use: To identify the segment			
		• 'MSH'			
		The ending delimiter in this field ' ' is the first character of the next field.			
		The fourth character and the ninth character in the file must match. Both should be the field delimiter ' '.			
MSH-1	00001	Field Delimiter	R	1	
		Use: To separate fields			
		• "			
MSH-2	00002	Component Delimiter	R	1	
		Use: To separate components			
		• "Λ			
		Repeat Delimiter	R	1	
		Use: To identify repeating fields			
		• '~'			
		Escape character	R	1	
		Use: To identify when a delimiter is used as data and not as a delimiter			
		• "\"			
		Sub-component delimiter	R	1	
		Use: To separate sub-components			
		• '&'			
MSH-3	00003	Sending Application (LCS Vendor Mnemonic)	R	15	1
		Use: To identify vendor for routing purposes through LCS			
		Alpha, Numeric, or Special Characters			
		Assigned by LabCorp and used for translations			
MSH-4	00004	Sending Facility (Client Site ID)	R	10	
		Use: To identify client			
		Alpha, Numeric, or Special Characters			
		Assigned by LabCorp and used for routing purposes			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
MSH-5	00005	Receiving Application	R	15	Delimiter
		Use: To identify the LabCorp System receiving the orders. More could be added in the future.			,
		'1100' - LabCorp Lab System			
		'DIANON' - DIANON Pathology Systems			
		'EGL' – Esoterix Genetic Laboratories (May apply to Integrated Oncology or Integrated Genetics)			
		For backward compatibility only: 'PSC' 'CMBP' 'LITHOLINK' 'USLABS' 'ADL''			
MSH-6	00006	Receiving Facility (Responsible Lab Code)	R	10	- 1
		Use: For routing throughout LabCorp systems and to identify the LabCorp laboratory responsible for the client. It could be a LabCorp assigned 'Responsible Lab Code' representing the responsible laboratory or it could be a CLIA number.			
		Alpha, Numeric, or Special Characters			
		LabCorp assigned code representing the responsible laboratory			
		Originally 2 positions; however, a lab code can be up to 5-positions and a CLIA number can be 10 positions			
MSH-7	00007	Date/Time of Message Use: Record of the date and time the electronic order was created.	R	12	I
		Numeric Characters			
		Format: YYYYMMDDHHMM			
MSH-8	80000	Security	U	N/A	1
		Not currently saved, used, or returned			
MSH-9	00009	Message Type	R	3	1
		Use: To identify an order			
		'ORM'			
MSH-10	00010	Message Control ID	R	20	- 1
		Use: Message identifier.			
		Alpha and Numeric characters			
MSH-11	00011	Processing ID	R	1	I
		Use: To identify 'Production' order			
		• 'P'			
MSH-12	00012	Version of HL7 utilized for the format of this data structure	R	8	<cr></cr>
		Use: To identify HL7 specification version			
		• '2.3' - Release 2.3			

5.3.2 PID Segment - Patient Identification

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
PID-0		Segment Type ID	R	3	I
		Use: To identify the segment			
		• 'PID'			
PID-1	00104	Sequence Number	R	4	I
		Use: To identify the number of the PID segment within the order message. Since LabCorp only allows one patient per order message, LabCorp only allows one PID segment per order message.			
		'1' (leading zeroes will not be sent)			
PID-2	00105	External Patient ID	R	20	1
		Use: Client assigned Patient Identifier used for matching the results and by some clients on monthly invoices.			
		Alpha, Numeric, or Special Characters			
		Depending on reporting setups, PID-2 and PID-4 could be returned in a different field than where they were sent in. PID-2 could be returned in PID-4 and vice versa.			
PID-3	00106	Lab Assigned Patient Id	UO	11	1
		Use: LabCorp Assigned Specimen Number. Used in outbound file only.			
		Alpha, Numeric, or Special Characters			
PID-4	00107	Alternate Patient ID	0	20	ı
		Use: Client assigned Patient Identifier			
		Alpha, Numeric, or Special Characters			
		Depending on reporting setups, PID-2 and PID-4 could be returned in a different field than where they were sent in. PID-2 could be returned in PID-4 and vice versa.			
PID-5	00108	5.1	R	25	٨
		Patient Last Name			
		Use: Patient identifier			
		Alpha Characters			
		5.2	R	15	۸
		Patient First Name			
		Use: Patient identifier			
		Alpha Characters			
		5.3	0	15	- 1
		Patient Middle Name			
		Use: Patient identifier			
		Alpha Characters			
PID-6	00109	Mother's Maiden Name	U	N/A	1
		Not currently saved, used, or returned			
PID-7	00110	7.1	R	8	۸
		Patient Date of Birth			
		Use: For patient demographic purposes, for Billing, when a Patient Service Center will be used, and for some tests that require age for calculation of result.			
		Numeric Characters			
		Format: YYYYMMDD			
		7.2	F	3	٨
		Patient Age Years			
		Use: For patient demographic purposes. For future use, when Date of Birth is not sent, and for some tests that require age for calculation of result.			
		Numeric Characters			
		Field should contain three characters (right justified 0 fill)			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		7.3	F	2	^
		Patient Age Months			
		Use: For patient demographic purposes. For future use, when Date of Birth is not sent, and for some tests that require age for calculation of result.			
		Numeric Characters			
		Field should contain two characters (right justified 0 fill)			
		7.4 Patient Age Days	F	2	I
		Use: For patient demographic purposes. For future use, when Date of Birth is not sent, and for some tests that require age for calculation of result.			
		Numeric Characters			
		Field should contain two characters (right justified 0 fill)			
PID-8	00111	Patient Gender	R	1	
		Use: For Patient demographics, for Third Party Bill, and for certain test procedures that require gender for calculation of result.			'
		• 'M' or '1' – Male			
		• 'F' or '0' – Female			
		'N' – Not Indicated			
		'1' and '0' are for backward compatibility only			
PID-9	00112	Patient Alias	U	N/A	I
		Not currently saved, used, or returned			
PID-10	00113	Patient Race	С	6	1
		Use: Race is required for certain test procedures. If maternal serum screening testing will be supported through the interface, this field is required.			
		• 'A' – Asian			
		'B' – Black or African American			
		'C' –White / Caucasian			
		'H' – Hispanic (for future use see PID-22 for Ethnicity)			
		'I' – American Indian or Alaskan Native			
		'O' – Other Race			
		'X' – Race Not Indicated			
		'J' – Ashkenazi Jewish (only for Integrated Genetics)			
		'S' – Sephardic Jewish (only for Integrated Genetics)			
PID-11	00114	11.1	R	35	۸
		Patient Address (Line 1)			
		Use: For patient demographic purposes, for Patient and Third Party Bill, and for Blood Lead Testing.			
		Alpha, Numeric, or Special Characters			
		11.2	0	35	^
		Patient Address (Line 2)			
		Use: In Inbound file only, for patient demographic purposes, for Patient and Third Party Bill, and for Blood Lead Testing when the Patient Address has a second line. If received it will be concatenated with PID-11.1 up to 35 characters.			
		Alpha, Numeric, or Special Characters			
		11.3	R	16	٨
		Patient City			
		Use: For patient demographic purposes, for Patient and Third Party Bill, and for Blood Lead Testing.			
		Alpha Characters			

Order Wessage Forma					
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		11.4	R	2	٨
		Patient State or Province			
		Use: For patient demographic purposes, for Patient and Third Party Bill, and for Blood Lead Testing.			
		Upper case state abbreviation			
		11.5	R	9	
		Patient Zip or Postal Code			
		Use: For patient demographic purposes, for Patient and Third Party Bill, and for Blood Lead Testing. LabCorp prefers to receive ZIP codes without dashes; however they will be added on result. If a dash is sent, it will not be stored in the system. LabCorp accepts a 5-position or 9-position ZIP code.			
		Numeric Character and Special Characters			
		• Format: ########			
PID-12	00115	Patient County Code	U	N/A	I
		Not currently saved, used, or returned			
PID-13	00116	13.1	R	10	^
		Patient Phone Number			
		Use: For patient demographic purposes, for Patient, Client, and Third Party Bill, and for certain test procedures including Blood Lead Testing. LabCorp prefers to receive phone numbers without dashes or parentheses; however they will be added on result. If dashes or parentheses are sent, they will not be stored in the system.			
		Numeric Characters			
		13.2	С	3	۸
		Telecommunication Use Code			
		Use: Required when Communication Address is provided in PID-13.4.			
		• 'NET'			
		13.3	С	8	^
		Telecommunication Equipment Type			
		Use: Required when Communication Address is provided in PID-13.4.			
		'Internet'			
		13.4 Communication Address	С	64	I
		Use: To collect patient email address. Required for certain tests which necessitate communication with the patient. This may be expanded to 254 characters in the future.			
		Alpha, Numeric, or Special Characters			
PID-14	00117	Patient Work Phone Number	U	N/A	I
		Not currently saved, used, or returned			
PID-15	00118	Language – Patient	U	N/A	
DID 40	00110	Not currently saved, used, or returned Potions Marital Status		NI/A	,
PID-16	00119	Patient Marital Status Not currently saved, used, or returned	U	N/A	
PID-17	00120	Not currently saved, used, or returned Patient Religion	U	N/A	1
PID-17	00120	Not currently saved, used, or returned		IN/A	'
PID-18	00121	18.1	R	8	۸
LID-10	00121	Account Number		0	
		Use: For client identification purposes and for electronic data retrieval.			
		Alpha, Numeric, or Special Characters			
		LabCorp Client ID is the client's eight-digit account number. The client's Salesperson or Account Manager assigns this to the client.			
		Dianon Pathology Client Account Code is the client's seven character alpha numeric physician code. The client's Salesperson or Account Manager assigns this to the client.			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segmen Delimite
		18.2	U	N/A	^
		Check Digit			
		Not currently saved, used, or returned			
		18.3	U	N/A	٨
		Check Digit Scheme			
		Not currently saved, used, or returned			
		18.4	R	5	٨
		Bill Type			
		Use: To determine responsible "Bill to" party. Any additional bill types must be approved by LabCorp. This value must reflect how the lab order is to be billed.			
		• 'C' – Client			
		• 'P' – Patient			
		'T' – Third Party			
		Customer Contract Bill – LabCorp assigned values will be used when customer contract scenarios (e.g. indigent, sliding scale, or grant funding) cannot be sent as Third Party with an IN1 segment. Values will be determined during interface implementation if applicable for the project. Customer-Contract codes will be Practice-specific. Refer to Section 4 Billing Information.			
		18.5	U	N/A	٨
		ABN Flag			
		Not currently saved, used, or returned			
		18.6	UO	1	۸
		Status of Specimen			
		Use: Indication of Preliminary or Final report. Required except for Integrated Oncology and Integrated Genetics. Integrated Oncology and Integrated Genetics do not use this field so for them it will be empty. Used in outbound file only.			
		'P' – Preliminary			
		• 'F' – Final			
		blank			
		18.7	UO	1	- 1
		Fasting			
		Use: Patient demographics. Required for certain test procedures. Used in outbound file only.			
		• 'Y' – Yes			
		• 'N' – No			
		blank			
PID-19	00122	Patient SSN Number. For Backward Compatibility Only.	В	9	- 1
		Use: For patient demographic purposes. If provided on the order it will be returned with the result. Send as 9 digits without dashes.			
		Numeric Characters			
PID-20	00123	Driver's License Number - Patient	U	N/A	
		Not currently saved, used, or returned			
PID-21	00124	Mother's Identifier	U	N/A	1
		Not currently saved, used, or returned			
PID-22	00125	Ethnic Group	F	1	<cr></cr>
		Use: To determine if the patient is of Hispanic origin. For future use.			
		'H' – Hispanic or Latino			
		'N' – Not Hispanic or Latino			
		• 'U' - Unknown			<u></u>

5.3.3 NK1 Segment - Next of Kin / associated parties segment

• The NK1 segment (Parent/Guardian information) is required when a child (less than 17) specimen(s) are sent.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
NK1-0	N/A	Segment Type ID	R	3	- 1
		Use: To identify the segment			
		• 'NK1'			
NK1-1	00190	Sequence Number	R	4	I
		Use: To identify the number of the NK1 segment within the order message. LabCorp only accepts one NK1 segment per order message.			
		'1' (leading zeroes will not be sent)			
NK1-2	00191	2.1	R	25	٨
		Next of Kin Family Name (Last Name)			
		Use: To identify next of Kin.			
		Alpha and Special Characters			
		2.2	R	15	٨
		Next of Kin Given Name (First Name)			
		Use: To identify next of Kin.			
		Alpha Characters			
		2.3	0	15	٨
		Next of Kin Second and further given name or initials (Middle Name)			
		Use: To identify next of Kin.			
		Alpha Characters			
		2.4	U	N/A	٨
		Next of Kin Suffix (e.g., JR. or III)			
		Not currently saved, used, or returned			
		2.5	U	N/A	
		Next of Kin Prefix (e.g., DR)			
NII/4 0	00400	Not currently saved, used, or returned			
NK1-3	00192	Next of Kin Relationship	R	3	
		Use: To identify the relationship to the patient. Currently LabCorp is only collecting guardian information.			
	22.422	'GRD' - Guardian			
NK1-4	00193	4.1	R	35	٨
		Next of Kin Address (Line 1)			
		Use: To define Next of Kin Address (Line 1).			
		Alpha, Numeric, or Special Characters	0	25	۸
		4.2 Next of Kin Address (Line 2)	0	35	
		Use: To define Next of Kin Address (Line 2).			
		Alpha, Numeric, or Special Characters			
		4.3	R	16	٨
		Next of Kin City		'0	
		Use: To define Next of Kin City.			
		Alpha Characters			
		4.4	R	2	٨
		Next of Kin State or Province		-	
		Use: To define Next of Kin State or Province.			
		Upper case state abbreviation			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		4.5	R	9	ı
		Next of Kin Zip or Postal Code			
		Use: To define Next of Kin Zip or Postal Code. LabCorp prefers to receive ZIP codes without dashes; however they will be added on result. If a dash is sent, it will not be stored in the system.			
		Numeric Characters			
		Note: LabCorp accepts a 5-position or 9-position ZIP code.			
NK1-5	00194	Next of Kin Phone Number	R	10	<cr></cr>
		Use: To define Next of Kin Phone Number. LabCorp prefers to receive phone numbers without dashes or parentheses; however they will be added on result. If dashes or parentheses are sent, they will not be stored in the system.			
		Numeric Characters			

5.3.4 ZCC Segment – Courtesy Copy

- LabCorp will send a copy of the results to the patient, to a FAX, or to an account.
- Only four courtesy copies are allowed per message (up to four ZCC-1 fields can be sent).
- Do not submit duplicate account numbers or FAX numbers.
- Only one P type per message. Will be delivered through portal or by mail.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZCC-0	N/A	Segment Type ID	R	3	
		Use: To identify the segment			
		• 'ZCC'			
ZCC-1	N/A	1.1	R	1	٨
		Туре			
		Use: To identify where the copy will be sent.			
		'A' – Account Number (Delivered to FAX number in account record)			
		'F' – FAX Number			
		'P' – Patient/Responsible Party (Delivered through portal or by mail)			
		1.2	С	20	٨
		Text			
		Use: To Identify the account number or the FAX number.			
		Alpha, Numeric, or Special Characters			
		Required for types A and F and should not be supplied for type P			
		Do not submit parentheses or dashes in the FAX number			
		1.3	С	30	~ or
		Attention Line			<cr></cr>
		Use: To Identify the recipient.			
		Alpha, Numeric, or Special Characters			
		Required for types A and F and should not be supplied for type P			

5.3.5 IN1 Segment – Insurance

- The IN1 segment is required for third party bill.
- LabCorp can only accept 2 IN1 segments per MSH.
- When Multiple IN1 segments are sent the primary insurance should be sent first.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
IN1-0		Segment Type ID	R	3	1
		Use: To identify the segment			
		• 'IN1'			
IN1-1	00426	Sequence Number	R	4	1
		Use: To identify the number of the IN1 segment within the order message. Up to two IN1 segments may be sent per order message. When the patient has secondary insurance, a second IN1 segment should be sent.			
		Beginning at '1' through '2 (leading zeroes will not be sent).			
IN1-2	00368	Insurance Plan ID	U	N/A	-
		Not currently saved, used, or returned			
IN1-3	00428	3.1	0	30	٨
		Insurance Company Identification Number			
		Use: The Client's or Vendor's Unique Identifier used to identify the appropriate insurance company.			
		Alpha, Numeric, or Special Characters			
		3.2	С	5	1
		Insurance Payer Code			
		Use: LabCorp assigned value which identifies customer-specific billing exceptions; a payer code is not needed for most 'standard' insurances, however there may be special billing exceptions that require the use of this field.			
		Alpha, Numeric, or Special Characters			
IN1-4	00429	Insurance Company Name	R	30	1
		Use: To identify the appropriate Insurance company.			
		Alpha, Numeric, or Special Characters			
IN1-5	00430	5.1	R	35	٨
		Insurance Company Address (Line 1)			
		Use: To identify the appropriate Insurance company.			
		Alpha, Numeric, or Special Characters			
		5.2	0	35	٨
		Insurance Company Address (Line 2)			
		Use: To identify the appropriate Insurance company. Can be sent if there is a second line in the address. If received it will be concatenated with IN1-5.1 up to 35 characters.			
		Alpha, Numeric, or Special Characters			
		5.3	R	16	٨
		Insurance Company City			
		Use: To identify the appropriate Insurance company.			
		Alpha Characters			
		5.4	R	2	٨
		Insurance Company State			
		Use: To bill to the appropriate Insurance company.			
		Upper case state abbreviation			

		Order Wessage i Ormat						
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter			
		5.5	R	9	I			
		Insurance Company Zip Code						
		Use: To bill the appropriate Insurance company. LabCorp prefers to receive ZIP codes without dashes; however they will be added on result. If a dash is sent, it will not be stored in the system.						
		Numeric Characters						
		LabCorp accepts a 5-position or 9-position ZIP code.						
IN1-6	00431	Insurance Company Contact Name	U	N/A	I			
		Not currently saved, used, or returned						
IN1-7	00432	Insurance Company Phone Number	U	N/A	I			
		Not currently saved, used, or returned						
IN1-8	00433	Group Number of Insured Patient	С	15	I			
		Use: Group Number must be sent if it exists. Required for some carriers.						
1014.0		Alpha, Numeric, or Special Characters						
IN1-9	00434	Group Name	U	N/A				
		Not currently saved, used, or returned						
IN1-10	00435	Insured's Group Employer ID	U	N/A	I			
		Not currently saved, used, or returned						
IN1-11	00436	Insured's Group Employer Name	С	15				
		Use: Employer Name should be sent if it is available. Required for some carriers.						
		Alpha, Numeric, or Special Characters						
IN1-12	00437	Plan Effective Date / Time	U	N/A	I			
		Not currently saved, used, or returned						
IN1-13	00438	Plan Expiration Date / Time	U	N/A				
		Not currently saved, used, or returned						
IN1-14	00439	Authorization Information	U	N/A	1			
		Not currently saved, used, or returned						
IN1-15	00440	Plan Type Use: Designation of the insurance type this IN1 segment supports; also identifies the policy number contained in IN1-36. Plan Type will not repeat. If more than one was billed, one IN1 segment will be sent for each plan. For backward compatibility only, because of new billing logic that determines the plan type. 'MD' – indicates field IN1-36 is a Medicaid number 'MC' - indicates field IN1-36 is a HMO insurance number 'PI' - indicates field IN1-36 is a private insurance number	В	2				
IN1-16	00441	16.1	F	25	٨			
	00111	Last Name Of Insured (Policy Holder Last Name) Use: Policy Holder identifier Alpha Characters		25				
		16.2	F	15	۸			
		First Name Of Insured (Policy Holder First Name)						
		Use: Policy Holder identifier						
		Alpha Characters						
		16.3	F	15	ı			
		Middle Name Of Insured (Policy Holder Middle Name)		.	'			
		Use: Policy Holder identifier						
		Alpha Characters						

			Order Wessage Forma			
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter	
IN1-17	00442	Insured's Relationship to Patient	R	1	1	
		Use: To identify the relationship of the Policy Holder to the patient. For				
		demographic purposes. If a value is received in both IN1-17 and GT1-11, the IN1-17 value is stored and If no value is received in IN1-17, the GT1-11				
		value is stored.				
		• '1' – Self				
		• '2' – Spouse				
		• '3' – Other				
IN1-18	00443	Insured's Date of Birth	U	N/A	I	
		Not currently saved, used, or returned	_			
IN1-19	00444	19.1	F	35	۸	
		Insured's Address (Line 1)				
		Use: Policy Holder Demographics. For future use.				
		Alpha, Numeric, or Special Characters	F	25	۸	
		19.2 Insured's Address (Line 2)	F	35	^	
		Use: Policy Holder Demographics. For future use. If received it will be				
		concatenated with IN1-19.1 up to 35 characters.				
		Alpha, Numeric, or Special Characters				
		19.3	F	16	٨	
		Insured's City				
		Use: Policy Holder Demographics. For future use.				
		Alpha Characters				
		19.4	F	2	٨	
		Insured's State				
		Use: Policy Holder Demographics. For future use.				
		Upper case state abbreviation				
		19.5	F	9	- 1	
		Insured's Zip Code				
		Use: Policy Holder Demographics. For future use.				
		Numeric Characters				
		LabCorp accepts a 5-position or 9-position ZIP code.				
IN1-20	00445	Assignment of Benefits	U	N/A	ı	
		Not currently saved, used, or returned				
IN1-21	00446	Coordinator of Benefits	U	N/A	ı	
1114 00	00447	Not currently saved, used, or returned Detugned Page		NI/A		
IN1-22	00447	Primary Payor	U	N/A	ı	
IN 4 22	00440	Not currently saved, used, or returned Notice of Admission Code	U	NI/A		
IN1-23	00448	Notice of Admission Code		N/A	ı	
INI4 24	00449	Not currently saved, used, or returned Notice of Admission Date / Time	U	N/A		
IN1-24	00449	Not currently saved, used, or returned		IN/A	1	
IN1-25	00450	Report of Eligibility Flag	U	N/A	1	
1141723	00400	Not currently saved, used, or returned		13/7	'	
IN1-26	00451	Report of Eligibility Date/Time	U	N/A	ı	
	50-01	Not currently saved, used, or returned		19/13	'	
IN1-27	00452	Release Information Code	U	N/A	ı	
	00402	Not currently saved, used, or returned			'	
IN1-28	00453	Pre-admit Certification	U	N/A	1	
20	33400	Not currently saved, used, or returned		1377	'	

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
IN1-29	00454	Verification Date/Time	U	N/A	
		Not currently saved, used, or returned			
IN1-30	00455	Verification By	U	N/A	I
		Not currently saved, used, or returned			
IN1-31	00456	Type of Agreement (Worker's Compensation Flag)	R	1	1
		Use: To identify whether or not this is a Worker's Compensation claim.			
		• 'Y' – Yes			
		• 'N' – No			
IN1-32	00457	Billing Status	U	N/A	
		Not currently saved, used, or returned			
IN1-33	00458	Lifetime Reserve Days	U	N/A	
		Not currently saved, used, or returned			
IN1-34	00459	Delay before Lifetime Reserve Days	U	N/A	
		Not currently saved, used, or returned			
IN1-35	00460	Company Plan Code	U	N/A	
		Not currently saved, used, or returned			
IN1-36	00461	Policy Number (Insurance Number/Subscriber Number/Member ID)	R	25	<cr></cr>
		Use: required for the proper identification of Insured.			
		Alpha, Numeric, or Special Characters			

5.3.6 GT1 Segment – Guarantor

• GT1 segment is always required regardless of bill type.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
GT1-0		Segment Type ID	R	3	1
		Use: Identify the segment			
		• 'GT1'			
GT1-1	00405	Sequence Number	R	4	- 1
		Use: To identify the number of the GT1 segment within the order message. LabCorp only supports one GT1 segment per patient.			
		'1' (leading zeroes will not be sent).			
GT1-2	00406	Guarantor Number	U	N/A	1
		Not currently saved, used, or returned			
GT1-3	00407	3.1	R	12	٨
		Guarantor Last Name			
		Use: Responsible party identifier.			
		Alpha or Special Characters			
		Increased from 12 to 25 to facilitate matching patient name.			
		3.2	R	9	٨
		Guarantor First Name			
		Use: Responsible party identifier.			
		Alpha or Special Characters			
		Increased from 9 to 15 to facilitate matching patient name.			
		3.3	0	1	1
		Guarantor Middle Initial			·
		Use: Responsible party identifier.			
		Alpha Character			
GT1-4	00408	Guarantor Spouse Name	U	N/A	1
		Not currently saved, used, or returned			
GT1-5	00409	5.1	R	35	٨
		Guarantor Address (Line 1)			
		Use: Responsible party demographics.			
		Alpha, Numeric, or Special Characters			
		5.2	0	35	٨
		Guarantor Address (Line 2)			
		Use: Responsible party demographics. Can be sent if the Guarantor Address has a second line. If received it will be concatenated with GT1-5.1 up to 35 characters.			
		Alpha, Numeric, or Special Characters			
		5.3	R	16	٨
		Guarantor City			
		Use: Responsible party demographics.			
		Alpha Characters			
		5.4	R	2	٨
		Guarantor State			
		Use: Responsible party demographics.			
		Upper case state abbreviation			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		5.5	R	9	I
		Guarantor Zip Code			
		Use: Responsible party demographics. LabCorp prefers to receive ZIP codes without dashes; however they will be added on result. If a dash is sent, it will not be stored in the system.			
		Numeric Characters			
		LabCorp accepts a 5-position or a 9-position ZIP code.			
GT1-6	00410	Guarantor Phone Number	R	10	I
		Use: For demographic purposes and for Third Party Bill. This phone number can be the Guarantor's or the Patient's phone number. LabCorp prefers to receive phone numbers without dashes or parentheses; however they will be added on result. If dashes or parentheses are sent, they will not be stored in the system. • Numeric Characters			
		Numeric Characters			
GT1-7	00411	Guarantor Work Phone Number	U	N/A	I
		Not currently saved, used, or returned			
GT1-8	00412	Guarantor DOB	U	N/A	ı
		Not currently saved, used, or returned			
GT1-9	00413	Guarantor Gender	U	N/A	I
		Not currently saved, used, or returned			
GT1-10	00414	Guarantor Type	U	N/A	I
		Not currently saved, used, or returned			
GT1-11	00415	Guarantor Relationship to Patient	R	1	ı
		Use: To identify the relationship of the patient to the guarantor. For demographic purposes. If a value is received in both IN1-17 and GT1-11, the IN1-17 value is stored and if no value is received in IN1-17, the GT1-11 value is stored.			
		• '1' – Self			
		• '2' – Spouse			
		• '3' – Other			
GT1-12	00416	Guarantor ID Number (Social Security Number)	U	N/A	ı
		Not currently saved, used, or returned			
GT1-13	00417	Guarantor Date / Time – Begin	U	N/A	ı
		Not currently saved, used, or returned			
GT1-14	00418	Guarantor Date / Time – End	U	N/A	
		Not currently saved, used, or returned			
GT1-15	00419	Guarantor Priority	U	N/A	I
		Not currently saved, used, or returned			
GT1-16	00420	Guarantor's Employer Name	С	15	<cr></cr>
		Use: For demographic purposes and for Worker's Compensation claims. Required when IN1-31 Type of Agreement (Worker's Compensation Flag) is 'Y' - Yes.			
		Alpha, Numeric, or Special Characters			

5.3.7 DG1 Segment - Diagnosis

Required for Third Party Bill.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
DG1-0		Segment Type ID	R	3	
		Use: To identify the segment			
		• 'DG1'			
DG1-1	00375	Sequence Number	R	4	
		Use: To identify the number of the DG1 segment within the order message.			
		Beginning at '1' through '120', sequentially (leading zeroes will not be sent).			
DG1-2	00376	Diagnosis Coding Method	В	2	1
		Use: To indicate an ICD-9 code. For backward compatibility only, as of HL7 version 2.3, use the components of DG1-3.			
		• '19' - ICD9			
DG1-3	00377	3.1	R	10	٨
		Diagnosis Code Identifier			
		Use: Physician's indication of patient's diagnosis, which is used by some payors to validate the need for ordering laboratory procedures.			
		Alpha, Numeric, or Special Characters			
		3.2	0	49	٨
		Diagnosis Code Text Description			
		Use: To describe the diagnosis.			
		Alpha, Numeric, or Special Characters			
		3.3	R	3	<cr></cr>
		Name of Coding System			
		Use: To Identify the Coding System.			
		• '110' - ICD-10			

5.3.8 ZCI Segment - Patient General Clinical Information Segment

- The ZCI segment is used for gathering LabCorp specific patient information important in the calculation of results.
- LabCorp only supports one ZCI segment per patient.
- If ZSA segment is sent, ZCI segment is required.

Patient race (PID-10) and patient weight (ZCI-2.1) must be sent in addition to the ZSA

segment for Maternal Serum Screening testing.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZCI-0	N/A	Segment Type ID	R	3	- 1
		Use: To identify the segment			
		• 'ZCI'			
ZCI-1	N/A	Height (inches)	С	6	- 1
		Use: In specific testing procedures in calculation of result. Required for Biometric Screening.			
		Numeric characters and decimal			
		• Format: ###.##			
ZCI-2	N/A	2.1	С	5	٨
		Weight (pounds)			
		Use: In specific testing procedures in calculation of result. Required If maternal serum screening testing will be supported through the interface and for Biometric Screening.			
		Numeric characters and decimal			
		• Format: ###.#			
		If decimal weight is submitted, ounces shall not be submitted.			
		2.2	В	10	٨
		Weight unit of measure			
		Use: Indication of unit of measure. For backward compatibility only.			
		'LBS' - Pounds			
		2.3	С	2	1
		Weight (ounces)			
		Use: In specific testing procedures in calculation of result. Required for certain test procedures.			
		Numeric Characters			
		Only submit ounces when pounds in ZCI-2.1 is a whole number.			
ZCI-3	N/A	3.1	С	4	٨
		Collection/Urine Volume Quantity/Field Value (milliliters)			
		Use: In specific testing procedures in calculation of result			
		Numeric Characters			
		Collection/Urine Volume may also be sent in the OBR-9 segment. If a value is received in both ZCI-3.1 and OBR-9.1, the ZCI-3.1 value overwrites the OBR-9.1 value.			
		Assumed unit of measure is milliliters (mL).			
		Required for certain test procedures.			
		3.2	В	10	I
		Collection/Urine Volume Units/Unit of Measure			
		Use: Indication of unit of measure. For backward compatibility only.			
		Alpha, Numeric, or Special Characters			

		Order Me	Jooug	<u> </u>	
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZCI-4	N/A	Fasting	С	1	I
		Use: In specific testing procedures in calculation of result.			
		• 'Y' – Yes			
		• 'N' – No			
		Required for certain test procedures.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCI-5	N/A	Waist Measurement (inches)	С	5	1
		Use: In specific testing procedures in calculation of result. Required for Biometric Screening and desirable for all orders.			
		Numeric characters and decimal			
		• Format: ###.#			
ZCI-6	N/A	6.1	С	3	٨
		Blood Pressure Systolic			
		Use: In specific testing procedures in calculation of result. Required for Biometric Screening and desirable for all orders.			
		Numeric characters			
		(3 digits whole number)			
		• Format: ###			
		6.2	С	3	1
		Blood Pressure Diastolic			
		Use: In specific testing procedures in calculation of result. Required for Biometric Screening and desirable for all orders.			
		Numeric characters			
		(3 digits whole number)			
		• Format: ###			
ZCI-7	N/A	Pulse	С	3	1
		Use: In specific testing procedures in calculation of result. Required for Biometric Screening and desirable for all orders.			
		Numeric characters			
		(3 digits whole number)			
		• Format: ###			
ZCI-8	N/A	Patient email	С	64	1
		Use: To collect patient email address. Required for certain tests which necessitate communication with the patient when the email can not be sent in PID-13.4. This may be expanded to 254 characters in the future.			
		Alpha, Numeric, or Special Characters			
ZCI-9	N/A	Due Date:	С	8	1
		Use: Expected Due Date of child. Required if PreTRM Test is ordered.			
		Format: YYYYMMDD			
ZCI-10	N/A	10.1	С	5	٨
		Pre-Pregnancy Weight (pounds)			
		Use: Pre-pregnancy weight of mother. Required if PreTRM Test is ordered.			
		Numeric characters and decimal			
		• Format: ###.#			
		If decimal weight is submitted, ounces shall not be submitted.			
		10.2	С	2	<cr></cr>
		Pre-Pregnancy Weight (ounces)			
		Use: Pre-pregnancy weight of mother. Required if PreTRM Test is ordered and pre-pregnancy pounds is a whole number.			
		Numeric Characters			
		Only submit ounces when pounds in ZCI-10.1 is a whole number.			

5.3.9 ORC Segment - Common Order Segment

• ORC and OBR segments are paired and some ORC fields are duplicated in the OBR.

At this time, LabCorp supports forty ORC segments per patient. If additional ORC segments

are sent, the information contained in those segments will be ignored.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ORC-0		Segment Type ID	R	3	- 1
		Use: To identify the segment			
		• 'ORC'			
ORC-1	00215	Order Control	R	2	- 1
		Use: To identify new orders			
		'NW' - New Order			
ORC-2	00216	2.1	R	30	۸
		Unique Foreign Accession or Specimen ID			
		Use: Client specific accessioning or specimen identification number.			
		Alpha, Numeric, or Special Characters			
		The value sent in this field should be the identification value sent on the specimen container.			
		Value received in this field should be unique per patient order, not per test order.			
		The Unique Foreign Accession/Specimen Identification values in ORC- 2 and OBR-2 segments must match.			
		Value in this field is used to receive the electronic order into the LabCorp Lab System.			
		2.2	0	6	1
		Application / Institution ID			
		Use: Client specific accessioning or specimen identification number.			
		Alpha, Numeric, or Special Characters			
ORC-3	00217	3.1	UO	11	۸
		Filler Accession ID			
		Use: LabCorp Assigned Specimen Number. Used in outbound file only. Reused on a yearly basis.			
		Alpha, Numeric, or Special Characters			
		3.2	UO	3	1
		Owner of Accession			
		Use: Constant value. Used in outbound file only.			
		• 'LAB'			
ORC-4	00218	Placer Group Number	U	N/A	I
		Not currently saved, used, or returned			
ORC-5	00219	Order Status	U	N/A	I
		Not currently saved, used, or returned			
ORC-6	00220	Response Flag	U	N/A	I
		Not currently saved, used, or returned			
ORC-7	00221	Quantity/Timing	U	N/A	I
		Not currently saved, used, or returned			
ORC-8	00222	Parent	U	N/A	I
		Not currently saved, used, or returned			
ORC-9	00223	Date/Time of Transaction	UO	12	I
		Use: Date and time of order entry in the LabCorp Lab System. Used in outbound file only.			
		Numeric Characters			
		Format: YYYYMMDDHHMM			
		The time returned in this field will always be four zeroes (0000).			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ORC-10	00224	Entered By Not currently saved, used, or returned	U	N/A	I
ORC-11	00225	Verified By	U	N/A	I
ORC-12	00226	Not currently saved, used, or returned 12.1 Ordering Provider ID Number	С	10	۸
		Use: Identifies the Authorizing/Billing provider. Used by certain vendor systems for matching. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information. NPI is required for all orders to identify the provider authorizing the test and/or authorizing the billing.			
		Alpha, Numeric, or Special Characters			
		12.2	С	25	^
		Ordering Provider Last Name			
		Use: Physician/Provider identification. Required if ORC-12.1 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information.			
		Alpha Characters			
		Inbound only nine characters are accepted for the last name but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 25 characters.			
		Do not include Suffix or Degree.			
		12.3	С	15	۸
		Ordering Provider First Initial			
		Use: Physician/Provider identification. Required if ORC-12.2 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information.			
		Alpha Characters			
		Inbound only one character is accepted for the first initial but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 15 characters.			
		12.4	UO	15	۸
		Ordering Provider Middle Initial			
		Use: Physician/Provider identification. Used in outbound file only. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information.			
		Alpha Characters			
		Not accepted inbound but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 15 characters.			
		12.5	U	N/A	^
		Ordering Provider Suffix (e.g., JR. or III)			
		Not currently saved, used, or returned			
		12.6	U	N/A	۸
		Ordering Provider Prefix (e.g., DR)			
		Not currently saved, used, or returned			
		12.7	U	N/A	۸
		Ordering Provider Degree (e.g., MD)			
		Not currently saved, used, or returned			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		12.8	С	1	~ or
		Source Table			
		Use: Identification of Ordering Provider ID Number sent in ORC-12.1. Required on orders if ORC-12.1 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information. NPI is required for all orders to identify the provider authorizing the test and/or authorizing the billing.			
		'N' - NPI Number (Required for all orders regardless of bill type.)			
		'L' - Local (Physician ID)			
		• 'U' - UPIN			
		'P' - Provider Number (Medicaid or Commercial Insurance Provider ID)			
		Note: For results only interfaces, this field is conditional depending on the source table being provided on the requisition.			
ORC-13	00227	Enterer's Location	U	N/A	I
		Not currently saved, used, or returned			
ORC-14	00228	Callback Phone Number	U	N/A	1
		Not currently saved, used, or returned			
ORC-15	00229	Order Effective Date/Time	U	N/A	1
		Not currently saved, used, or returned			
ORC-16	00230	16.1	U	N/A	۸
		Order Control Code Reason Identifier			
		Not currently saved, used, or returned			
		16.2	U	N/A	^
		Order Control Code Reason Text			
		Not currently saved, used, or returned			
		16.3	U	N/A	<cr></cr>
		Order Control Code Reason Name of Coding System			
		Not currently saved, used, or returned			

5.3.10 OBR Segment - Observation Order

• ORC and OBR segments are paired and some ORC fields are duplicated in the OBR.

At this time, LabCorp supports forty OBR segments per patient. If additional OBR segments

are sent, the information contained in those segments will be ignored

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
OBR-0		Segment Type ID	R	3	1
		Use: To identify the segment			
		• 'OBR'			
OBR-1	00237	Sequence Number	R	4	1
		Use: To identify the OBR segment number. At this time, only forty OBR segments per patient are supported inbound. If additional OBR segments are sent in the order, the information contained in those segments will be ignored.			
		Beginning at '1' through '40', sequentially (leading zeroes will not be sent).			
OBR-2	00216	2.1	R	30	٨
		Unique Foreign Accession / Specimen ID			
		Use: Client specific accessioning or specimen identification number.			
		Alpha, Numeric, or Special Characters			
		The value sent in this field should be the identification value sent on the specimen container.			
		Value received in this field should be unique per patient order, not per test order.			
		The Unique Foreign Accession/Specimen Identification values in ORC-2 and OBR-2 segments must match.			
		Value in this field is used to receive the electronic order into the LabCorp Lab System.			
		2.2	UO	3	1
		Application / Institution ID			
		Use: Constant Value. Used in outbound file only.			
		• 'LAB'			
OBR-3	00217	3.1	UO	11	٨
		Internal Accession ID / LabCorp Specimen Number			
		Use: LabCorp Assigned Specimen Number. Reused on a yearly basis. Used in outbound file only.			
		Alpha, Numeric, or Special Characters			
		3.2	UO	3	I
		Application / Institution ID			
		Use: Constant value. Used in outbound file only.			
		• 'LAB'			
OBR-4	00238	4.1	R	15	٨
		Observation Battery Identifier			
		Use: For Orders this is the LabCorp test number that was ordered (normally six characters). For Results to identify the observation this can be LabCorp test number that was ordered (normally six characters), or a File Identifier (up to 15 characters).			
		Alpha, Numeric, or Special Characters			
		4.2	R	50	٨
		Observation Battery Text			
		Use: Name of test ordered			
		Alpha, Numeric, or Special Characters			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		4.3	R	2	I
		Name of Coding System			
		Use: Indicates a LabCorp or 'local' order code			
		'L' - Local Identifier (LabCorp Identifier)			
OBR-5	00239	Priority	U	N/A	1
		Not currently saved, used, or returned			
OBR-6	00240	Unused / Not Defined	U	N/A	1
		Not currently saved, used, or returned			
OBR-7	00241	Observation/Specimen Collection Date/Time	С	12	
		Use: Record of the date and time the specimen was collected.			
		Numeric Characters			
		Format: YYYYMMDDHHMM			
		Required if specimen is collected in-house. Usually submitted in order file or manually entered from req. If not submitted a problem code is attached.			
OBR-8	00242	Observation/Specimen Collection End Time	U	N/A	
		Not currently saved, used, or returned			
OBR-9	00243	9.1	С	4	۸
		Collection/Urine Volume (Quantity/Field Value)			
		Use: In specific testing procedures in calculation of result			
		Numeric Characters			
		If multiple OBR-9 values are sent, only the first occurrence will be stored and returned.			
		Collection/Urine Volume may be sent in the ZCI-3.1 and the OBR-9.1 segment. If a value is received in both ZCI-3.1 and OBR-9.1, the ZCI-3.1 value overwrites the OBR-9.1 value.			
		Assumed unit of measure is milliliters (mL)			
		Required for certain test procedures.			
		9.2	В	10	
		Collection/Urine Volume (Units/Unit of Measure)			
		Use: Indication of unit of measure. For backward compatibility only.			
		Alpha, Numeric, or Special Characters			
OBR-10	00244	Collector Identifier	U	N/A	1
		Not currently saved, used, or returned			
OBR-11	00245	Action Code	R	1	1
		Use: To identify a new order			
		'N' - New orders accompanying new specimen (original order)			
OBR-12	00246	Danger Code	U	N/A	1
		Not currently saved, used, or returned			'
OBR-13	00247	13.1	0	64	٨
02.1.10	002	Relevant Clinical Information.			
		Use: Informational purposes. The Clinical Information field has a limitation of only being able to store 62 characters. Any additional characters will be truncated. Up to two extra characters may be returned in the results.			
		Alpha, Numeric, or Special Characters			
		13.2	В	64	
		Relevant Clinical Information. For Backward Compatibility Only.			
		Use: Informational purposes			
		Alpha, Numeric, or Special Characters			

Order Wessage Form						
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter	
OBR-14	00248	Date/Time of Specimen Receipt in Lab	UO	12	1	
		Use: Date and time the order entry in LabCorp Lab System. Used in outbound file only.				
		Numeric Characters				
		Format: YYYYMMDDHHMM				
OBR-15	00249	Source of Specimen	С	26	1	
		Use: Identification of location specimen was obtained from the patient				
		Alpha, Numeric, or Special Characters				
		 If multiple OBR-15 values are sent, only the first occurrence will be stored and returned. 				
		Required for certain test procedures.				
		 For results may contain additional clinical comments from ZBL, OBR- 13, and NTEs. 				
		 As of version HL7 2.5, this field has been retained for backward compatibility only. In messages where the SPM segment is present, the use of SPM Specimen segment is favored over this field. 				
		 If a value is received in both OBR-15 and SPM-4.2, the SPM-4.2 value is stored. 				
OBR-16	00226	16.1	С	20	٨	
		Ordering Provider ID Number				
		Use: Identifies the Authorizing/Billing provider. Used by certain vendor systems for matching. NPI is required for all orders to identify the provider authorizing the test and/or authorizing the billing to a Third Party. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information.				
		Alpha, Numeric, or Special Characters				
		16.2	С	25	٨	
		Ordering Provider Last Name				
		Use: Physician/Provider identification. Required if OBR-16.1 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information.				
		Alpha Characters				
		Inbound only nine characters are accepted for the last name but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 25 characters.				
		Do not include Suffix or Degree.				
		16.3	С	15	٨	
		Ordering Provider First Initial				
		Use: Physician/Provider identification. Required if OBR-16.2 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information.				
		Alpha Characters				
ļ		Inbound only one character is accepted for the first initial but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 15 characters.				
		16.4	UO	15	٨	
		Ordering Provider Middle Initial				
		Use: Physician/Provider identification. Used in outbound file only. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information.				
		Alpha Characters				
		Not accepted inbound but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 15 characters.				

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		16.5	U	N/A	۸
		Ordering Provider Suffix (e.g., JR. or III)			
		Not currently saved, used, or returned			
		16.6	U	N/A	۸
		Ordering Provider Prefix (e.g., DR)			
		Not currently saved, used, or returned			
		16.7	U	N/A	^
		Ordering Provider Degree (e.g., MD)			
		Not currently saved, used, or returned			
		16.8	С	1	~ or
		Source Table			
		Use: Identification of Ordering Provider ID Number sent in OBR-16.1. NPI is required for all orders to identify the provider authorizing the test and/or authorizing the billing to a Third Party. Required on orders if OBR-16.1 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information.			
		'N' - NPI Number (Required for Third Party Bill.)			
		'L' - Local (Physician ID)			
		• 'U' - UPIN			
		'P' - Provider Number (Medicaid or Commercial Insurance Provider ID)			
		Note: For results only interfaces, this field is conditional depending on the source table being provided on the requisition.			
OBR-17	00250	Order Callback Phone Number	U	N/A	
		Not currently saved, used, or returned			
OBR-18	00251	Alternate Unique Foreign Accession / Specimen ID	0	11	1
		Use: Alternate client specific accessioning or specimen identification number			
		Alpha, Numeric, or Special Characters			
		If multiple OBR-18 values are sent, only the first occurrence will be stored and returned.			
OBR-19	00252	Requester Field 2	U	N/A	
		Not currently saved, used, or returned			
OBR-20	00253	20.1	UO	30	^
		Producer's Field 1			
		Use: Client specific accessioning or specimen identification number. If Discrete Microbiology Testing is ordered this field is required and is used to identify the 6 character Microbiology Organism Number. Used in outbound file only.			
		Alpha, Numeric, or Special Characters			
		20.2	UO	30	٨
		Microbiology Organism			
		Use: Required if Discrete Microbiology testing is ordered to identify the Microbiology Organism Name. Used in outbound file only.			
		Alpha, Numeric, or Special Characters			
		20.3	UO	1	I
		Name of Coding System			
		Use: Required if Discrete Microbiology testing is ordered and is a constant value. Used in outbound file only.			
		'L' – Local Identifier			
OBR-21	00254	Producer's Field 2	U	N/A	
		Not currently saved, used, or returned			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
OBR-22	00255	Date/Time Observations Reported	UO	12	
		Use: Identify the date and time the results were released from the LabCorp Lab System. Used in outbound file only.			
		Numeric Characters			
		Format: YYYYMMDDHHMM			
OBR-23	00256	Producer's Charge	U	N/A	I
		Not currently saved, used, or returned			
OBR-24	00257	Producer's Section ID	UO	5	I
		Use: Identification of LabCorp Facility responsible for performing the testing. Used in outbound file only.			
		Alpha, Numeric, or Special Characters			
		Required when the test is an ordered item. Panels, Super panels, and reflexes will not have a value Returned.			
		There will be at least one ZPS segment that contains information regarding this LabCorp Facility.			
OBR-25	00258	Order Result Status:	UO	1	-
		Use: Identification of status of results at the ordered item level. Used in outbound file only.			
		• 'F' – Final			
		'P' – Preliminary			
		'X' – Canceled			
		'C' – Corrected			
OBR-26	00259	26.1	UO	6	^
		Link to Parent Result or Organism Link to Susceptibility.			
		Use: Identifies the test that reflexes creating this lab-generated order. Organism Link to Susceptibility only applies to Discrete Microbiology. Required for reflex test. Used in outbound file only.			
		Alpha, Numeric, or Special Characters			
		26.2	UO	1	
		SubID Number			
		Use: Identifies the SubID Number of the parent result. Organism Link to Susceptibility only applies to Discrete Microbiology. Required for reflex test. Used in outbound file only.			
		Alpha, Numeric, or Special Characters			
OBR-27	00221	Quantity/Timing	U	N/A	
		Not currently saved, used, or returned			
OBR.28	00260	Courtesy Copies To	U	N/A	I
		Not currently saved, used, or returned			
		See ZCC segment for this functionality			
OBR.29	00261	Link to Parent Order	UO	6	<cr></cr>
		Use: Identifies the ordered item containing the test that caused the reflex. Used in outbound file only.			
		Alpha, Numeric, or Special Characters			
		Required for reflex test.			

5.3.11 ZAP Segment - Dianon Pathology

- This segment is used to gather specific information necessary for Dianon Pathology orders.
- This segment indicates the format of the data received from the vendor application.
- AOE questions need to be displayed, printed, and sent in the HL7 file in Rank order.
- The test requirements and pertinent content should be extracted from the Compendium.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZAP-0	N/A	Segment Type ID	R	3	- 1
		Use: To identify the segment			
		• 'ZAP'			
ZAP-1	N/A	Sequence Number	R	4	1
		Use: To identify the number of the ZAP segment per ORC/OBR pair.			
		Beginning at '1' through '9999', sequentially (leading zeroes will not be sent).			
ZAP-2	N/A	2.1	R	5	٨
		Question Key			
		Use: To provide the Question Key Code relating to the AOE prompt.			
		Alpha, Numeric, or Special Characters			
		2.2	R	20	- 1
		Question Description (Short Text)			
		Use: To provide the Description of the Question Text.			
		Alpha, Numeric, or Special Characters			
ZAP-3	N/A	Case Type	R	1	
		Use: To provide the AP Case or Specimen code pertaining to the question.			
		• 'C' - Case			
		'S' - Specimen			
ZAP-4	N/A	4.1	0	45	٨
		Response Code(s)			
		Use: To provide the answer code associated with the test.			
		Alpha, Numeric, or Special Characters			
		4.2	R	50	~ or
		Response Value			<cr></cr>
		Use: To provide a text description of the AP Answer Code(s).			
		Alpha, Numeric, or Special Characters			

5.3.12 ZBL Segment – Blood Lead

• The ZBL segment is used to gather specific information for purposes of reporting blood lead information to the state in which the patient resides.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZBL-0	N/A	Segment Type ID	R	3	
		Use: To identify the segment			
		• 'ZBL'			
ZBL-1	N/A	Patient Race	R	1	
		Use: Race selection for blood lead testing procedures.			
		'1' - White/Caucasian			
		'2' – Black or African American			
		'3' – American Indian or Alaska Native			
		• '4' –Asian			
		'5' – Other Race			
		'9' – Unknown/Not Indicated			
ZBL-2	N/A	Hispanic Heritage	R	1	- 1
		Use: Self- identification rather than scientific classification.			
		• '1' – Yes			
		• '2' – No			
		'3' – Unknown is for backward compatibility only			
		• '9' – Unknown			
ZBL-3	N/A	Blood Lead Type	R	1	I
		Use: Indication of how specimen was collected.			
		'V" – Venous (blood)			
		'F' – Finger stick (blood)			
		'U' – Urine is for backward compatibility only			
ZBL-4	N/A	Blood Lead Purpose	С	1	- 1
		Use: Indication of reason for testing. Required by some states.			
		• 'l' – Initial			
		'R' – Repeat			
		• 'F' – Follow-up			
ZBL-5	N/A	Blood Lead County – County code number	В	2	<cr></cr>
		Use: For state reporting of blood lead results. For backward compatibility only.			
		Alpha, Numeric, or Special Characters			
		Must be a minimum of 2 positions (right justified 0 fill). Example: If the county code is 1 then 01 should be sent.			
		'County Codes' are assigned by the state. Clients should know their county code identifier. If a client does not know their county code, they can contact their state local health department.			

5.3.13 ZCY Segment – Bethesda Cytology

 The ZCY segment is used to gather specific information necessary in reporting Bethesda cytology results.

cytolo	gy result	S.	•		
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZCY-0	N/A	Segment Type ID	R	3	1
		Use: To identify the segment			
		• 'ZCY'			
ZCY-1	N/A	Cervix (previously referred to as Cervical)	0	1	1
		Use: Gynecological Body Site			
		■ 'Y' – Yes			
		" 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-2	N/A	Endocervix (previously referred to as Endocervical)	0	1	1
		Use: Gynecological Body Site			
		■ 'Y' – Yes			
		■ 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-3	N/A	Labia-Vulva (for backward compatibility only)	В	1	I
		Use: Gynecological Body Site			
		■ 'Y' – Yes			
		■ 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-4	N/A	Vagina (previously referred to as Vaginal)	0	1	I
		Use: Gynecological Body Site			
		■ 'Y' – Yes			
		■ 'N' - No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-5	N/A	Endometrium (previously referred to as Endometrial)	0	1	
		Use: Gynecological Body Site			
		■ 'Y' – Yes			
		" 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-6	N/A	Swab-Spatula	0	1	ı
		Use: Collection technique			
		■ 'Y' – Yes			
		■ 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-7	N/A	Brush-Spatula	0	1	I
		Use: Collection technique			
		■ 'Y' – Yes			
		■ 'N' - No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment
ZCY-8	N/A	Spatula-Alone	0	1	Delimiter
201-0	14// (Use: Collection technique			'
		■ 'Y' – Yes			
		■ 'N' – No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCY-9	N/A	Brush-Alone	0	1	I
		Use: Collection technique			
		■ 'Y' – Yes			
		" 'N' - No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-10	N/A	Broom-Alone	0	1	I
		Use: Collection technique			
		• 'Y' – Yes			
		■ 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-11	N/A	Other collection technique	0	1	1
		Use: Collection technique			
		• 'Y' – Yes			
		■ 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-12	N/A	LMP-Meno Date	0	8	1
		Use: Date of patient's last menstrual period or menopausal date			
		Numeric Characters			
		Format: YYYYMMDD			
ZCY-13	N/A	None	0	1	1
		Use: Previous treatment			
		■ 'Y' – Yes			
		" 'N' - No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-14	N/A	Hyst (for backward compatibility only)	В	1	-
		Use: Previous treatment			
		■ 'Y' – Yes			
		■ 'N' - No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCY-15	N/A	Coniza	0	1	- 1
		Use: Previous treatment			
		■ 'Y' – Yes			
		■ 'N' - No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCY-16	N/A	Colp-BX	0	1	I
		Use: Previous treatment			
		■ 'Y' – Yes			
		■ 'N' - No			
		If the answer to this question is not known this field should be blank			
		instead of defaulting to Yes or No.			

	essay	<u> </u>			
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZCY-17	N/A	Laser-Vap	0	1	1
		Use: Previous treatment			
		• 'Y' – Yes			
		■ 'N' - No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-18	N/A	Cryo	0	1	1
		Use: Previous treatment			
		■ 'Y' – Yes			
		■ 'N' - No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-19	N/A	Radiation	0	1	1
		Use: Previous treatment			
		■ 'Y' – Yes			
		■ 'N' – No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCY-20	N/A	Dates-Results	0	25	1
		Use: Previous cytology information			
		Alpha, Numeric, or Special Characters			
ZCY-21	N/A	Pregnant	0	1	- 1
		Use: Other patient information			
		■ 'Y' – Yes			
		■ 'N' – No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCY-22	N/A	Lactating	0	1	
		Use: Other patient information			
		■ 'Y' – Yes			
		■ 'N' – No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCY-23	N/A	Oral Contraceptives	0	1	1
		Use: Other patient information (OC)			
		■ 'Y' – Yes			
		■ 'N' – No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCY-24	N/A	Menopausal	0	1	1
		Use: Other patient information			
		• 'Y' – Yes			
		■ 'N' – No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCY-25	N/A	Estro-RX	0	1	
		Use: Other patient information			
		■ 'Y' – Yes			
		■ 'N' – No			
		If the answer to this question is not known this field should be blank			
		instead of defaulting to Yes or No.			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZCY-26	N/A	PMP-Bleeding	0	1	I
		Use: Other patient information			
		• 'Y' – Yes			
		■ 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-27	N/A	Post-Part	0	1	I
		Use: Other patient information			
		• 'Y' – Yes			
		• 'N' - No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-28	N/A	IUD	0	1	I
		Use: Other patient information			
		■ 'Y' – Yes			
		■ 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-29	N/A	All-Other-Pat	0	1	1
		Use: Other patient information			
		■ 'Y' – Yes			
		■ 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-30	N/A	Negative	0	1	I
		Use: Previous cytology information			
		■ 'Y' – Yes			
		■ 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-31	N/A	Atypical	0	1	I
		Use: Previous cytology information			
		■ 'Y' – Yes			
		■ 'N' – No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZCY-32	N/A	Dysplasia (for backward compatibility only)	В	1	1
		Use: Previous cytology information			
		• 'Y' – Yes			
		■ 'N' – No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCY-33	N/A	Ca-In-Situ	0	1	I
		Use: Previous cytology information			
		• 'Y' – Yes			
		• 'N' - No			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			

		Order Wessage Form					
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter		
ZCY-34	N/A	Invasive	0	1	1		
		Use: Previous cytology information					
		■ 'Y' – Yes					
		■ 'N' – No					
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 					
ZCY-35	N/A	Other Previous Information	0	1	1		
		Use: Previous cytology information					
		■ 'Y' – Yes					
		• 'N' - No					
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 					
ZCY-36	N/A	Hysterectomy, Supracervical (for backward compatibility only)	В	1	1		
		Use: Gynecological Body Site					
		■ 'Y' – Yes					
		■ 'N' - No					
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.					
ZCY-37	N/A	Labium majus	0	1	I		
		Use: Gynecological Body Site					
		■ 'Y' – Yes					
		■ 'N' - No					
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.					
ZCY-38	N/A	Labium minus	0	1	-		
		Use: Gynecological Body Site					
		• 'Y' – Yes					
		• 'N' - No					
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.					
ZCY-39	N/A	Vulva	0	1			
		Use: Gynecological Body Site					
		• 'Y' – Yes					
		• 'N' - No					
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.					
ZCY-40	N/A	Hysterectomy, Total	0	1	1		
		Use: Previous treatment (HYST-TOTAL)					
		■ 'Y' – Yes					
		■ 'N' - No					
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.					
ZCY-41	N/A	Hysterectomy, Partial (Supracervical)	0	1	I		
		Use: Previous treatment (HYST-PARTIAL)					
		■ 'Y' – Yes					
		■ 'N' - No					
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.					

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZCY-42	N/A	Dysplasia Low	0	1	1
		Use: Previous cytology information			
		■ 'Y' – Yes			
		■ 'N' - No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZCY-43	N/A	Dysplasia High	0	1	<cr></cr>
		Use: Previous cytology information			
		■ 'Y' – Yes			
		■ 'N' - No			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			

5.3.14 ZSA Segment – Maternal Serum Screening and Amniotic Fluid Alpha-Fetoprotein

- The ZSA segment is used to gather specific information necessary to perform Maternal Serum Screening and Amniotic Fluid Alpha-Fetoprotein (AFP) testing.
- Patient race (PID-10) and patient weight (ZCI-2.1) must be sent in addition to the ZSA segment information if Maternal Serum Screening testing will be supported through the interface.

• The ZSA segment replaces the ZAF segment from previous external specifications.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZSA-0	N/A	Segment Type ID ('ZSA')	R	3	
		Use: To identify the segment.			
ZSA-1	N/A	Insulin Dependent (Y/N)	0	1	
		Use: To indicate if the patient was on insulin prior to pregnancy.			
		• 'Y' - Yes			
		• 'N' - No			
		Answer for all Maternal Serum Screening tests but not for Amniotic Fluid AFP tests.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-2	N/A	2.1	С	2	٨
		Gestational Age Weeks			
		Use: To provide the length of patient's pregnancy in weeks.			
		Numeric characters only			
		Send leading zeroes for weeks that are less than two positions (right justified 0 fill). Example: If number of weeks is 1 then 01 should be sent.			
		For segment ZSA-2 – Weeks/Days & Date of calculation should be sent OR Decimal Form & Date of calculation should be sent, not both.			
		Only one GA dating criteria should be sent for each specimen.			
		Required for non Nuchal Translucency and Amniotic Fluid AFP tests when ZSA-2.3 is not answered.			
		2.2	С	1	۸
		Gestational Age Days			
		Use: To provide the length of patient's pregnancy in days for any partial weeks.			
		Numeric characters only			
		• '0', '1', '2', '3', '4', '5', or '6'			
		For segment ZSA-2 – Weeks/Days & Date of calculation should be sent OR Decimal Form & Date of calculation should be sent, not both.			
		Only one GA dating criteria should be sent for each specimen.			
		Required for non Nuchal Translucency and Amniotic Fluid AFP tests when ZSA-2.3 is not answered.			

		Order Wie			
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		2.3	С	4	۸
		Gestational Age Decimal Form			
		Use: To provide the length of patient's pregnancy in weeks (decimal format).			
		Numeric characters and decimal			
		• Format: ##.#			
		• Must send in decimal form and must send leading zeroes for decimals that are less than four positions (right justified 0 fill). Decimal Calculation: Number of days / 7 days in a week = days in decimal format. Example: 8 weeks 3 days = 08.4 weeks rounded to one decimal place. For partial weeks, 1 day = 00.1, 2 days = 00.3, 3 days = 00.4, 4 days = 00.6, 5 days = 00.7, and 6 days = 00.9.			
		For segment ZSA-2 – Weeks/Days & Date of calculation should be sent OR Decimal Form & Date of calculation should be sent, not both.			
		Gestational Age Decimal Form should not be sent for Noninvasive Prenatal Testing (NIPT).			
		Only one GA dating criteria should be sent for each specimen.			
		Required for non Nuchal Translucency and Amniotic Fluid AFP tests when ZSA-2.1 and ZSA-2.2 are not answered.			
		2.4	С	8	1
		Gestational Age Date of Calculation			
		Use: To provide the date on which the patient was the stated gestational age.			
		Format: YYYYMMDD			
		Required for non Nuchal Translucency and Amniotic Fluid AFP tests unless ZSA-3.2 LMP Date or ZSA-5.2 EDD/EDC Date is provided.			
		Only one GA dating criteria should be sent for each specimen.			
		The GA and GA Date need to display on the order entry system as it does on the requisition: GAon/_/			
ZSA-3	N/A	3.1	0	1	۸
		GA Calculation Method - LMP			
		Use: To indicate if gestational age was calculated by last menstrual date method.			
		• 'Y' - Yes			
		• 'N' - No			
		Only one of ZSA-3.1, ZSA-4.1, and ZSA-5.1 should be Yes and the other two should be No.			
		Answer for non Nuchal Translucency and Amniotic Fluid AFP tests.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		3.2	С	8	1
		LMP Date			
		Use: To provide the date of the Last Menstrual Period.			
		• Format: YYYYMMDD			
		Only one GA dating criteria should be sent for each specimen.			
		 Required for non Nuchal Translucency and Amniotic Fluid AFP tests when ZSA-2.4 and ZSA-5.2 are not answered. 			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZSA-4	N/A	4.1	0	1	٨
		GA Calculation Method – Ultrasound			
		Use: To indicate if gestational age was calculated by ultrasound.			
		• 'Y' - Yes			
		• 'N' - No			
		Only one of ZSA-3.1, ZSA-4.1, and ZSA-5 .1 should be Yes and the other two should be No.			
		Answer for non Nuchal Translucency and Amniotic Fluid AFP tests.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		4.2	В	8	
		Ultrasound Date			
		Use: To provide date the Ultrasound was performed. For backward compatibility only.			
		Format: YYYYMMDD			
		 ZSA-4.2 use to be required when ZSA-4.1 was "Y" but it is no longer needed and is now only used for backward compatibility. 			
ZSA-5	N/A	5.1	0	1	^
		GA Calculation Method – EDD/EDC			
		Use: To indicate if gestational age was calculated by estimated date of delivery or confinement.			
		• 'Y' - Yes			
		• 'N' - No			
		Only one of ZSA-3.1, ZSA-4.1, and ZSA-5 .1 should be Yes and the other two should be No.			
		 Answer for non Nuchal Translucency, for Amniotic Fluid AFP tests, and for Noninvasive Prenatal Testing (NIPT). 			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		5.2	С	8	1
		EDD/EDC Date			
		Use: To provide the estimated date of delivery or confinement.			
		Format: YYYYMMDD			
		Only one GA dating criteria should be sent for each specimen.			
		Required for Noninvasive Prenatal Testing (NIPT).			
		 Required for non Nuchal Translucency and Amniotic Fluid AFP tests when ZSA-2.4 and ZSA-3.2 are not answered. 			
ZSA-6	N/A	Number of Fetuses (replaces Pregnancy Type)	С	1	I
		Use: To Indicate the number of fetuses involved in the patient's current pregnancy.			
		Numeric characters only, '1' through '9', going forward.			
		• '1', '2', '3', '4', '5', '6', '7', '8', or '9'			
		'S' - Single for backward compatibility only.			
		'T' - Twins for backward compatibility only.			
		'M' - Multiple for backward compatibility only.			
		'X' - Not Indicated for backward compatibility only.			
		'S', 'T', 'M', and 'X' are for backward compatibility only.			
		Required for Noninvasive Prenatal Testing (NIPT).			
		Answer for all Maternal Serum Screening tests but not for Amniotic			
		Fluid AFP tests.			

Order Wessage Forma					
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZSA-7	N/A	Routine Screening	В	1	I
		Use: To provide relevant information pertaining to the order.			
		• 'Y' - Yes			
		• 'N' - No			
		Only used for backward compatibility.			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZSA-8	N/A	Previous Neural Tube Defects	В	1	- 1
		Use: To provide relevant information pertaining to the order.			
		• 'Y' - Yes			
		• 'N' - No			
		Only used for backward compatibility.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-9	N/A	Advanced Maternal Age	В	1	- 1
		Use: To provide relevant information pertaining to the order.			
		• 'Y' - Yes			
		• 'N' - No			
		Only used for backward compatibility.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-10	N/A	History of Down Syndrome	В	1	1
		Use: To provide relevant information pertaining to the order.			
		• 'Y' - Yes			
		• 'N' - No			
		Only used for backward compatibility.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-11	N/A	History of Cystic Fibrosis	В	1	
		Use: To provide relevant information pertaining to the order.			
		• 'Y' - Yes			
		• 'N' - No			
		Only used for backward compatibility.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-12	N/A	Other Indications	0	1	
		Use: To Indicate if there are any other unusual factors that should be considered during interpretation of the test results.			
		• 'Y' - Yes			
		• 'N' - No			
		Answer for all Maternal Serum Screening tests, for Amniotic Fluid AFP tests, and for Noninvasive Prenatal Testing (NIPT).			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		If Yes, ZSA-13 needs to be answered.			
ZSA-13	N/A	Additional information	0	20	
		Use: To allow client to enter information that does not have a specific field.			
		Alpha, Numeric, or Special characters			
		 Answer when ZSA-12 Other Indications is Yes. 			

Order Message Form					
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZSA-14	N/A	Previously Elevated AFP	0	1	- 1
		Use: To indicate if alpha-fetoprotein level was elevated at any prior test.			
		• 'Y' - Yes			
		• 'N' - No			
		Answer when ZSA-20 Prior Down Syndrome/ONTD screening is Yes.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-15	N/A	Reason for Repeat: Early GA	В	1	- 1
		Use: To provide relevant information pertaining to the order.			
		• 'Y' - Yes			
		• 'N' - No			
		Only used for backward compatibility.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-16	N/A	Reason for Repeat: Hemolyzed	В	1	- 1
		Use: To provide relevant information pertaining to the order.			
		• 'Y' - Yes			
		• 'N' - No			
		Only used for backward compatibility.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-17	N/A	17.1	0	4	٨
		Ultrasound Measurement Crown Rump Length (mm)			
		Use: Crown rump length of the first fetus.			
		Numeric characters and Decimal			
		■ Format: ##.#			
		Answer for Nuchal Translucency tests.			
		17.2	0	8	٨
		Ultrasound Measurement Crown Rump Length Date			
		Use: Date the fetal measurements were taken.			
		Numeric characters			
		Format: YYYYMMDD			
		Answer for Nuchal Translucency tests.			
		17.3	0	4	1
		Ultrasound Measurement Crown Rump Length for Twin B (mm)			
		Use: Crown rump length of the second fetus.			
		Numeric characters and Decimal			
		Format: ##.#			
		Answer for Nuchal Translucency tests when twins are present.			
ZSA-18	N/A	18.1	0	4	٨
		Nuchal Translucency (mm)			
		Use: Nuchal Translucency of the first fetus.			
		Numeric characters and Decimal			
		Format: ##.#			
		Answer for Nuchal Translucency tests.			
		18.2	0	4	ı
		Nuchal Translucency for Twin B (mm)			<u>'</u>
		Use: Nuchal Translucency of the second fetus.			
		, SSSaoriai iranoiacene, di tile decella letae.			
		•			

Order Message For					
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZSA-19	N/A	19.1	0	1	۸
		Donor Egg			
		Use: To indicate if the egg was obtained from in vitro fertilization.			
		• 'Y' - Yes			
		• 'N' - No			
		Answer for all Maternal Serum Screening tests but not for Amniotic Fluid AFP tests.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		19.2	0	2	۸
		Age of Egg Donor			
		Use: To indicate the age in years of the egg donor.			
		Numeric characters			
		Answer when ZSA-19.1 Donor Egg is Yes.			
		19.3	0	1	
		Type of Egg Donor			
		Use: To indicate the type of egg donor.			
		'S' - Self donated egg			
		'N' - Non-self donated egg			
		Answer when ZSA-19.1 Donor Egg is Yes.			
ZSA-20	N/A	Prior Down Syndrome/ONTD screening during current pregnancy	0	1	
		Use: To indicate if the patient has had down syndrome or ONTD screening during the current pregnancy. If Yes then ZSA-21 Prior First Trimester, ZSA-22 Prior Second Trimester, and ZSA-14 Previously elevated AFP need to be answered.			'
		• 'Y' - Yes			
		• 'N' - No			
		Answer for all Maternal Serum Screening tests but not for Amniotic Fluid AFP tests.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-21	N/A	Prior First Trimester Testing	0	1	I
		Use: To indicate if the patient has had any prior maternal serum tests during the first trimester of the current pregnancy.			
		• 'Y' - Yes			
		• 'N' - No			
		Answer when ZSA-20 Prior Down Syndrome/ONTD screening is Yes.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-22	N/A	Prior Second Trimester Testing	0	1	I
		Use: To indicate if the patient has had any prior maternal serum tests during the second trimester of the current pregnancy.			
		• 'Y' - Yes			
		• 'N' - No			
		Answer when ZSA-20 Prior Down Syndrome/ONTD screening is Yes.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			

Order Message For						
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter	
ZSA-23	N/A	FHX NTD	0	1	I	
		Use: To indicate if there is a Family (HX)istory of Neural Tube Defects.				
		• 'Y' - Yes				
		• 'N' - No				
		Answer for all Maternal Serum Screening tests but not for Amniotic Fluid AFP tests.				
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.				
ZSA-24	N/A	Prior Pregnancy with Down Syndrome	0	1	1	
		Use: To indicate if the patient has had any prior pregnancy where the fetus (or child) was diagnosed with Down Syndrome.				
		• 'Y' - Yes				
		• 'N' - No				
		Answer for all Maternal Serum Screening tests but not for Amniotic Fluid AFP tests.				
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.				
ZSA-25	N/A	25.1	0	1	٨	
		Chorionicity – Monochorionic (twins only)				
		Use: To indicate the type of Chorionicity for twins. One and only one of the three Chorionicity questions is required.				
		• 'Y' - Yes				
		• 'N' - No				
		Answer for Nuchal Translucency tests when twins are present.				
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.				
		25.2	0	1	٨	
		Chorionicity – Dichorionic (twins only)				
		Use: To indicate the type of Chorionicity for twins. One and only one of the three Chorionicity questions is required.				
		• 'Y' - Yes				
		• 'N' - No				
		Answer for Nuchal Translucency tests when twins are present.				
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 				
		25.3	0	1		
		Chorionicity – Unknown (twins only)				
		Use: To indicate type of Chorionicity for twins. One and only one of the three Chorionicity questions is required.				
		• 'Y' - Yes				
		• 'N' - No				
		Answer for Nuchal Translucency tests when twins are present.				
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.				
ZSA-26	N/A	26.1	0	25	٨	
		Sonographer Last Name				
		Use: To provide the last name of the ultrasound technician.				
		Alpha or Special Characters				
		 Answer for Nuchal Translucency tests. 				

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		26.2	0	15	۸
		Sonographer First Name			
		Use: To provide the first name of the ultrasound technician.			
		Alpha or Special Characters			
		Answer for Nuchal Translucency tests.			
		26.3	0	20	^
		Sonographer ID Number			
		Use: To provide the certification number assigned to the ultrasound technician. Please indicate certification organization in one of the next three fields.			
		Alpha, Numeric, or Special characters			
		Answer for Nuchal Translucency tests.			
		26.4	0	1	٨
		Credentialed by NTQR			
		Use: To identify the organization from which the sonographer has obtained certification. One of the three credentialed by questions is required to identify the certification organization.			
		• 'Y' - Yes			
		• 'N' - No			
		Answer for Nuchal Translucency tests.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		26.5	0	1	۸
		Credentialed by FMF			
		Use: To identify the organization from which the sonographer has obtained certification. One of the three credentialed by questions is required to identify the certification organization.			
		• 'Y' - Yes			
		• 'N' - No			
		Answer for Nuchal Translucency tests.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		26.6 Credentialed by other organization.	0	1	I
		Use: To identify the organization from which the sonographer has obtained certification. One of the three credentialed by questions is required to identify the certification organization.			
		• 'Y' - Yes			
		• 'N' - No			
		Answer for Nuchal Translucency tests.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-27	N/A	Site Number	0	20	1
		Use: To describe where the ultrasound was performed using a location code, city and state, hospital name, or some other description.			
		Alpha or Numeric Characters			
		Answer for Nuchal Translucency tests.			
ZSA-28	N/A	Reading Physician ID	0	20	1
		Use: To identify the physician that supervises the ultrasound technician and signs their cases.			
		Alpha or Numeric Characters			
		Answer for Nuchal Translucency tests.			

Order Message Form						
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter	
ZSA-29	N/A	Advanced Maternal Age (AMA) adjusted per number of fetuses	0	1	Ι	
		Use: To indicate Advanced Maternal Age at time of delivery based on the number of fetuses.				
		• 'Y' - Yes				
		• 'N' - No				
		Answer Yes when 1 fetus and mother will be 35 or older at time of delivery.				
		Answer Yes when 2 fetus and mother will be 32 or older at time of delivery.				
		Answer Yes when 3 or more fetus and mother will be 29 or older at time of delivery.				
		Answer for Noninvasive Prenatal Testing (NIPT).				
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.				
ZSA-30	N/A	Positive Maternal Serum Screening Test	0	1	1	
		Use: Indicates that the mother has had a positive maternal serum screening test				
		• 'Y' - Yes				
		• 'N' - No				
		Answer for Noninvasive Prenatal Testing (NIPT).				
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.				
ZSA-31	N/A	Previous Pregnancy with Aneuploidy	0	1	1	
		Use: Indicates that the mother has had a previous pregnancy with Aneuploidy				
		• 'Y' - Yes				
		• 'N' - No				
		Answer for Noninvasive Prenatal Testing (NIPT).				
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No				
ZSA-32	N/A	Family history of Chromosomal Abnormality	0	1	I	
		Use: Indicates that the mother has had a chromosomal abnormality within her family history				
		• 'Y' - Yes				
		• 'N' - No				
		Answer for Noninvasive Prenatal Testing (NIPT).				
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.				
ZSA-33	N/A	Ultrasound Findings (any of Cystic Hygroma, IUGR, Heart Defect, CNS Abnormality)	0	1	I	
		Use: Indicates there were ultrasound findings				
		• 'Y' - Yes				
		• 'N' - No				
		Answer for Noninvasive Prenatal Testing (NIPT).				
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.				

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZSA-34	N/A	Parental balanced Robertsonian Translocation with Increased risk of trisomy	0	1	Ι
		Use: Indicates parental balanced Robertsonian Translocation with Increased risk of trisomy			
		• 'Y' - Yes			
		• 'N' - No			
		Answer for Noninvasive Prenatal Testing (NIPT).			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
ZSA-35	N/A	Pretest Counseling has occurred with the patient in accordance with their health plan requirements if applicable	0	1	I
		Use: Patient has been counseled in accordance with their health plan requirements			
		• 'Y' - Yes			
		• 'N' - No			
		Answer for Noninvasive Prenatal Testing (NIPT).			
		 If the answer to this question is not known this field should be blank instead of defaulting to Yes or No. 			
ZSA-36	N/A	Has Patient already had cell-free DNA testing with current pregnancy	0	1	<cr></cr>
		Use: Indicates if patient has already had cell-free DNA testing with current pregnancy			
		• 'Y' - Yes			
		• 'N' - No			
		Answer for Noninvasive Prenatal Testing (NIPT).			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			

5.3.15 ZRE Segment - Reproductive

- This segment is only required when Integrated Genetics testing is ordered.
- The ZRE segment is used to gather specific information necessary to perform Reproductive testing.
- The ZSA segment must be sent in addition to the ZRE segment if Reproductive testing will be supported through the interface.

• Send only one ZRE segment per patient. If additional ZRE segments are sent, the information contained in those segments will be ignored.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZRE-0	N/A	Segment Type ID	R	3	- 1
		Use: To identify the segment			
		• 'ZRE'			
ZRE-1	N/A	Fetus ID	С	20	1
		Use: To identify the fetus			
		Alpha, Numeric, and Special Characters			
		Example: Twin A, Twin B, Upper, Lower			
		Required if ZSA-6 Number of Fetuses is greater than 1 and Specimen Type is not Serum or Bloodspot			
ZRE-2	N/A	2.1	0	25	۸
		Genetic Counselor Last Name			
		Use: To identify the Genetic Counselor			
		Alpha, Numeric, or Special Characters			
		2.2	0	15	^
		Genetic Counselor First Name			
		Use: To identify the Genetic Counselor			
		Alpha, Numeric, or Special Characters			
		2.3	0	15	I
		Genetic Counselor Middle Name			
		Use: To identify the Genetic Counselor			
		Alpha, Numeric, or Special Characters			
ZRE-3	N/A	Pregnant	R	1	I
		Use: To identify if patient is pregnant			
		• 'Y' – Yes			
		• 'N' – No			
		'X' – Not Indicated			
ZRE-4	N/A	Repeat Screen	R	1	I
		Use: To identify if this a repeat screen			
		• 'Y' – Yes			
		• 'N' – No			
		'X' – Not Indicated	_		
ZRE-5	N/A	Specimen Type	R	30	
		Use: To identify type of specimen			
		Alpha, Numeric, or Special Characters			
		Only the first occurrence of this field will be stored.	_		
ZRE-6	N/A	EDD/EDC Type	С	3	
		Use: To specify basis for EDD/EDC Date			
		'US' – Ultra Sound			
		'LMP' – Last Menstrual Period			
		'PE' – Physical Exam			
		Required if ZSA-5.2 EDD/EDC Date is populated.			

Order Message i Orina					
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZRE-7	N/A	T1 Specimen Number	С	8	
		Use: To specify Integrated Genetics Specimen # from First Trimester Test (i.e., Integrated Screen 1 or Sequential Screen 1)			
		Numeric Characters			
		Field should contain eight characters			
		Required for INT2 and SEQ2 tests			
ZRE-8	N/A	8.1	0	25	۸
		Collected By Last Name			
		Use: To identify the Collector of the specimen			
		Alpha, Numeric, or Special Characters			
		8.2	0	15	۸
		Collected By First Name			
		Use: To identify the Collector of the specimen			
		Alpha, Numeric, or Special Characters			
		8.3	0	15	I
		Collected By Middle Name			
		Use: To identify the Collector of the specimen			
		Alpha, Numeric, or Special Characters			
ZRE-9	N/A	9.1	В	1	٨
		AJ Panel Test Ordered – Bloom Syndrome. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Bloom Syndrome			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		9.2	В	1	٨
		AJ Panel Test Ordered – Canavan Disease. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Canavan Disease			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		9.3	В	1	٨
		AJ Panel Test Ordered – Cystic Fibrosis. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Cystic Fibrosis			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank			
		instead of defaulting to Yes or No.			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		9.4	В	1	۸
		AJ Panel Test Ordered – Familial Dysautonomia. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Familial Dysautonomia			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		9.5	В	1	٨
		AJ Panel Test Ordered – Fanconi Anemia. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Fanconi Anemia			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		9.6	В	1	۸
		AJ Panel Test Ordered – Gaucher Disease. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Gaucher Disease			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		9.7	В	1	^
		AJ Panel Test Ordered – Glycogen Storage Disease. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Glycogen Storage Disease			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		9.8 AJ Panel Test Ordered – Maple Syrup Urine Disease. For Backward	В	1	٨
		Compatibility Only.			
		Use: To order AJ Panel component – Maple Syrup Urine Disease • 'Y' - Yes			
		• Y - Yes • 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		9.9	В	1	^
		AJ Panel Test Ordered – Mucolipidosis Type IV. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Mucolipidosis Type IV			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank			
	1	instead of defaulting to Yes or No.			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		9.10	В	1	٨
		AJ Panel Test Ordered – Niemann-Pick Disease. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Niemann-Pick Disease			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		9.11	В	1	٨
		AJ Panel Test Ordered – Tay-Sachs DNA. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Tay-Sachs DNA			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			
		9.12	В	1	<cr></cr>
		AJ Panel Test Ordered – Tay-Sachs Enzyme. For Backward Compatibility Only.			
		Use: To order AJ Panel component – Tay-Sachs Enzyme			
		• 'Y' - Yes			
		• 'N' - No			
		Required for Order Code G00503.			
		If the answer to this question is not known this field should be blank instead of defaulting to Yes or No.			

5.3.16 ZON Segment - Oncology

- This segment is only required when Integrated Oncology testing is ordered.
- The ZON segment is used to gather specific information necessary to perform Oncology testing.

• Send only one ZON segment per patient. If additional ZON segments are sent, the information contained in those segments will be ignored.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZON-0	N/A	Segment Type ID	R	3	
		Use: To identify the segment			
		• 'ZON'			
ZON-1	N/A	List all testing desired	R	255	~ or
		Use: to indicate all testing needed. Indicate specific test names.			
		Alpha, Numeric, or Special Characters			
ZON-2	N/A	Specimen Type	R	30	I
		Use: To identify type of specimen			
		Alpha, Numeric, or Special Characters			
		Only the first occurrence of this field will be stored.			
ZON-3	N/A	Level of Services (select one)	С	1	I
		Use: Identify level of service of IHC tests. Required for IHC testing.			
		'M' - IHC STAIN WITH MANUAL INTERPRETATION			
		'I' - IHC STAIN WITH INTERPRETATION AND IMAGE ANALYSIS			
		'C' - PATHOLOGY CONSULTATION AND REPORT WITH IHC ANALYSIS ON REFERRED BLOCKS/SLIDES			
		'2' - SECOND OPINION CONSULTATION (STAINED SLIDES WITHOUT FFPE)			
		'T' - TECHNICAL COMPONENT (ANTIBODY STAIN ONLY)			
		'A' - TECHNICAL COMPONENT WITH IMAGE (IHC STAIN AND SCANNED SLIDES)			
		'V' - TECHNICAL COMPONENT WITH VIRTUAL IMAGE (IHC STAIN AND IMAGE ANALYSIS)			
ZON-4	N/A	Client Specimen ID	0	100	- 1
		Use: To specify the client's identifier for the specimen			
		Alpha, Numeric, or Special Characters			
ZON-5	N/A	Type of Fixative	С	1	I
		Use: Fixation Type. Required for Breast Cancer testing.			
		'X' - NOT PROVIDED			
		'F' - FORMALIN			
		'A' - ALCOHOL			
		'B' - BOUIN'S FIXATIVE			
		• 'O' - OTHER			
		'P' - PEN-FIX			
		'R' - PREFER			
		'S' - SAFEFIX			
		'Z' - ZINC FORMALIN			
ZON-6	N/A	6.1	С	10	۸
		Time to Fixation			
		Use: To provide the Time to Fixation. Required for Breast Cancer test.			
		Alpha, Numeric, or Special Characters			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		6.2	С	10	!
		Duration of Fixative			
		Use: To provide the Duration of Fixative. Required for Breast Cancer test.			
		Alpha, Numeric, or Special Characters			
ZON-7	N/A	Diagnosis	R	40	
		Use: To identify the diagnosis.			
		Alpha, Numeric, or Special Characters			
ZON-8	N/A	Disease Stage	0	1	I
		Use: To identify oncology disease stage / clinical course			
		'N' - NEW DIAGNOSIS			
		'R' - RELAPSE			
		'F' - FOLLOW UP			
		'M' - MINIMAL RESIDUAL DISEASE			
		• '0' - OTHER			
		'X' - NOT GIVEN			
ZON-9	N/A	Post Treatment	0	1	1
		Use: To identify the Post Treatment			·
		• 'X' - N/A			
		• 'R' - RADIATION			
		'C' - CHEMOTHERAPY			
		'F' - BM TRANSPLANTATION FEMALE DONOR			
		'M' - BM TRANSPLANTATION MALE DONOR			
		'U' - BM TRANSPLANTATION UNSPECIFIED DONOR			
ZON-10	N/A	10.1	0	25	۸
2014-10	IN/A	Treating Physician Last Name		25	
		Use: To identify the Treating Physician			
		Alpha, Numeric, or Special Characters			
		10.2	0	15	۸
		Treating Physician First Name		13	
		Use: To identify the Treating Physician			
		Alpha, Numeric, or Special Characters			
			0	15	
		10.3		15	1
		Treating Physician Middle Name			
		Use: To identify the Treating Physician			
70N 44	NI/A	Alpha, Numeric, or Special Characters Line Version, Callecting Mathed	0		
ZON-11	N/A	UroVysion Collection Method Use: To provide Urovysion Collection Method. Required when a Urovysion test is requested	С	1	
		'W' - BLADDER WASHING			
		'C' - CATHETERIZED			
		'V' - VOIDED URINE			
ZON-12	N/A	Gross Tumor Size for Prosigna	0	6	1
ZOI4-12	IN/A	Use: To provide Gross Tumor Size for Prosigna.			'
		'LTE2CM' - LESS THAN OR EQUAL TO 2 CM			
70N 42	NI/A	'GT2CM' - GREATER THAN 2 CM Nodel Status for Breating	-	4	
ZON-13	N/A	Nodal Status for Prosigna	С	1	'
		Use: To provide Nodal Status for Prosigna. Required for Prosigna testing.			
	ı	'N' - NEGATIVE	1	1	l

		Order Me			
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZON-14	N/A	14.1	0	30	۸
		BLOCK PROCUREMENT FACILITY NAME			
		Use: To define Block Procurement Facility Name.			
		Alpha, Numeric, or Special Characters			
		14.2	0	35	۸
		BLOCK PROCUREMENT FACILITY ADDRESS (Line 1)			
		Use: To define Block Procurement Facility Address (Line 1).			
		Alpha, Numeric, or Special Characters			
		14.3	0	35	۸
		BLOCK PROCUREMENT FACILITY ADDRESS (Line 2)			
		Use: To define Block Procurement Facility Address (Line 2).			
		Alpha, Numeric, or Special Characters			
		14.4	0	16	٨
		BLOCK PROCUREMENT FACILITY CITY			
		Use: To define Block Procurement Facility City.			
		Alpha Characters			
		14.5	0	2	۸
		BLOCK PROCUREMENT FACILITY STATE OR PROVINCE		_	
		Use: To define Block Procurement Facility State or Province.			
		Upper case state abbreviation			
		14.6	0	9	۸
		BLOCK PROCUREMENT FACILITY ZIP OR POSTAL CODE			
		Use: To define Block Procurement Facility Zip or Postal Code. LabCorp prefers to receive ZIP codes without dashes; however they will be added on result. If a dash is sent, it will not be stored in the system.			
		Numeric Characters			
		Note: LabCorp accepts a 5-position or 9-position ZIP code.			
		14.7 BLOCK PROCUREMENT FACILITY CONTACT LAST NAME	0	25	٨
		Use: To identify Block Procurement Facility Contact.			
		Alpha Characters			
		14.8	0	15	۸
		BLOCK PROCUREMENT FACILITY CONTACT FIRST NAME			
		Use: To identify Block Procurement Facility Contact.			
		Alpha Characters			
		14.9	0	15	۸
		BLOCK PROCUREMENT FACILITY CONTACT MIDDLE NAME			
		Use: To identify Block Procurement Facility Contact.			
		Alpha Characters			
		14.10	0	10	٨
		BLOCK PROCUREMENT FACILITY PHONE NUMBER		10	
		Use: To define Block Procurement Facility Phone Number. LabCorp prefers to receive phone numbers without dashes or parentheses; however they will be added on result. If dashes or parentheses are sent, they will not be stored in the system.			
		Numeric Characters			
		14.11	0	10	<cr></cr>
		BLOCK PROCUREMENT FACILITY FAX Use: To define Block Procurement Facility Fax. LabCorp prefers to receive phone numbers without dashes or parentheses; however they will be added on result. If dashes or parentheses are sent, they will not be stored in the		10	-UK/
		system. • Numeric Characters			

	Order Message For					
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter	
		6.8	U	N/A	٨	
		Alternate Coding System Version ID				
		Not currently saved, used, or returned				
		6.9	С	75		
		Free Text Drug Name / Original Text				
		Use: To provide the drug description when RXNORM is not available. Required When ZPM-6.1 is not valued.				
		Alpha, Numeric, or Special Characters				
ZPM-7	N/A	Patient has no medication use declared and none prescribed	R	1	I	
		Use: To indicate if no medications were prescribed.				
		• 'Y' - Yes				
		• 'N' - No				
		If ZPM-2 through ZPM-6 are populated then ZPM-7 should be 'N'.				
		Only one of ZPM-7, ZPM-8, ZPM-9, and ZPM-10 can be 'Y'.				
		If ZPM-7 is 'Y' then ZPM-8, ZPM-9, and ZPM-10 should be 'N'.				
ZPM-8	N/A	A medication list has not been provided by this patient	R	1		
		Use: To indicate that the patient did not provide any prescription information.				
		• 'Y' - Yes				
		• 'N' - No				
		If ZPM-2 through ZPM-6 are populated then ZPM-8 should be 'N'.				
		Only one of ZPM-7, ZPM-8, ZPM-9, and ZPM-10 can be 'Y'.				
		If ZPM-8 is 'Y' then ZPM-7, ZPM-9, and ZPM-10 should be 'N'.				
ZPM-9	N/A	This patient is prescribed or declares use of the following medications	R	1		
		Use: To indicate that the patient provided a medication list on the requisition.			·	
		• 'Y' - Yes				
		• 'N' - No				
		If ZPM-2 through ZPM-6 are populated then ZPM-9 should be 'N'.				
		Only one of ZPM-7, ZPM-8, ZPM-9, and ZPM-10 can be 'Y'.				
		If ZPM-9 is 'Y' then ZPM-7, ZPM-8, and ZPM-10 should be 'N'.				
ZPM-10	N/A	A separate medication list is attached	R	1	<cr></cr>	
		Use: To indicate that the patient did provide a medication list but it is on a separate form, not on the requisition.				
		• 'Y' - Yes				
		• 'N' - No				
		If ZPM-2 through ZPM-6 are populated then ZPM-10 should be 'N'.				
		Only one of ZPM-7, ZPM-8, ZPM-9, and ZPM-10 can be 'Y'.				
		If ZPM-10 is 'Y' then ZPM-7, ZPM-8, and ZPM-9 should be 'N'.				

5.3.18 NTE Segment – Comment

- NTE segments can be attached to the PID or OBR segments, however its use is not recommended.
- The Clinical Information field can only store 62 characters. Any additional characters will be truncated.

• If NTE segments are sent to the LabCorp Lab System, they will be placed in the Clinical Information field. Information will be stored in Clinical Information in the following order from ZBL, OBR-15, OBR-13, and lastly NTEs space permitting.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
NTE-0		Segment Type ID	R	3	
		Use: To identify the segment			
		• 'NTE'			
NTE-1	00096	Sequence Number	R	4	
		Use: To identify the number of the NTE segment within the order message.			
		Beginning at '1' through '10', sequentially (leading zeroes will not be sent).			
NTE-2	00097	Comment Source	R	2	
		Use: To identify source of comment.			
		• 'P' – Practice is the source of comment;			
		• 'O' – Other system is the source of the comment			
NTE-3	00098	Comment Text	R	62	<cr></cr>
		Use: Comments provided by the client.			
		Alpha, Numeric, or Special Characters			

5.3.19 SPM Segment - Specimen

- Pre adopted from HL7 2.5 to facilitate sending Specimen Sites with multiple modifiers.
- Up to forty SPM segments each with a unique specimen identifier will be supported per order message.

Required for Certain test procedures.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
SPM-0		Segment Type ID	R	3	
		Use: To identify the segment			
		• 'SPM'			
SPM-1	01754	Sequence Number	R	4	I
		Use: To identify the SPM segment number. At this time, only forty total SPM segments are supported per order message. If additional SPM segments are sent on orders, the information contained in those segments will be ignored.			
		Beginning at '1' through '40', sequentially per ORC/OBR pair (leading zeroes will not be sent).			
SPM-2	01755	Specimen ID	С	2	I
		Use: Unique identifier for the specimen as referenced by the Placer application, the Filler application, or both. The value sent in this field should be the identification value sent on the specimen container.			
		Alpha Characters (A, B, C or AA, AB, AC)			
		Required on orders for Histology.			
SPM-3	01756	Specimen Parent IDs	U	N/A	-
		Not currently saved, used, or returned			
SPM-4	01900	4.1	С	6	٨
		Specimen Type - Identifier			
		Use: Describes the precise nature of the entity that will be the source material for the observation.			
		Alpha, Numeric, or Special Characters			
		Required for Microbiology.			
		4.2	С	26	٨
		Specimen Type - Text			
		Use: Describes the precise nature of the entity that will be the source material for the observation. This attribute is a textual description of the identifier in SPM-4.1.			
		Alpha, Numeric, or Special Characters			
		Required for Microbiology.			
		In messages where the SPM segment is present, the use of SPM Specimen segment is favored over OBR-15.			
		If a value is received in both OBR-15 and SPM-4.2, the SPM-4.2 value is stored. When multiple SPMs under an ORC/OBR pair, the last SPM with values in SPM-4 will be stored.			
		4.3	С	7	٨
		Specimen Type - Name of Coding System			
		Use: Indicates the coding system used in SPM-4.1			
		Alpha, Numeric, or Special Characters			
		• 'HL70487'			
		Required for Microbiology.			
		4.4	U	18	^
		Specimen Type - Alternate Identifier			
		Use: Describes the precise nature of the entity that will be the source material for the observation. This attribute is an alternate identifier for the same specimen type in SPM-4.1			
		Alpha, Numeric, or Special Characters			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimite
		4.5	U	50	^
		Specimen Type - Alternate Text			
		Use: Describes the precise nature of the entity that will be the source material for the observation. This attribute is a textual description of the identifier in SPM-4.4.			
		Alpha, Numeric, or Special Characters			
		4.6	U	7	۸
		Specimen Type - Name of Alternate Coding System Use: Indicates an alternate Coding System Identifier was used in SPM-4.4. Any nationally recognized coding system such as HL7 or SNOMED can be used.			
		Alpha, Numeric, or Special Characters			
		4.7	U	N/A	٨
		Coding System Version ID			
		Use: Indicates an alternate Coding System Identifier was used in SPM-4.4. Any nationally recognized coding system such as HL7 or SNOMED can be used.			
		Alpha, Numeric, or Special Characters			
		4.8	U	N/A	۸
		Alternate Coding System Version ID			
		Use: Indicates an alternate Coding System Identifier was used in SPM-4.4. Any nationally recognized coding system such as HL7 or SNOMED can be used.			
		Alpha, Numeric, or Special Characters			
		4.9	0	26	- 1
		Original Text			
		Use: If the first triplet does not have values, this contains a non-coded value for the source.			
		Alpha, Numeric, or Special Characters			
		 If a value is received in both OBR-15 and SPM-4.9, the SPM-4.9 value is stored. When multiple SPMs under an ORC/OBR pair, the last SPM with values in SPM-4 will be stored. 			
SPM-5	01757	Specimen Type Modifier	U	N/A	1
		Not currently saved, used, or returned			
SPM-6	01758	Specimen Additives	U	N/A	
		Not currently saved, used, or returned			
SPM-7	01759	Specimen Collection Method	U	N/A	
		Not currently saved, used, or returned			
SPM-8	01901	8.1	С	18	۸
		Specimen Source Site - Identifier			
		Use: Provides an identifier to specify the source site from which the specimen was obtained. For example, in the case where a liver biopsy is obtained via a percutaneous needle, the source would be 'liver.' Required for certain test procedures.			
		Alpha, Numeric, or Special Characters			
		Required on orders for Histology.			
		8.2	С	40	^
		Specimen Source Site - Text			
		Use: Specifies the source site from which the specimen was obtained. For example, in the case where a liver biopsy is obtained via a percutaneous needle, the source would be 'liver.' This attribute is a textual description of the identifier in SPM-8.1. Required for certain test procedures.			
		Alpha, Numeric, or Special Characters			
		Required on orders for Histology.			

Order Message Format

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		8.3	С	7	I
		Specimen Source Site - Name of Coding System			
		Use: Indicates a LabCorp or 'local' identifier was used in SPM-8.1. Required for certain test procedures.			
		'L' - Local Identifier (LabCorp Identifier)			
		Required on orders for Histology.			
SPM-9	01760	9.1	С	3	۸
		Specimen Source Site Modifier - Identifier			
		Use: Provides an identifier that contains modifying or qualifying description(s) about the specimen source site. SPM-9 is a repeating field and up to three modifiers may be sent. The use of this attribute is to modify, qualify, or further specify, the entity described by SPM-8. This is particularly useful when the code set used in SPM-8 does not provide the precision required to fully describe the site from which the specimen originated. For example, if the specimen source site was precisely described as 'left radial vein' but the code set employed only provided 'radial vein,' this attribute could be employed to add the modifier 'left.' Required when additional information is needed to describe SPM-8.			
		Alpha, Numeric, or Special Characters			
		Required on orders for Histology when further definition of the Specimen Source Site is needed.			
		9.2	С	35	۸
		Specimen Source Site Modifier - Text			
		Use: Contains modifying or qualifying description(s) about the specimen source site. This attribute is a textual description of the identifier in SPM-9.1. Required when additional information is needed to describe SPM-8.			
		Alpha, Numeric, or Special Characters			
		Required on orders for Histology when further definition of the Specimen Source Site is needed.			
		9.3	С	7	~ or
		Specimen Source Site Modifier - Name of Coding System			
		Use: Indicates the coding system used in SPM-9.1. Required when additional information is needed to describe SPM-8.			
		'L' - Local Identifier (LabCorp Identifier)			
		'HL70542' - HL7 table identifier			
		Required on orders for Histology when further definition of the Specimen Source Site is needed.			
SPM-10	01761	Specimen Collection Site Not currently saved, used, or returned	U	N/A	I
SPM-11	01762	Specimen Role	U	N/A	- 1
		Not currently saved, used, or returned			
SPM-12	01902	Specimen Collection Amount	U	N/A	- 1
		Not currently saved, used, or returned			
SPM-13	01763	Grouped Specimen Count	U	N/A	
		Not currently saved, used, or returned			
SPM-14	01764	Specimen Description	0	40	-
		Use: This is a text field that allows additional information specifically about the specimen to be sent in the message.			
		Alpha, Numeric, or Special Characters			
SPM-15	01908	Specimen Handling Code	U	N/A	- 1
		Not currently saved, used, or returned			
SPM-16	01903	Specimen Risk Code	U	N/A	- 1
		Not currently saved, used, or returned			

Order Message Format

				• • • • • • • • • • • • • • • • • • • 	
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
SPM-17	01765	Specimen Collection Date/Time	R	12	
		Use: The date and time when the specimen was acquired from the source. The use of the Date Range data type allows for description of specimens collected over a period of time, for example, 24-hour urine collection. For specimens collected at a point in time, only the first component (start date/time) will be populated.			
		Format: YYYYMMDDHHMM			
SPM-18	00248	Specimen Received Date/Time	U	N/A	
		Not currently saved, used, or returned			
SPM-19	01904	Specimen Expiration Date/Time	U	N/A	
		Not currently saved, used, or returned			
SPM-20	01766	Specimen Availability	U	N/A	
		Not currently saved, used, or returned			
SPM-21	01767	Specimen Reject Reason	U	N/A	
		Not currently saved, used, or returned			
SPM-22	01768	Specimen Quality	U	N/A	
		Not currently saved, used, or returned			
SPM-23	01769	Specimen Appropriateness	U	N/A	
		Not currently saved, used, or returned			
SPM-24	01770	Specimen Condition	U	N/A	
		Not currently saved, used, or returned			
SPM-25	01771	Specimen Current Quantity	U	N/A	
		Not currently saved, used, or returned			
SPM-26	01772	Number of Specimen Containers	U	N/A	
		Not currently saved, used, or returned			
SPM-27	01773	Container Type	U	N/A	
		Not currently saved, used, or returned			
SPM.28	01774	Container Condition	U	N/A	
		Not currently saved, used, or returned			
SPM.29	01775	Specimen Child Role	U	N/A	<cr></cr>
		Not currently saved, used, or returned			

5.3.17 ZPM Segment - Patient Medication

• This segment is used to gather patient medications to aid in Medical Drug Monitoring.

• Up to 50 ZPM segments may be submitted on an order.

		M segments may be submitted on an order.		101	Field on
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZPM-0	N/A	Segment Type ID	R	3	I
		Use: To identify the segment			
		• 'ZPM'			
ZPM-1	N/A	Sequence Number	R	4	1
		Use: To identify the number of the ZPM segment. One per drug.			
		Beginning at '1' through '50', sequentially (leading zeroes will not be sent).			
ZPM-2	N/A	Component	0	125	I
		Use: To provide the Component.			
		Alpha, Numeric, or Special Characters			
ZPM-3	N/A	Brand	0	75	1
		Use: To provide the Brand.			
		Alpha, Numeric, or Special Characters			
ZPM-4	N/A	Dosage	0	4	I
		Use: To provide the Dosage.			
		Alpha, Numeric, or Special Characters			
ZPM-5	N/A	Frequency	0	20	I
		Use: To provide the Frequency.			
		Alpha, Numeric, or Special Characters			
ZPM-6	N/A	6.1	С	15	٨
		Code / Identifier			
		Use: To provide the RXNORM code. Required When ZPM-6.9 is not valued. RXNORM is the preferred way to identify medications.			
		Alpha, Numeric, or Special Characters			
		6.2	С	75	٨
		Description / Text			
		Use: To provide the RXNORM description. Required When ZPM-6.1 is valued.			
		Alpha, Numeric, or Special Characters			
		6.3	С	9	۸
		Source / Name of Coding System			
		Use: To provide the RXNORM source abbreviation. Required When ZPM-6.1 is valued.			
		'RXNORM' - RXNORM Source			
		6.4	U	N/A	۸
		Alternate Identifier			
		Not currently saved, used, or returned			
		6.5	U	N/A	۸
		Alternate Text			
		Not currently saved, used, or returned			
		6.6	U	N/A	۸
		Name of Alternate Coding System			
		Not currently saved, used, or returned			
		6.7	U	N/A	^
1		Coding System Version ID			
		Not currently saved, used, or returned			

6 RESULT MESSAGE FORMAT

A Result message is generated after test observations are entered and verified by lab personnel. A Result message must be properly formatted according to HL7 guidelines before it can be transmitted from LabCorp to the client.

6.1 Result Message (ORU)

The following table lists all of the segments potentially used in a result message.

Segment	Description
MSH	Message Header
PID	Patient Identification
NK1	Next of Kin
ORC	Common Order
OBR	Observation Request
OBX	Observation
ZEF	Encapsulated Data Format
NTE	Notes and Comments (can be sent after PID, OBR, and OBX)
SPM	Specimen Segment
ZPS	Place of Service

The Notes and Comments (NTE) segment of the result message can contain any combination of the following items: test results, canned messages, or result comments.

6.1.1 Result Message Structure (ORU)

The example below illustrates the structure of a Result message.

```
MSH
PID
[NK1]
{[NTE]}
{ORC
OBR
{[NTE]}
{OBX
{[ZEF]}
{[NTE]}
}
{[SPM]}
}
```

The ZPS segment is the last segment in the message. Multiple ZPS segments will be sent at the end of the message when there are multiple performing labs. Segments or segment groups enclosed in braces "{ }" may be repeated as needed. Segments enclosed in brackets "[]" are optional.

6.2 Sample Result Message

A result message contains patient demographics (name, address, and telephone), the outcome of the ordered tests and data identifying the person(s) performing tests and/or verifying test results. Here is an example of segments that could be in a result message. It contains some examples of future and optional segments, not all of which would be included in a single message:

MSH|^~\&|1100|LC|VENDOR|LC999999|200510030042||ORU|5689|P|2.3<CR>

PID|1|99999999||99999998|PATIENT^JOHN^MIDDLE||19600505|M|||99 MAIN

STREET^^MYTOWN^NC^11111-9999||(111)222-9999|||||99999999^^^05^^F^N<CR>

NTE|1|L|This NTE information relates to the test observation<CR>

OBR|1|L2435^LAB|6777463-

0^LAB|001032^GLUCOSE^L||19961002122600||||||SICK|200501010000||A12345^LNAME^FNAME^M^^^U~23462^LNAME^FNAME^M^^^L~0123456789^LNAME^FNAME^M^^^N~1234567890 ^LNAME^FNAME^M^^^P|||||200501011200|||F<CR>

NTE|1|AC|NTE segments can be attached to PID OBR and OBX<CR>

OBX|1|ST|014790^AVitamin C^L||1.5|mg/dL|0.4-2.0|||N|F|20050101||200501011200|01<CR>

NTE|1|RC|Greater than 100,000 colony forming units per mL<CR>

SPM|1|A||||||ABDMN^ABDOMEN^L|R^RIGHT^L~INN^INNER^L~UPP^UPPER^L||||SPECIMEN DESCRIPTION|||201304301201<CR>

ZPS|1|01| LABCORP BURLINGTON|1447 YORK

COURT^^BURLINGTON^NC^272152230|8882005439||TITLE^LNAME^FNAME^M^^MD|BNABC <CR><LF>

6.3 Guide to formatting Result messages

The following table provides information on formatting a result message.

General Notes regarding Reporting:

- All information will be provided either in upper or lower case, as it was stored on the LabCorp Lab System. Unless the order was manually OEd or a 2D barcode was scanned, then returned in upper case
- Ordered Item Test ordered by the client.
- Test Order code for individual procedure.
- Panel containing one or more tests; combined in a single orderable item by Test Master Dept.
- Super Panel containing test(s) and panel(s); combined in a single orderable item by Test Master Dept.
- Reporting will depend on the vendor setup in the LIS.

6.3.1 MSH Segment – Message Header

MSH segments will be sent with every specimen reported.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
MSH-0		Segment Type ID	R	3	
		Use: To identify the segment			
		• 'MSH'			
MSH-1	00001	Field Delimiter	R	1	1
		Use: To separate fields			
		• "			
MSH-2	00002	Component Delimiter	R	1	
		Use: To separate components			
		• "At			
		Repeat Delimiter	R	1	
		Use: To identify repeating fields			
		• '~'			
		Escape character	R	1	
		Use: To identify when a delimiter is used in the data as opposed to being used as a delimiter			
		• '\'			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		Sub-component delimiter	R	1	
		Use: To separate sub-components			
		• '&'			
MSH-3	00003	Sending Application	R	15	
		Use: To identify the LabCorp Lab System sending the results. More could be added in the future.			
		'1100' - LabCorp Lab System			
		'DIANON' - DIANON Pathology Systems			
		'ADL' – Acupath Diagnostic Laboratories			
		'EGL' – Esoterix Genetic Laboratories			
		For backward compatibility only: 'CMBP' 'LITHOLINK' 'USLABS'			
MSH-4	00004	Sending Facility	R	10	- 1
		Use: For routing throughout LabCorp systems and to identify the LabCorp laboratory responsible for the client. It could be a LabCorp assigned 'Responsible Lab Code' representing the responsible laboratory or it could be a CLIA number.			
		Alpha, Numeric, or Special Characters			
		LabCorp assigned code representing the responsible laboratory			
		Originally 2 positions; however, a lab code can be up to 5-positions and a CLIA number can be 10 positions			
MSH-5	00005	Receiving Application (LCS Vendor Mnemonic)	R	15	1
		Use: To identify vendor for routing purposes through LCS			
		Alpha, Numeric, or Special Characters			
		Assigned by LabCorp and used for translations			
		Currently up to 8 characters; however, it may be expanded in the future.			
MSH-6	00006	Receiving Facility (Client Site ID)	R	10	1
		Use: To identify client			
		Alpha, Numeric, or Special Characters			
		Assigned by LabCorp and used for routing purposes			
MSH-7	00007	Date/Time of Message	R	12	1
		Use: Record of the date and time the report was released from the LabCorp Lab System.			
		Numeric Characters			
		Format: YYYYMMDDHHMM			
MSH-8	00008	Security	U	N/A	1
		Not currently saved, used, or returned			
MSH-9	00009	Message Type	R	3	I
		Use: To identify a Result Message is being sent			
		• 'ORU'			
MSH-10	00010	Message Control ID	R	20	
		Use: Message identifier.			
		Alpha and Numeric characters			
MSH-11	00011	Processing ID	R	1	1
		Use: To identify 'Production' order			
		• 'P'			
MSH-12	00012	Version of HL7 utilized for the format of this data structure	R	3	<cr></cr>
		Use: To identify HL7 specification version			
		• '2.3' - Release 2.3		<u>L</u>	

6.3.2 PID Segment - Patient Identification

• PID segments will be sent with every specimen reported.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
PID-0		Segment Type ID	R	3	1
		Use: To identify the segment			
		• 'PID'			
PID-1	00104	Sequence Number	R	4	- 1
		Use: To identify the number of the PID segment within the order message. Since LabCorp only allows one patient per order message, LabCorp only allows one PID segment per order message.			
		'1' (leading zeroes will not be sent)			
PID-2	00105	External Patient ID	R	20	1
		Use: Client assigned Patient Identifier used for matching back the results and used by the client on their monthly invoices.			
		Alpha, Numeric, or Special Characters			
		Depending on reporting setups, PID-2 and PID-4 could be returned in a different field than where they were sent in. PID-2 could be returned in PID-4 and vice versa.			
PID-3	00106	Lab Assigned Patient Id	0	11	- 1
		Use: LabCorp Assigned Specimen Number			
		Alpha, Numeric, or Special Characters			
PID-4	00107	Alternate Patient ID	0	20	1
		Use: Client assigned Patient Identifier			
		Alpha, Numeric, or Special Characters			
		Depending on reporting setups, PID-2 and PID-4 could be returned in a different field than where they were sent in. PID-2 could be returned in PID-4 and vice versa.			
PID-5	00108	5.1	R	25	٨
		Patient Last Name			
		Use: Patient demographics			
		Alpha Characters			
		5.2	R	15	٨
		Patient First Name			
		Use: Patient demographics			
		Alpha Characters			
		5.3	0	15	1
		Patient Middle Name			
		Use: Patient demographics			
		Alpha Characters			
PID-6	00109	Mother's Maiden Name	U	N/A	1
		Not currently saved, used, or returned			
PID-7	00110	7.1	R	8	۸
		Patient Date of Birth			
		Use: For patient demographic purposes, for Billing, when a Patient Service Center will be used, and for some tests that require age for calculation of result.			
		Numeric Characters			
		Format: YYYYMMDD			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		7.2	F	3	۸
		Patient Age Years			
		Use: For patient demographic purposes. For future use, when Date of Birth is not sent, and for some tests that require age for calculation of result.			
		Numeric Characters			
		Field should contain three characters (right justified 0 fill)			
		7.3 Patient Age Months	F	2	^
		Use: For patient demographic purposes. For future use, when Date of Birth is not sent, and for some tests that require age for calculation of result.			
		Numeric Characters			
		Field should contain two characters (right justified 0 fill)			
		7.4	F	2	
		Patient Age Days			'
		Use: For patient demographic purposes. For future use, when Date of Birth is not sent, and for some tests that require age for calculation of result.			
		Numeric Characters			
		Field should contain two characters (right justified 0 fill)			
PID-8	00111	Patient Gender	R	1	
		Use: For Patient demographics, for Third Party Bill, and for certain test procedures that require gender for calculation of result.			
		• 'M' – Male			
		• 'F' – Female			
		'N' - Not Indicated			
		• 'U' - Unknown			
PID-9	00112	Patient Alias	U	N/A	I
		Not currently saved, used, or returned			
PID-10	00113	Patient Race	UR	1	
		Use: Race is required for certain test procedures. If maternal serum screening testing will be supported through the interface, this field is required. Used in Inbound file only.			
		• 'A' – Asian			
		'B' – Black or African American			
		'C' –White / Caucasian			
		'H' – Hispanic (for future use see PID-22 for Ethnicity)			
		'I' – American Indian or Alaskan Native			
		'O' – Other Race			
		'X' – Race Not Indicated			
		'J' – Ashkenazi Jewish (only for Integrated Genetics)			
		'S' – Sephardic Jewish (only for Integrated Genetics)			
PID-11	00114	11.1	R	35	^
		Patient Address (Line 1)			
		Use: For patient demographic purposes, for Patient and Third Party Bill, and for Blood Lead Testing.			
		Alpha, Numeric, or Special Characters			
		11.2	UR	35	^
		Patient Address (Line 2)			
		Use: In Inbound file only, for patient demographic purposes, for Patient and Third Party Bill, and for Blood Lead Testing when the Patient Address has a second line. If received it will be concatenated with PID-11.1 up to 35 characters.			
		Alpha, Numeric, or Special Characters			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		11.3	R	16	٨
		Patient City			
		Use: For patient demographic purposes, for Patient and Third Party Bill, and for Blood Lead Testing.			
		Alpha Characters			
		11.4	R	2	^
		Patient State or Province			
		Use: For patient demographic purposes, for Patient and Third Party Bill, and for Blood Lead Testing.			
		Upper case state abbreviation			
		11.5	R	10	1
		Patient Zip or Postal Code			
		Use: For patient demographic purposes, for Patient and Third Party Bill, and for Blood Lead Testing. LabCorp prefers to receive ZIP codes without dashes; however they will be added on result. If a dash is sent, it will not be stored in the system. LabCorp accepts a 5-position or 9-position ZIP code.			
		Numeric Character and Special Characters			
		• Format: ########			
PID-12	00115	Patient County Code	U	N/A	1
		Not currently saved, used, or returned			
PID-13	00116	13.1	R	13	^
		Patient Phone Number			
		Use: For patient demographic purposes, for Patient, Client, and Third Party Bill, and for certain test procedures including Blood Lead Testing. LabCorp prefers to receive phone numbers without dashes or parentheses; however they will be added on result. If dashes or parentheses are sent, they will not be stored in the system.			
		Numeric, and Special Characters			
		• Format: (###)######			
		13.2	0	3	٨
		Telecommunication Use Code			
		Use: Required when Communication Address is provided in PID-13.4.			
		'NET'			
		13.3	0	8	٨
		Telecommunication Equipment Type			
		Use: Required when Communication Address is provided in PID-13.4.			
		• 'Internet'			
		13.4	0	64	1
		Communication Address			'
		Use: To collect patient email address. Required for certain tests which necessitate communication with the patient. This may be expanded to 254 characters in the future.			
		Alpha, Numeric, or Special Characters			
PID-14	00117	Patient Work Phone Number	U	N/A	
		Not currently saved, used, or returned			
PID-15	00118	Language – Patient	U	N/A	
		Not currently saved, used, or returned		1	
PID-16	00119	Patient Marital Status	U	N/A	
		Not currently saved, used, or returned			
PID-17	00120	Patient Religion	U	N/A	
		Not currently saved, used, or returned			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
PID-18	00121	18.1	R	8	٨
		Account Number			
		Use: For client identification purposes and for electronic data retrieval.			
		Alpha, Numeric, or Special Characters			
		"LabCorp Client ID" is the client's eight-digit account number. The client's Salesperson or Account Manager assigns this to the client			
		"Dianon Pathology Client Account Code" is the client's alpha numeric account code. The client's Salesperson or Account Manager assigns this to the client			
		18.2	U	N/A	٨
		Check Digit			
		Not currently saved, used, or returned			
		18.3	U	N/A	٨
		Check Digit Scheme			
		Not currently saved, used, or returned			
		18.4 Bill Code	0	3	۸
		Use: Billing Code used internally by the LabCorp Billing System is returned in results.			
		Alpha, Numeric, or Special Characters			
		18.5	U	N/A	۸
		ABN Flag			
		Not currently saved, used, or returned			
		18.6	С	1	۸
		Status of Specimen			
		Use: Indication of Preliminary or Final report. Required except for Integrated Oncology and Integrated Genetics. Integrated Oncology and Integrated Genetics do not use this field so for them it will be empty.			
		'P' – Preliminary			
		• 'F' – Final			
		blank			
		18.7	С	1	ı
		Fasting			
		Use: Patient demographics. Required for certain test procedures.			
		• 'Y' – Yes			
		• 'N' – No			
		blank			
PID-19	00122	Patient SSN Number	В	9	1
		Use: For patient demographic purposes. If provided on the order it will be returned with the result. Sent as 9 digits without dashes.			
		Numeric Characters			
PID-20	00123	Driver's License Number - Patient	U	N/A	- 1
		Not currently saved, used, or returned			
PID-21	00124	Mother's Identifier	U	N/A	- 1
		Not currently saved, used, or returned			
PID-22	00125	Ethnic Group	F	1	<cr></cr>
		Use: To determine if the patient is of Hispanic origin. For future use.			
		'H' – Hispanic or Latino			
		'N' – Not Hispanic or Latino			
		• 'U' - Unknown			

6.3.3 NK1 Segment - Next of Kin / associated parties segment

- The NK1 segment (Parent/Guardian information) is required when a child (less than 17) specimen(s) are sent.
- Future Use Only for Results.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
NK1-0	N/A	Segment Type ID	F	3	- 1
		Use: To identify the segment			
		• 'NK1'			
NK1-1	00190	Sequence Number	F	4	I
		Use: To identify the number of the NK1 segment within the order message. LabCorp only accepts one NK1 segment per order message.			
		'1' (leading zeroes will not be sent)			
NK1-2	00191	2.1	F	25	^
		Next of Kin Family Name (Last Name)			
		Use: To identify next of Kin.			
		Alpha and Special Characters			
		2.2	F	15	^
		Next of Kin Given Name (First Name)			
		Use: To identify next of Kin.			
		Alpha Characters			
		2.3	F	15	۸
		Next of Kin Second and further given name or initials (Middle Name)			
		Use: To identify next of Kin.			
		Alpha Characters			
		2.4	F	N/A	^
		Next of Kin Suffix (e.g., JR. or III)			
		Not currently saved, used, or returned			
		2.5	F	N/A	I
		Next of Kin Prefix (e.g., DR)			
		Not currently saved, used, or returned			
NK1-3	00192	Next of Kin Relationship	F	3	I
		Use: To identify the relationship to the patient. Currently LabCorp is only collecting guardian information.			
		'GRD' - Guardian			
NK1-4	00193	4.1	F	35	٨
		Next of Kin Address (Line 1)			
		Use: To define Next of Kin Address (Line 1).			
		Alpha, Numeric, or Special Characters			
		4.2	F	35	^
		Next of Kin Address (Line 2)			
		Use: To define Next of Kin Address (Line 2).			
		Alpha, Numeric, or Special Characters			
		4.3	F	16	۸
		Next of Kin City			
		Use: To define Next of Kin City.			
		Alpha Characters			
		4.4	F	2	^
		Next of Kin State or Province			
		Use: To define Next of Kin State or Province.			
		Upper case state abbreviation			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		4.5	F	9	1
		Next of Kin Zip or Postal Code			
		Use: To define Next of Kin Zip or Postal Code. LabCorp prefers to receive ZIP codes without dashes; however they will be added on result. If a dash is sent, it will not be stored in the system.			
		Numeric Characters			
		Note: LabCorp accepts a 5-position or 9-position ZIP code.			
NK1-5	00194	Next of Kin Phone Number	F	10	<cr></cr>
		Use: To define Next of Kin Phone Number. LabCorp prefers to receive phone numbers without dashes or parentheses; however they will be added on result. If dashes or parentheses are sent, they will not be stored in the system.			
		Numeric Characters			

6.3.4 ORC Segment - Common Order Segment

• ORC and OBR segments are paired and some ORC fields are duplicated in the OBR.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ORC-0		Segment Type ID	R	3	
		Use: To identify the segment			
		• 'ORC'			
ORC-1	00215	Order Control	R	2	
		Use: To identify new orders			
		'RE' – Results			
ORC-2	00216	2.1	С	30	٨
		Unique Foreign Accession or Specimen ID			
		Use: Client specific accessioning or specimen identification number. Required for some vendor setups for clinical orders.			
		Alpha, Numeric, or Special Characters			
		The value sent in this field should be the identification value sent on the specimen container.			
		Value received in this field should be unique per patient order, not per test order.			
		The Unique Foreign Accession/Specimen Identification values in ORC- 2 and OBR-2 segments must match.			
		Value in this field is used to receive the electronic order into the LabCorp Lab System.			
		2.2	R	3	
		Application / Institution ID			
		Use: Constant value			
		• 'LAB'			
ORC-3	00217	3.1	R	11	۸
		Filler Accession ID			
		Use: LabCorp Assigned Specimen Number. Used in outbound file only. Reused on a yearly basis.			
		Alpha, Numeric, or Special Characters			
		3.2	R	3	1
		Owner of Accession			
		Use: Constant value. Used in outbound file only.			
		• 'LAB'			
ORC-4	00218	Placer Group Number	U	N/A	ı
		Not currently saved, used, or returned			
ORC-5	00219	Order Status	U	N/A	I
		Not currently saved, used, or returned			
ORC-6	00220	Response Flag	U	N/A	I
		Not currently saved, used, or returned			
ORC-7	00221	Quantity/Timing	U	N/A	٨
		Not currently saved, used, or returned			
ORC-8	00222	Parent	U	N/A	I
		Not currently saved, used, or returned			
ORC-9	00223	Date/Time of Transaction	R	12	1
		Use: Date and time the order entry in the LabCorp Lab System. Used in outbound file only.			
		Numeric Characters			
		Format: YYYYMMDDHHMM			
		The time returned in this field will always be four zeroes (0000).			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ORC-10	00224	Entered By Not currently saved, used, or returned	U	N/A	I
ORC-11	00225	Verified By	U	N/A	I
		Not currently saved, used, or returned	_		
ORC-12	00226	12.1 Ordering Provider ID Number Use: Identifies the Authorizing/Billing provider. Used by certain vendor systems for matching. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information. NPI is required for all orders to identify the provider authorizing the test and/or authorizing the billing.	С	20	^
		Alpha, Numeric, or Special Characters			
		12.2 Ordering Provider Last Name Use: Physician/Provider identification. Required if ORC-12.1 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if	С	25	۸
		both ORC-12 and OBR-16 are valued, they must contain the same information. • Alpha Characters • Inbound only nine characters are accepted for the last name but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 25 characters.			
		·			
		Do not include Suffix or Degree.	0	45	۸
		12.3 Ordering Provider First Initial Use: Physician/Provider identification. Required if ORC-12.2 is sent.	С	15	^
		Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information. • Alpha Characters • Inbound only one character is accepted for the first initial but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 15 characters.			
		12.4	0	15	٨
		Ordering Provider Middle Initial Use: Physician/Provider identification. Used in outbound file only. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information. • Alpha Characters • Not accepted inbound but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 15			
		characters. 12.5 Ordering Provider Suffix (e.g., JR. or III)	U	N/A	۸
		Not currently saved, used, or returned			
		12.6 Ordering Provider Prefix (e.g., DR)	U	N/A	^
		Not currently saved, used, or returned		N 1/0	
		12.7 Ordering Provider Degree (e.g., MD)	U	N/A	^
		Not currently saved, used, or returned			

Field	HL7 Data	Use/Value Field	Required	LCA	Field or
Mnemonic	Element		Field?	Length	Segment Delimiter
		12.8	С	1	~ or
		Source Table			
		Use: Identification of Ordering Provider ID Number sent in ORC-12.1. Required on orders if ORC-12.1 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information. NPI is required for all orders to identify the provider authorizing the test and/or authorizing the billing.			
		'N' - NPI Number (Required for Third Party Bill.)			
		'L' - Local (Physician ID)			
		• 'U' - UPIN			
		'P' - Provider Number (Medicaid or Commercial Insurance Provider ID)			
		Note: For results only interfaces, this field is conditional depending on the source table being provided on the requisition.			
ORC-13	00227	Enterer's Location	U	N/A	I
		Not currently saved, used, or returned			
ORC-14	00228	Callback Phone Number	U	N/A	
		Not currently saved, used, or returned			
ORC-15	00229	Order Effective Date/Time	U	N/A	
		Not currently saved, used, or returned			
ORC-16	00230	16.1	U	N/A	۸
		Order Control Code Reason Identifier			
		Not currently saved, used, or returned			
		16.2	U	N/A	٨
		Order Control Code Reason Text			
		Not currently saved, used, or returned			
		16.3	U	N/A	<cr></cr>
		Order Control Code Reason Name of Coding System			
		Not currently saved, used, or returned			

6.3.5 OBR Segment – Observation Order Segment

- All reflex tests will have an OBR.
- OBR segments will be sent with every specimen reported.
- ORC and OBR segments are paired and some ORC fields are duplicated in the OBR.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
OBR-0		Segment Type ID	R	3	
		Use: To identify the segment			
		'OBR'			
OBR-1	00237	Sequence Number	R	4	
		Use: To identify the OBR segment number. At this time, only forty OBR segments per patient are supported inbound however more than forty could be reported in results			
		Beginning at '1' through '9999', sequentially (leading zeroes will not be sent).			
OBR-2	00216	2.1	С	30	^
		Unique Foreign Accession / Specimen ID			
		Use: Client specific accessioning or specimen identification number. Required for some vendor setups for clinical orders.			
		Alpha, Numeric, or Special Characters			
		The value sent in this field should be the identification value sent on the specimen container.			
		Value received in this field should be unique per patient order, not per test order.			
		The Unique Foreign Accession/Specimen Identification values in ORC- 2 and OBR-2 segments must match.			
		Value in this field is used to receive the electronic order into the LabCorp Lab System.			
		2.2	R	3	1
		Application / Institution ID			
		Use: Constant Value			
		• 'LAB'			
OBR-3	00217	3.1 Internal Accession ID / LabCorp Specimen Number	R	11	٨
		Use: LabCorp Assigned Specimen Number. Reused on a yearly basis. Used in outbound file only			
		Alpha, Numeric, or Special Characters			
		3.2	R	3	1
		Application / Institution ID			
		Use: Constant value			
		• 'LAB'			
OBR-4	00238	4.1	R	15	۸
		Observation Battery Identifier			
		Use: To identify observation. Can be LabCorp test number that was ordered (normally six characters) or a File Identifier.			
		Alpha, Numeric, or Special Characters			
		4.2	R	50	۸
		Observation Battery Text			
		Use: Name of test ordered			
		Alpha, Numeric, or Special Characters			
		4.3	R	2	^
		Name of Coding System			
		Use: Constant value			
		'L' - Local Identifier (LabCorp Identifier)			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		4.4	0	15	٨
		Alternate Battery Identifier (LOINC)			
		Use: Universal test code identifier			
		Alpha, Numeric, or Special Characters			
		4.5	0	50	۸
		Alternate Observation Battery Text (LOINC Description)			
		Use: Test Name			
		Alpha, Numeric, or Special Characters			
		4.6	С	2	
		Name of Alternate Coding System			
		Use: To identify the alternate coding system. Required if a LOINC value is in OBR-4.4.			
		• 'LN' – LOINC			
OBR-5	00239	Priority	U	N/A	
		Not currently saved, used, or returned			
OBR-6	00240	Unused / Not Defined	U	N/A	
		Not currently saved, used, or returned			
OBR-7	00241	Observation/Specimen Collection Date/Time	С	12	1
		Use: Record of the date and time the specimen was collected.			
		Numeric Characters			
		Format: YYYYMMDDHHMM			
		Required if specimen is collected in-house. Usually submitted in order file or manually entered from req. If not submitted a problem code is attached.			
OBR-8	00242	Observation/Specimen Collection End Time	U	N/A	
		Not currently saved, used, or returned			
OBR-9	00243	Collection/Urine Volume (Quantity/Field Value)	С	4	ı
		Use: Informational purposes. Required for certain test procedures.			
		Numeric Characters			
OBR-10	00244	Collector Identifier	U	N/A	ı
		Not currently saved, used, or returned			·
OBR-11	00245	Action Code	С	1	
		Use: To identify the type of result being returned. Sent for applicable results only. Required if result was added-on or reflexed.			, i
		'A' – Add On (limited usage and not applicable for all add on test)			
		'G' – Reflex (lab generated result for test not on the original order)			
		Blank for standard results			
OBR-12	00246	Danger Code	U	N/A	ı
		Not currently saved, used, or returned			· ·
OBR-13	00247	13.1	0	64	٨
		Relevant Clinical Information.			
		Use: Informational purposes. The Clinical Information field has a limitation of only being able to store 62 characters. Any additional characters will be truncated. Up to two extra characters may be returned in the results.			
		Alpha, Numeric, or Special			
		13.2	В	64	I
		Relevant Clinical Information. For Backward Compatibility Only.			'
		Use: Informational purposes			
		Alpha, Numeric, or Special			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
OBR-14	00248	Date/Time of Specimen Receipt in Lab Use: Date and time the order entered in the LabCorp Lab System. Used in outbound file only.	R	12	
		Numeric Characters Format: YYYYMMDDHHMM			
OBR-15	00249	Source of Specimen Use: Identification of location specimen was obtained from the patient Alpha, Numeric, or Special Characters	С	26	I
		If multiple OBR-15 values are sent, only the first occurrence will be stored and returned.			
		 Required for certain test procedures. For results may contain additional clinical comments from ZBL, OBR- 13, and NTEs. 			
		 As of version HL7 2.5, this field has been retained for backward compatibility only. In messages where the SPM segment is present, the use of SPM Specimen segment is favored over this field. 			
		 If a value is received in both OBR-15 and SPM-4, the SPM-4.2 value is stored. 			
OBR-16	00226	16.1 Ordering Provider ID Number Use: Identifies the Authorizing/Billing provider. Used by certain vendor systems for matching. NPI is required for all orders to identify the provider authorizing the test and/or authorizing the billing to a Third Party. Ordering Provider information is required in either ORC-12 or OBR-16 and if both	С	20	۸
		ORC-12 and OBR-16 are valued, they must contain the same information. Alpha, Numeric, or Special Characters			
		 16.2 Ordering Provider Last Name Use: Physician/Provider identification. Required if OBR-16.1 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information. Alpha Characters Inbound only nine characters are accepted for the last name but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 25 characters. Do not include Suffix or Degree. 	С	25	^
		16.3 Ordering Provider First Initial Use: Physician/Provider identification. Required if OBR-16.2 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information.	С	15	٨
		 Alpha Characters Inbound only one character is accepted for the first initial but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 15 characters. 			
		16.4 Ordering Provider Middle Initial Use: Physician/Provider identification. Used in outbound file only. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information. Alpha Characters Not accepted inbound but, at reporting, depending on reporting setups information can be pulled from a NPI table and can be up to 15 characters.	0	15	۸

_		Result Wessage Form					
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter		
		16.5	U	N/A	٨		
		Ordering Provider Suffix (e.g., JR. or III)					
		Not currently saved, used, or returned					
		16.6	U	N/A	۸		
		Ordering Provider Prefix (e.g., DR)					
		Not currently saved, used, or returned		N 1/A	۸		
		16.7	U	N/A	Α		
		Ordering Provider Degree (e.g., MD) Not currently saved, used, or returned					
		16.8	С	1	~ or		
		Source Table		'	01		
		Use: Identification of Ordering Provider ID Number sent in OBR-16.1. NPI is required for all orders to identify the provider authorizing the test and/or authorizing the billing to a Third Party. Required on orders if OBR-16.1 is sent. Ordering Provider information is required in either ORC-12 or OBR-16 and if both ORC-12 and OBR-16 are valued, they must contain the same information.					
		'N' - NPI Number (Required for Third Party Bill.)					
		'L' - Local (Physician ID)					
		• 'U' - UPIN					
		'P' - Provider Number (Medicaid or Commercial Insurance Provider ID)					
		Note: For results only interfaces, this field is conditional depending on the source table being provided on the requisition.					
OBR-17	00250	Order Caliback Phone Number	U	N/A	I		
		Not currently saved, used, or returned	_				
OBR-18	00251	Alternate Unique Foreign Accession / Specimen ID Use: Alternate client specific accessioning or specimen identification	0	11			
		number					
OBR-19	00050	Alpha, Numeric, or Special Characters		NI/A			
OBK-19	00252	Requester Field 2	U	N/A	I		
OBR-20	00253	Not currently saved, used, or returned 20.1	С	30	۸		
OBR-20	00233	Producer's Field 1		30			
		Use: Client specific accessioning or specimen identification number. If Discrete Microbiology Testing is ordered this field is required and is used to identify the 6 character Microbiology Organism Number					
		Alpha, Numeric, or Special Characters					
		20.2	С	30	^		
		Microbiology Organism					
		Use: Required if Discrete Microbiology testing is ordered to identify the Microbiology Organism Name.					
		Alpha, Numeric, or Special Characters					
		20.3	С	1			
		Name of Coding System					
		Use: Required if Discrete Microbiology testing is ordered and is a constant value.					
		'L' – Local Identifier					
OBR-21	00254	Producer's Field 2	U	N/A	I		
		Not currently saved, used, or returned					
OBR-22	00255	Date/Time Observations Reported	R	12	I		
		Use: Identify the date and time the results were released from the LabCorp Lab System. Used in outbound file only.					
		Numeric Characters					
		Format: YYYYMMDDHHMM					

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
OBR-23	00256	Producer's Charge	U	N/A	
		Not currently saved, used, or returned			
OBR-24	00257	Producer's Section ID	С	5	I
		Use: Identification of LabCorp Facility responsible for performing the testing			
		Alpha, Numeric, or Special Characters			
		Required when the test is an ordered item. Panels, Super panels, and reflexes will not have a value Returned.			
		There will be at least one ZPS segment that contains information regarding this LabCorp Facility.			
OBR-25	00258	Order Result Status:	R	1	- 1
		Use: Identification of status of results at the ordered item level			
		'F' – Final			
		'P' – Preliminary			
		'X' – Canceled			
		'C' – Corrected			
OBR-26	00259	26.1	С	6	۸
		Link to Parent Result or Organism Link to Susceptibility			
		Use: Identifies the test that reflexes creating this lab-generated order. Organism Link to Susceptibility only applies to Discrete Microbiology. Required for reflex test.			
		Alpha, Numeric, or Special Characters			
		26.2	С	1	I
		SubID Number			
		Use: Identifies the SubID Number of the parent result. Organism Link to Susceptibility only applies to Discrete Microbiology. Required for reflex test.			
		Alpha, Numeric, or Special Characters			
OBR-27	00221	Quantity/Timing	U	N/A	۸
		Not currently saved, used, or returned			
OBR-28	00260	Courtesy Copies To	U	N/A	I
		Not currently saved, used, or returned			
OBR-29	00261	Link to Parent Order	С	6	<cr></cr>
		Use: Identifies the ordered item containing the test that caused the reflex			
		Alpha, Numeric, or Special Characters			
		Required for reflex test.			

6.3.6 OBX Segment - Result Observation Segment

OBX segments will be sent with every specimen reported.

• Numeric results will not contain commas (IE: 400,000 will report as 400000)

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
OBX-0		Segment Type ID	R	3	
		Use: To identify the segment			
		• 'OBX'			
OBX-1	00569	Sequence Number	R	4	I
		Use: To identify the number of the OBX segment within the order message.			
		Beginning at '1' through '9999', sequentially (leading zeroes will not be sent).			
OBX-2	00570	Value Type	R	2	
		Use: To identify types of data being sent			
		'CE' – Coded Entry			
		'NM' – Numeric			
		'ST' – String Data			
		'TX' – Text			
		'ED' – Encapsulated Data (Embedded Base64 encoded file to follow in ZEF) or as a separate file			
OBX-3	00571	3.1	R	15	^
		Observation Identifier			
		Use: To identify observation. Can be LabCorp test numbers (normally six characters) or a File Identifier.			
		Alpha, Numeric, or Special Characters			
		3.2	R	50	^
		Observation Text			
		Use: LabCorp test name			
		Alpha, Numeric, or Special Characters			
		3.3	R	2	۸
		Name of Coding System			
		Use: Normally the 'L' for LabCorp Local Identifier.			
		'L' - Local Identifier (LabCorp Identifier)			
		3.4	0	15	۸
		Alternate Identifier (LOINC)			
		Use: Universal test code identifier			
		Alpha, Numeric, or Special Characters			
		3.5	0	50	۸
		Alternate Observation Text (LOINC Description)			
		Use: Test Name			
		Alpha, Numeric, or Special Characters			
		3.6	С	2	
		Name of Alternate Coding System			
		Use: To identify the alternate coding system. Required if a LOINC value is in OBX-3.4.			
		• 'LN' – LOINC	<u> </u>		

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
OBX-4	00572	Observation Sub ID	С	6	1
		Use: To aid in the identification of results with the same Observation ID (OBX-3) underneath a given OBR and for PDF reporting to identify the test number to which the PDF is attached.			·
		Alpha and Numeric Characters			
		Required for some vendor setups.			
		This value is used to tie the results to the same organism. Currently, it is numeric. The value in OBX-5.3 tells whether this OBX is the organism, observation, or antibiotic and then the value in OBX-4 links them together as to whether this is for organism #1, organism #2, organism #3, or organism #4.			
OBX-5	00573	5.1	С	21	٨
		Observation Value			
		Use: Reported result. Can be null if coded entries, prelims, canceled, or >21 characters and being returned as an attached NTE. Can identify the type of embedded document or separate file. Required unless coded entries, prelims, canceled, or >21 characters.			
		Alpha, Numeric, or Special Characters			
		'TNP' – will be reported for Test Not Performed and Client must process accordingly into their billing system.			
		5.2	С	75	^
		Type of Data			
		Use: Required if Discrete Microbiology testing is ordered for first line of coded entry. Optional for Embedded Results Files.			
		Alpha, Numeric, or Special Characters			
		First line of code entry for Discrete Microbiology testing			
		'Image' – For embedded file or for a separate file.			
		5.3	С	3	^
		Data Subtype			
		Use: To identify the coding system. Required if Discrete Microbiology testing is ordered to identify Microbiology Result Type.			
		'ANT' – Antibody (for Discrete Microbiology only)			
		'ORM' – Organism identifier (for Discrete Microbiology only)			
		'ORP' – Presumptive organism identifier (for Discrete Microbiology only)			
		'OBS' – Observation (for Discrete Microbiology only)			
		'MOD' – Modifier (for Discrete Microbiology only)			
		'L' – Local Identifier (default when no Microbiology Result Text)			
		'PDF' – Embedded PDF result type or separate PDF file			
		'TIF' – Embedded TIF result type or a separate TIF file.			
		5.4	С	25	^
		Encoding or Identifier			
		Use: For embedded results the type of encoding. For SNOMED CT, the identifier. Required for embedded results or SNOMED CT identifiers.			
		'Base64' – Encoded file type.			
		Alpha, Numeric, or Special Characters - for SNOMED CT			
		5.5	С	22	^
		Data or Text			
		Use: To indicate an embedded document, the name of a separate file, or a textual description of a SNOMED CT identifier. Required for results that are embedded documents, separate files, or have a SNOMED CT Identifier.			
		Alpha, Numeric, or Special Characters - for Name of Separate File or for SNOMED CT.			
		'EMBEDDED DOCUMENT' – Embedded Result Format. Actual Base64 encoded file will be sent in attached ZEF segments in 50K blocks.			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		5.6	С	3	
		Coding System			
		Use: To identify the Coding system of the identifier in OBX-5.4. Required for SNOMED CT.			
		'SCT' – Constant value representing the SNOMED CT coding system.			
OBX-6	00574	6.1	С	15	^
		Identifier			
		Use: To identify the units of measure (Abbreviation)			
		Alpha, Numeric, or Special Characters			
		Note: Sent for applicable results only.			
		Required if there are units of measure unless the units of measure are too large for this field, in which case NTE segments containing the units of measure will follow the OBX.			
		6.2	С	75	٨
		Text			
		Use: To identify the full text of units. Required if abbreviation needs to be clarified.			
		Alpha, Numeric, or Special Characters			
		6.3	0	5	- 1
		Name of Coding System			
		Use: To identify the coding system when the default is not used.			
		'L' – Local Identifier			
OBX-7	00575	Reference Ranges	С	60	- 1
		Use: To identify the reference ranges for the test performed. Required only for applicable results.			
		Alpha, Numeric, or Special Characters			
OBX-8	00576	Abnormal Flags	С	3	~ or
		Use: To identify if the result is an abnormal value for the test performed. Required only for applicable results.			
		'L' - Below Low Normal			
		'H' - Above High Normal			
		'LL' – Alert Low			
		'HH' – Alert High			
		• '<' – Panic Low			
		• '>' – Panic High			
		'A' – Abnormal (applies to non-numeric results).			
		'AA' – Critical Abnormal (applies to non-numeric results).			
		'S' - Susceptible. For Discrete Microbiology susceptibilities only.			
		'R' - Resistant. For Discrete Microbiology susceptibilities only.			
		'I' - Intermediate. For Discrete Microbiology susceptibilities only.			
		'NEG' – Negative for Drug Interpretation Codes and Discrete Microbiology.			
		'POS' – Positive for Drug Interpretation Codes and Discrete Microbiology.			
OBX-9	00577	Probability	U	N/A	1
		Not currently saved, used, or returned			
OBX-10	00578	Nature of Abnormal Test	R	1	1
		Use: Constant value			
		'N' – None - generic normal range			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
OBX-11	00579	Observation Result Status	R	1	
		Use: Status of result for test			
		'P' – Preliminary result, final not yet obtained			
		'X' – Procedure cannot be done, Result canceled due to Non- Performance			
		'F' - Result complete and verified			
		'C' – Corrected Result			
		'I' – Incomplete (for Discrete Microbiology Testing)			
OBX-12	00580	Date of Last Change in reference range or units	С	8	1
		Use: Informational purposes. Required if reference ranges or units are included.			
		Numeric Characters			
		Format: YYYYMMDD			
OBX-13	00581	User-Defined Access Checks	U	N/A	1
		Not currently saved, used, or returned			
OBX-14	00582	Date/Time of Observation	0	12	_
		Use: Date and time tech entered result into the LabCorp Lab System. Entered for performed test but not for canceled test.			,
		Numeric Characters			
		Format: YYYYMMDDHHMM			
OBX-15	00583	Producer ID (Producer's Reference)	С	5	
		Use: Identification of LabCorp Facility responsible for performing the testing. The Lab Name is supplied in the ZPS segment. OBX-15 contains a footnote ID referring to the appropriate ZPS segment.			
		Alpha, Numeric, or Special Characters			
		Will contain a value only at the individual result level, not at the order level and not for calculated results.			
		Not sent for deleted tests since the test was not performed.			
		Required when the test is performed.			
OBX-16	00584	Responsible Observer	U	N/A	
		Not currently saved, used, or returned			
OBX-17	00936	Observation Method	U	N/A	
		Not currently saved, used, or returned			
OBX-18	01479	Equipment Instance Identifier	U	N/A	
		Not currently saved, used, or returned			
OBX-19	01480	Date/Time of the Analysis	U	N/A	1
		Not currently saved, used, or returned			·
OBX-20		Reserved for Harmonizing with v2.6	U	N/A	1
		Not currently saved, used, or returned			·
OBX-21		Reserved for Harmonizing with v2.6	U	N/A	1
		Not currently saved, used, or returned			'
OBX-22		Reserved for Harmonizing with v2.6	U	N/A	I
		Not currently saved, used, or returned			'
OBX-23	02283	Performing Organization Name	С	567	1
	32230	Use: To identify the name of the LabCorp facility responsible for performing the testing. Preadopted from HL7-2.5.1 to meet requirements of the Clinical Laboratory Improvement Amendment (CLIA). Required for certain vendor preferences.		33.	'
		Alpha, Numeric, or Special Characters			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
OBX-24	02284	Performing Organization Address	С	631	I
		Use: To identify the address of the LabCorp facility responsible for performing the testing. Preadopted from HL7-2.5.1 to meet requirements of the Clinical Laboratory Improvement Amendment (CLIA). Required for certain vendor preferences.			
		Alpha, Numeric, or Special Characters			
OBX-25	02285	Performing Organization Medical Director	С	3002	
		Use: To identify the Medical Director of the LabCorp facility responsible for performing the testing. Preadopted from HL7-2.5.1 to meet requirements of the Clinical Laboratory Improvement Amendment (CLIA). Required for certain vendor preferences.			
		Alpha, Numeric, or Special Characters			
OBX-26	02313	Patient Results Release Category	U	N/A	
		Not currently saved, used, or returned			
OBX-27	03308	Root Cause	U	N/A	
		Not currently saved, used, or returned			
OBX-28	03309	Local Process Control	С	4	~ or
		Use: To provide the procedure class or type associated with the results being reported. Preadopted from HL7-2.8. Should always be populated for results and is required for some vendors to correctly process certain procedure classes such as for Microbiology.			<cr></cr>

6.3.7 ZEF Segment - Encapsulated Data Format

• The ZEF segment is used for embedded Files.

Multiple ZEF Segments will be sent when embedded file exceeds 50K.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZEF-0	N/A	Segment Type ID	R	3	1
		Use: To identify the segment			
		• 'ZEF'			
ZEF-1	N/A	Sequence Number	R	4	
		Use: To identify the number of the ZEF segment within the order message.			
		Beginning at '1' through '9999', sequentially (leading zeroes will not be sent).			
ZEF-2	N/A	Embedded File	R	50K	<cr></cr>
		Use: Actual Base64 embedded file sent in 50K blocks to meet HL7 and Engine requirements			
		Alpha, Numeric, or Special Characters			

6.3.8 NTE Segment - Comment

NTE segments can be attached to PID, OBR, and OBX segments.

• There is no limit to the number of NTE seaments supported outbound.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
NTE-0		Segment Type ID	R	3	- 1
		Use: To identify the segment			
		• 'NTE'			
NTE-1	00096	Sequence Number	R	4	
		Use: To identify the number of the NTE segment within the order message.			
		Beginning at '1' through '9999', sequentially (leading zeroes will not be sent).			
NTE-2	00097	Comment Source	R	2	
		Use: To identify source of comment			
		'L' - Laboratory is the source of comment			
		'AC' - Accession Comment			
		'RC' - Result comment			
		'RI' - Normal Comment			
		'UK' - Undefined comment type			
NTE-3	00098	Comment Text	R	78	<cr></cr>
		Use: Comments provided by laboratory			
		Alpha, Numeric, or Special Characters			

6.3.9 SPM Segment - Specimen

- Pre adopted from HL7 2.5 to facilitate sending Specimen Sites with multiple modifiers.
- Up to forty SPM segments each with a unique specimen identifier will be supported per order message.

• Required for Certain test procedures.

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
SPM-0		Segment Type ID	R	3	
		Use: To identify the segment			
		• 'SPM'			
SPM-1	01754	Sequence Number	R	4	
		Use: To identify the SPM segment number. At this time, only forty total SPM segments are supported per order message. If additional SPM segments are sent on orders, the information contained in those segments will be ignored.			
		Beginning at '1' through '40', sequentially per ORC/OBR pair (leading zeroes will not be sent).			
SPM-2	01755	Specimen ID	С	2	
		Use: Unique identifier for the specimen as referenced by the Placer application, the Filler application, or both. The value sent in this field should be the identification value sent on the specimen container.			
		Alpha Characters (A, B, C or AA, AB, AC)			
		Required on orders for Histology.			
SPM-3	01756	Specimen Parent IDs	U	N/A	I
		Not currently saved, used, or returned			
SPM-4	01900	4.1	С	6	^
		Specimen Type - Identifier			
		Use: Describes the precise nature of the entity that will be the source material for the observation.			
		Alpha, Numeric, or Special Characters			
		Required for Microbiology.			
		4.2	С	26	^
		Specimen Type - Text			
		Use: Describes the precise nature of the entity that will be the source material for the observation. This attribute is a textual description of the identifier in SPM-4.1.			
		Alpha, Numeric, or Special Characters			
		Required for Microbiology.			
		In messages where the SPM segment is present, the use of SPM Specimen segment is favored over OBR-15.			
		If a value is received in both OBR-15 and SPM-4.2, the SPM-4.2 value is stored.			
		4.3	С	7	۸
		Specimen Type - Name of Coding System			
		Use: Indicates the coding system used in SPM-4.1			
		Alpha, Numeric, or Special Characters			
		• 'HL70487'			
		Required for Microbiology.			
		4.4	U	18	^
		Specimen Type - Alternate Identifier			
		Use: Describes the precise nature of the entity that will be the source material for the observation. This attribute is an alternate identifier for the same specimen type in SPM-4.1			
		Alpha, Numeric, or Special Characters			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimite
		4.5	U	50	^
		Specimen Type - Alternate Text			
		Use: Describes the precise nature of the entity that will be the source material for the observation. This attribute is a textual description of the identifier in SPM-4.4.			
		Alpha, Numeric, or Special Characters			
		4.6	U	7	^
		Specimen Type - Name of Alternate Coding System Use: Indicates an alternate Coding System Identifier was used in SPM-4.4. Any nationally recognized coding system such as HL7 or SNOMED can be used.			
		Alpha, Numeric, or Special Characters			
		4.7	U	N/A	٨
		Coding System Version ID			
		Use: Indicates an alternate Coding System Identifier was used in SPM-4.4. Any nationally recognized coding system such as HL7 or SNOMED can be used.			
		Alpha, Numeric, or Special Characters			
		4.8	U	N/A	٨
		Alternate Coding System Version ID			
		Use: Indicates an alternate Coding System Identifier was used in SPM-4.4. Any nationally recognized coding system such as HL7 or SNOMED can be used.			
		Alpha, Numeric, or Special Characters			
		4.9	0	26	- 1
		Original Text			
		Use: If the first triplet does not have values, this contains a non-coded value for the source.			
		Alpha, Numeric, or Special Characters			
		 If a value is received in both OBR-15 and SPM-4.9, the SPM-4.9 value is stored. When multiple SPMs under an ORC/OBR pair, the last SPM with values in SPM-4 will be stored. 			
SPM-5	01757	Specimen Type Modifier	U	N/A	I
		Not currently saved, used, or returned			
SPM-6	01758	Specimen Additives	U	N/A	
		Not currently saved, used, or returned			
SPM-7	01759	Specimen Collection Method	U	N/A	
		Not currently saved, used, or returned			
SPM-8	01901	8.1	С	18	۸
		Specimen Source Site - Identifier			
		Use: Provides an identifier to specify the source site from which the specimen was obtained. For example, in the case where a liver biopsy is obtained via a percutaneous needle, the source would be 'liver.' Required for certain test procedures.			
		Alpha, Numeric, or Special Characters			
		Required on orders for Histology.			
		8.2	С	40	۸
		Specimen Source Site - Text			
		Use: Specifies the source site from which the specimen was obtained. For example, in the case where a liver biopsy is obtained via a percutaneous needle, the source would be 'liver.' This attribute is a textual description of the identifier in SPM-8.1. Required for certain test procedures.			
		Alpha, Numeric, or Special Characters			
		Required on orders for Histology.			

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		8.3	С	7	I
		Specimen Source Site - Name of Coding System			
		Use: Indicates a LabCorp or 'local' identifier was used in SPM-8.1. Required for certain test procedures.			
		'L' - Local Identifier (LabCorp Identifier)			
		Required on orders for Histology.			
SPM-9	01760	9.1	С	3	٨
		Specimen Source Site Modifier - Identifier			
		Use: Provides an identifier that contains modifying or qualifying description(s) about the specimen source site. SPM-9 is a repeating field and up to three modifiers may be sent. The use of this attribute is to modify, qualify, or further specify, the entity described by SPM-8. This is particularly useful when the code set used in SPM-8 does not provide the precision required to fully describe the site from which the specimen originated. For example, if the specimen source site was precisely described as 'left radial vein' but the code set employed only provided 'radial vein,' this attribute could be employed to add the modifier 'left.' Required when additional information is needed to describe SPM-8.			
		Alpha, Numeric, or Special Characters			
		Required on orders for Histology when further definition of the Specimen Source Site is needed.			
		9.2	С	35	۸
		Specimen Source Site Modifier - Text			
		Use: Contains modifying or qualifying description(s) about the specimen source site. This attribute is a textual description of the identifier in SPM-9.1. Required when additional information is needed to describe SPM-8.			
		Alpha, Numeric, or Special Characters			
		Required on orders for Histology when further definition of the Specimen Source Site is needed.			
		9.3	С	7	~ or
		Specimen Source Site Modifier - Name of Coding System			
		Use: Indicates the coding system used in SPM-9.1. Required when additional information is needed to describe SPM-8.			
		'L' - Local Identifier (LabCorp Identifier)			
		'HL70542' - HL7 table identifier			
		Required on orders for Histology when further definition of the Specimen Source Site is needed.			
SPM-10	01761	Specimen Collection Site	U	N/A	1
		Not currently saved, used, or returned			
SPM-11	01762	Specimen Role	U	N/A	1
		Not currently saved, used, or returned			
SPM-12	01902	Specimen Collection Amount	U	N/A	I
		Not currently saved, used, or returned			
SPM-13	01763	Grouped Specimen Count	U N/A		
		Not currently saved, used, or returned			
SPM-14	01764	Specimen Description	0	40	I
		Use: This is a text field that allows additional information specifically about the specimen to be sent in the message.			
		Alpha, Numeric, or Special Characters			
SPM-15	01908	Specimen Handling Code	U	N/A	
		Not currently saved, used, or returned			
SPM-16	01903	Specimen Risk Code	U	N/A	

Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
SPM-17	01765	Specimen Collection Date/Time	R	12	1
		Use: The date and time when the specimen was acquired from the source. The use of the Date Range data type allows for description of specimens collected over a period of time, for example, 24-hour urine collection. For specimens collected at a point in time, only the first component (start date/time) will be populated.			
		Format: YYYYMMDDHHMM			
SPM-18	00248	Specimen Received Date/Time	U	N/A	
		Not currently saved, used, or returned			
SPM-19	01904	Specimen Expiration Date/Time	U	N/A	1
		Not currently saved, used, or returned			
SPM-20	01766	Specimen Availability	U	N/A	ı
		Not currently saved, used, or returned			
SPM-21	01767	Specimen Reject Reason	U	N/A	- 1
		Not currently saved, used, or returned			
SPM-22	01768	Specimen Quality	U	N/A	1
		Not currently saved, used, or returned			
SPM-23	01769	Specimen Appropriateness	U	N/A	- 1
		Not currently saved, used, or returned			
SPM-24	01770	Specimen Condition	U	N/A	1
		Not currently saved, used, or returned			
SPM-25	01771	Specimen Current Quantity	U	N/A	ı
		Not currently saved, used, or returned			
SPM-26	01772	Number of Specimen Containers	U	N/A	I
		Not currently saved, used, or returned			
SPM-27	01773	Container Type	U	N/A	
		Not currently saved, used, or returned			
SPM.28	01774	Container Condition	U	N/A	I
		Not currently saved, used, or returned			
SPM.29	01775	Specimen Child Role	U	N/A	<cr></cr>
		Not currently saved, used, or returned			

6.3.10 ZPS Segment - Place of Service

- The ZPS segment is used to report the LabCorp facility that performed the test procedure(s).
- Performed at information must be provided and displayed per CLIA regulations.
- If unable to use ZPS, this information can be sent in each OBX-23, OBX-24, and OBX-25.

Field Mnemonic	HL7 Data Element	e ZPS, this information can be sent in each OBX-23, O Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
ZPS-0	N/A	Segment Type ID	R	3	
		Use: To identify the segment			
		• 'ZPS'			
ZPS-1	N/A	Sequence Number	R	4	- 1
		Use: To identify the number of the ZPS segment within the order message.			
		 Beginning at '1' through '9999', sequentially (leading zeroes will not be sent). 			
ZPS-2	N/A	Facility Mnemonic	R	5	- 1
		Use: Footnote ID or depending on lab code settings an intelligent lab code.			
		Alpha, Numeric, or Special Characters			
ZPS-3	N/A	Facility Name	R	50	- 1
		Use: LabCorp location name that performed the testing			
		Alpha, Numeric, or Special Characters			
ZPS-4	N/A	4.1	R	35	۸
		Facility Address			
		Use: Informational purposes			
		Alpha, Numeric, or Special Characters		N1/A	٨
		4.2	U	N/A	Α
		Facility Other Designation			
		Not currently saved, used, or returned 4.3	R	16	۸
		Facility City	IX.	10	
		Use: Informational purposes			
		Alpha Characters			
		4.4	R	2	۸
		Facility State or Province			
		Use: Informational purposes			
		Upper case state abbreviation			
		4.5	R	9	
		Facility Zip or Postal Code			
		Use: Informational purposes			
		Numeric Characters			
ZPS-5	N/A	Facility Phone Number	R	10	1
		Use: Informational purposes			
		Numeric Characters			
ZPS-6	N/A	Facility Contact	U	N/A	I
		Not currently saved, used, or returned			
ZPS-7	N/A	7.1	R	20	^
		Facility Director Title			
		Use: Informational Purposes			
		Alpha Characters	1		
		7.2	R	20	۸
		Facility Director Last Name			
		Use: Informational Purposes			
		Alpha Characters			

		Troodit int			
Field Mnemonic	HL7 Data Element	Use/Value Field	Required Field?	LCA Length	Field or Segment Delimiter
		7.3	R	20	۸
		Facility Director First Name			
		Use: Informational Purposes			
		Alpha Characters			
		7.4	0	1	۸
		Facility Director Middle Initial			
		Use: Informational Purposes			
		Alpha Characters			
		7.5	U	N/A	۸
		Facility Director Suffix (e.g., Jr., III,)			
		Not currently saved, used, or returned			
		7.6	U	N/A	۸
		Facility Director Prefix (e.g., DR)			
		Not currently saved, used, or returned			
		7.7	0	20	
		Facility Director Degree (e.g., MD)			
		Use: Informational Purposes			
		Alpha Characters			
ZPS-8	N/A	Facility Mnemonic. For Backward Compatibility Only.	В	5	
		Use: Lab code of lab that performed the testing or depending on lab code settings the footnote number.			
		Alpha, Numeric, or Special Characters			
ZPS-9	N/A	CLIA Number	0	10	<cr></cr>
		Use: CLIA number of the performing lab. Only sent if CLIA is needed.			
		Alpha, Numeric or Special Characters			
		Alpha, Numeric or Special Characters			

7 STANDARD REQUISITION

LabCorp clients provide requisitions to request testing services. Requisitions are produced containing one patient per hard copy page. Billing information is included on Requisitions. Please contact our Vendor Connectivity Management Department to obtain a current copy of the Standard Requisition.

The LabCorp Universal Requisition is a hard copy of a request for services from LabCorp. A requisition and a unique control number identifying the order must be generated to request lab services electronically. The laboratory's accessioning/data entry staff will use the requisition to enter orders into the system if the EDI transmission should fail. Refer to section 9 for 2D Barcode details.

8 STANDARD MANIFEST

A manifest is a summary of requisitions entered by the client. Manifests should be sent for client billed orders only. If other billing options are to be sent, requisitions should be printed. Please contact our Vendor Connectivity Management Department to obtain a current copy of the Standard Manifest.

The LabCorp Universal Manifest is a hard copy summary of requests for services from LabCorp. A manifest entry and a unique control number identifying that entry must be generated for each order to request lab services electronically. The laboratory's accessioning/data entry staff will use the hard copy manifest to enter orders into the system if the EDI transmission should fail. Refer to section 9 for 2D Barcode details.

9 LABCORP 2D BARCODE

2D Barcodes are used on requisitions and manifest submitted to LabCorp. 2D barcodes allow the orders to be accessioned without the order file. The 2D barcode contains information that is in an order file – patient demographics, billing information, tests, and AOEs. It contains the embedded requisition and/or order file information. Please contact LabCorp to obtain a current copy of the LabCorp 2D Barcode Specifications.

Client Connectivity Page 105 of 110
External EDI Specifications for Reference Lab Interfaces Version 10.10

10 REVISIONS

Revision #	Date	Author	Changes
10.0	12/31/2007	K. Walsh	Correcting problems reported by users. Correcting typing errors. Including changes from the LCLS specifications. Deleting the glossary. Rewriting Manifest, Requisition, and 2D Bar Code information. Rewriting the billing section. Rewriting the communications section and including the ACK message. Adding a section on the verbose parser. Adding notes concerning NPI and lab code expansion. Changing to zero based numbering scheme. Including discrete microbiology information in OBR-20, OBR-25, OBR-26, OBX-5, OBX-11, and NTE-2 for results. Adding PSC as a receiving application in MSH-5 for orders. Adding Dianon and USLABS as valid lab types in MSH-3 for results. Adding Dianon to OBX-5.1 for Dianon .PDF Results Files. Adding ZEF segment for .PDF embedded file. Changing ZCI-1 for Height in inches from unused to conditional. Adding ZCI-2.3 for weight in ounces. Changing eligibility flag IN1-25 and date IN1-26 from unused to optional. Adding ZCC segment for courtesy copy requests. Adding ZPS comments to OBR-24 and OBX-15 and adding fields ZPS-8 and ZPS-9. Adding OBX-23, OBX-24, and OBX-25 for future use due to a recent interpretation of the CLIA requirements. Adding new Maternal Serum Screening questions to the ZSA segment. Adding Cash Sale field information for PSC to PID-18.4 and PID-23.2. Changing PID-19 SSN to B for backward compatibility only. Adding future fields for ethnicity PID-22, patient age PID-7.2, and physician middle initial ORC-12.4 and OBR-16.4.
10.1	5/1/2008	K. Walsh	Clarify billing on page 11 and in PID-18.4. Change part to party on pages 26 and 28. Change provided to provider on page 13. Change Ordering Provider ID to always required for Medicare. Change ZCY fields from required to optional. Change OBX-14 to optional. Add CLIA comment to ZPS-8 and ZPS-9. Add note to OBR-3.1 that the Internal Accession ID is reused yearly. Remove comment from OBR-14 that time is always 0000. Update OBR-13. Update OBR-4.1 to clarify results. Add LITHOLINK and CMBP as options for MSH-3. Add USLABS, LITHOLINK, and CMBP as options for OBX-5. Change OBX-7 length to 60. Update OBR-15 length and comments. Remove discrete microbiology comments from NTE-2. Update PID-18.4 and PID-18.5 to reflect actual lab results. Remove comment about dashes from PID-19. Change Last Name length to 25 and update comments in ORC-12, OBR-16, and PV1-7. Remove the verbose parser section.

			Revisions
Revision #	Date	Author	Changes
10.2	10/28/2010	K. Walsh	Remove references to the Verbose Parser section. Update operating system requirements for HyperSend. Add ZCY-36 for Hysterectomy, Supracervical. Update Billing information. Change IN1-19 from unused to future and breakout five subfields for Insured's Address. Make line 2 optional for all address fields. Expand IN1-16 for future use. Change IN1-15 to Backward Compatibility Only. Change PID-18.4 length from 2 to 3. Change PID-13 to conditional for orders. Change PID-7.1 Patient Date of Birth to Required. Change PID-8 Patient Gender to Required. Add 'C'-Cancelled as an option for OBR-11. Add comment to Yes/No questions for ZCI, ZCY, and ZSA to say to send blank instead of defaulting. Add Abnormal Flags S, R, and I to OBX-8. Remove VCMRequests email directions. PID-3 changed to Backward Compatibly Only for results. Update OBR-3 and ORC-3 so that use matches. For OBR-13, clarify that only 62 characters can be stored but up to two extra characters may be returned. Reword explanation at the front of the NTE. Reword MSH-3, MSH-5, and MSH-6. Change ZBL-5 to B for backward compatibility only. Remove 'U' - Urine as a current option for ZBL-3 Blood Lead Type. Add (Required for Third Party Bill.) to ORC-12.8 and OBR-16.8 for NPI. Update ED description for OBX-2. Update CMBP to LCLS in OBX-5.1 and add "separate PDF file" in OBX5.3. Update DG1 for ICD-10. Add (right justified 0 fill) to explain several order entry fields. Reword Data Transfers and Client Requirements sections. Expand DOB requirements. Reword MSH-2 Escape character description. Update OBR segment comments. Remove section 2.6 Asynchronous Dial-Up (Modem to Modem). Add ERR segment for Acknowledgements. Rearranged order and results formatting sections. Add CMBP, LITHOLINK, DIANON, and USLABS as options for MSH-5. Remove CLIA comment from ZPS-8. OBR-9.2 changed to Backward compatibility. Update 2D Bar Code information in section 9. Correct spelling errors. Change Customer to Client. Remove the PV1 segment. Remove old department name. Reword ZSA-2.1, ZSA-2.2, ZSA-2
10.3	7/20/2012	K. Walsh	Increase number of allowable DG1 segments from 12 to 120. Update description of DG1-1 and DG1-2. Update DG1-3 for future 10 character codes. Update DG1 example in section 5.2. Update requirement and use descriptions for PID-2, PID-5.2, PID-7.1, PID-8, PID-10, PID-13, ORC-2.1, ORC-12, OBR-11, OBR-15, OBR-16, OBR-20, OBR-24, OBR-29, OBX-3.6, OBX-5.1, ZCI-1, ZCI-2.3, ZCI-4, and ZSA-12. Change PID-5.2 from Conditional to Required. Change PID-4 from

Revision #	Date	Author	Changes
			Required to Optional based on Rules for Patient ID. Updated Billing section and PID-18.4 for Special Billing. Update LOINC information in OBR-4 and OBX-3. Update Microbiology in OBX-5. Add AA, NEG, and POS to OBX-8 Abnormal Flags for results, make field repeating, and update Microbiology descriptions. Remove "'C' – Cancelled" from OBR-11 for results. PDF descriptions reworded to cover other file types. Options added to MSH for ACK. EGL and ADL added to MSH-5 for orders and to MSH-3 for results, Integrated Genetics and Integrated Oncology added to PID-10 and PID-18.6, and segments ZRE and ZON added. Update ZBL-1 and PID-10 race descriptions. Change GT1-11 from Required to Optional. Change IN1-3.1 from Unused to Future. Update outbound NTE segment comments. Remove HMO. Add NK1 for future use. Add maximum to LCA Length description. Update title and description of IN1-31. Update the communications section removing Frame Relay or Leased Line and adding FTP and SFTP. Change Priority, Callback number, and ABN to Unused since they were not being sent to the lab. Change OBX-4 from numeric to alpha and numeric. Clarify that version 10.3 is based on HL7 2.3 on the title page and in section 1.
10.4	7/3/2013	K. Walsh	Pre adopt SPM segment and update ZCY segment to facilitate sending body sites and modifiers. Add ZAP segment for Dianon orders. Update ORC-2 and OBR-2 for consistency and to make conditional for Dianon. Update OBR-15 description. Increase the length of ZPS-3 from 30 to 50. Update PID-18 to include Dianon Client Account Codes. Add optional and future segments to sample messages and update message format explanations. Sequence Number fields updated to be more consistent. Update GYN Source and Previous Treatment. Update ZCC-1.3, OBR-16.8, OBX-4, and ZCI-3.1 to clarify usage. Change 0 to 0 in the "Required Field?" column for four fields. Change Provided to Provider in the General Notes paragraph 3. In section 2.3.2, Capitalize C in LabCorp. For ZON-5.1, add missing single quote and remove extra space. Add some periods. Correct spelling in ZCY-18. Change IN1-25 and IN1-26 to Unused and to N/A in the Billing section. Change OBX-3.6 to OBX-5.3 in OBX4. Change ZBL-1, ZBL-2, and ZBL-3 from conditional to required and update usage descriptions. Update required field and usage descriptions for ZSA per feedback from CMBP. Update description of ZPS-7.4, ZPS-7.5, ZPS-7.6, ZPS-7.7, NK1-2.1, NK1-2.2, NK1-2.3, NK1-2.4 NK1-2.5, NK1-3.1, NK1-3.2, and NK1-3.3. Update phone numbers and zip codes concerning dashes and parentheses in PID-11.5, PID-

			IXEVISIOIIS
Revision #	Date	Author	Changes
			13, NK1-4.5, NK1-5, IN1-5.5, GT1-5.5, and GT1-6. Change OBX-6.3 from R to O.
10.5	7/17/2013	K. Walsh	Add ZSA-19.3 for Harmony test. Correct SPM-4 subfield delimiters. Change = to - for consistence.
10.6	8/2/2013	K. Walsh	Changed ZSA-19.3 to remove Harmony and make responses single characters. Add Dysplasia Low and Dysplasia High as Previous Cytology Information fields and make Dysplasia for backward compatibility only in ZCY. Correct NK1 segment delimiter.
10.7	11/21/2014	K. Walsh	Changed NK1 segment inbound from future use to conditional when a child's specimen(s) are sent and added to outbound as future use. Changed SPM segment from future use to conditional. For ZCI, updated existing fields and added new fields. Updated Unused fields to be more consistent. Moved the general notes section above the communications section. Updated the operating systems for HyperSend. Added note to ZAP segment. Change IN1-3.2 from Required to Conditional. For NPI updated example code, added note to billing information table, and reordered source table. Removed from MSH-5 inbound 'CMBP' (never used), 'LITHOLINK' (replaced by 1100), 'USLABS' (replaced by ADL), and 'ADL' (results only). Removed from MSH-3 outbound 'CMBP' (never used), 'LITHOLINK' (replaced by 1100), 'USLABS' (replaced by ADL).
10.8	11/17/2016	K. Walsh	Add ZPM segment to send medication information. Rearrange and add to ZON segment. Add OBX-5.6 and update OBX-5-4 and OBX-5.5 for SNOMED. Add OBX-28 for reporting procedure classes. Remove future statement from SPM-4.2 and OBR-15. Add clarification to SPM-4 for Multiple SPM segments per ORC/OBR pair. Change SPM-2 from Alpha Numeric to Alpha. Correct numbering for IN1-33. Update PID-13 description and add email. Update HL7 Logo. Updated LabCorp Logo. Update escape sequence explanation. Replace Hypersend with LKTransfer. Update the Communications section. Update the Billing Section. Change GT1-16 from Optional to Conditional and update description. Change IN1-3.1 from Future to Optional. Change Third Party Billing to Third Party Bill. Add customer contract information. For orders, update MSH-5 to make PSC for backward compatibility only. For ACK, update MSH-5 to make CMBP, Litholink, and USLABS for backward compatibility only. For ACK, update MSH-7 description. Remove 2.2 from MSH-12. Change PID-2, PID-11, IN1-31, GT1, and GT1-6 from Conditional to Required and update description. Change field length of Guarantor First Name GT1-3.2 to 9. Change GT1-11 from Optional to Required and update description.

Revision #	Date	Author	Changes
			Update IN1 and ZPS segment descriptions. Change NK1-3 from Unused to Required and update description. Change MSH-10 from Unused for orders and optional for ACK to Required and update description. Add clarification to ZCC. Remove ICD9 from DG1-3.3. Update ZCI-3.1 description and change from Optional to Conditional. Update ZCI-5 and ZCI-6 description to add "and desirable for all orders." Add ZCI-7 for pulse. Add ZCI-8 for Patient email. Update PID-4, PID-18.4, PID-19, IN1-3.2, IN1-36, NK1-2, ORC-9, OBR-1, OBR-3, OBR-9, ORC-12, OBR-16, OBR-25, ZSA-12, ZSA-13, ZSA-14, ZSA-19.2, ZSA-19.3, ZSA-20, ZSA-21, and ZSA-22 description. Move ZAP from last to first Z segment under the OBR. Add a code to ZCY-23, ZCY-40, and ZCY-41. Update OBX-4 description and length. Update OBX-23, OBX-24, and OBX-25 description and change from Future to Conditional. For PID-18.5 in orders, correct the delimiter. Change orders to order and results to result in the general notes section. Update the Use/Value Field description. Update footer to Client Connectivity. Add Pathology to Dianon. Update title and wording of 2D Barcode section. Add segment and file delimiters to message examples. Update the sample order message description and segments. ZRE-9 marked for backward compatibility only.
10.9	6/27/2017	K. Walsh	Change Pain Management to Patient Medication in section 5.1 table. Reword ZPM segment comment. Change wording of ZPM-7 and ZPM-8 and add ZPM-9 and ZPM-10. Change ZPM-2 length from 30 to 125. Remove FTP. PID-4 inbound changed from 10 to 20 characters. Add ZCI-9 Due Date and ZCI-10 Pre-Pregnancy Weight for PreTRM Test. For Noninvasive Prenatal Testing (NIPT), add ZSA-29 through ZSA-36 and add comments to ZSA-2.3, ZSA-5.1, ZSA5.2, ZSA-6, and ZSA-12.
10.10	1/30/2018	K. Walsh	In the ZPM segment description change "Pain Management and other research" to "Medical Drug Monitoring". Change ZPM-3 - Brand from 30 to be 75 characters. Change ZPM-6.2 - Description / Text from 40 to 75 characters. Change ZPM-6.9 - Free Text Drug Name / Original Text from 40 to 75 characters. Update the ZON in the Sample Order Message.