2015 S&CC Test Data for 170.315 (b) (9) – Care Plan Documentation

In-Patient Setting

1. **Introduction**

This document contains sample test data that can be used for the certification towards 2015 objective 170.315(b)(9). This section of the Code of Federal Regulations Title 45 documents the required Health IT technology to be create care plan documentation formatted according to the Consolidated CDA (C-CDA) Release 2.1

1. Test of 45 CFR 170.315 (b) (9)

<Include text of 45 CFR 170.315 (b) (9) here for reference>

1. Summary of test data presented herein

To exemplify 170.315 (b) (9), the following clinical scenario will be employed.

**Document Narrative:**

Ms. Isabella Jones is a 45 year old female with a history of Hypertension, Hypothyroidism, Iron deficiency and is a recipient of Renal Allograft is admitted on 6/24/2015 to Community Health and Hospitals with history of intermittent fever for 2 days. The patient disclosed history of nausea, loose stools and weakness. She was found to have Anemia secondary to iron deficiency and CKD. After conducting multiple tests and administering necessary medications, the patient was discharged to Ambulatory facility to follow up with immunosuppression as an out-patient. The condition of the patient at discharge was stable, with controlled blood sugar levels and a pain score below 3. Additional follow up instructions have been provided to the patient.

1. **Header Data**

The following data is part of the medical record header identifying the contextual information necessary when exchanging data.

1. Patient Demographics

|  |  |  |  |
| --- | --- | --- | --- |
| **CCDS Data Elements** | **Contextual Data Elements required for the Medical Record encoding to C-CDA IG** | **Details** | **Additional Information** |
| Patient Name |  | First Name: Isabella  Last Name: Jones |  |
| Sex |  | Female |  |
| Date of Birth |  | 5/1/1970 |  |
| Race |  | White |  |
| Ethnicity |  | Not Hispanic or Latino |  |
| Preferred Language |  | English |  |
|  | Home Address | 1357, Amber Dr, Beaverton, OR-97006 |  |

1. Relevant Information regarding the Visit

|  |  |  |  |
| --- | --- | --- | --- |
| **CCDS Data Elements** | **Contextual Data Elements required for medical record encoding to C-CDA** | **Details** | **Additional Information** |
| Referring or Transitioning Providers Name |  | Dr Henry Seven | Dr Seven and his staff work for Community Health and Hospitals  1002, Healthcare Dr, Portland, OR-97266 |
| Office Contact Information |  | Mary McDonald  Telephone: 555-555-1002 |  |
|  | Author/Legal Authenticator/Authenticator of Electronic Medical Record | Dr Henry Seven  Time: 6/24/2015 |  |
|  | Data Enterer during visit | Mary McDonald |  |
|  | Informants | Frank Jones (Spouse) |  |
|  | Electronic Medical Record Custodian | Community Health and Hospitals |  |
|  | Information Recipient | Dr Henry Seven |  |
|  | Admission Date | 6/22/2015 |  |
|  | Discharge Date | 6/24/2015 |  |
|  | Care Team Members | Dr Henry Seven  Mary McDonald |  |
|  | Other Participants in event | Mr Ralph Issac (Grand Parent)  Mr Frank Jones(Spouse) |  |
|  | Event Documentation Details or Documentation of Event | Dr Henry Seven (PCP)  2 day encounter  Event Code = Anemia | Code for Anemia Finding: **164139008** , Code System: SNOMED-CT |

1. **Body Data**

The following data is part of the medical record details identifying the relevant clinical data captured as part of the visit.

1. Medication Allergies

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Code | CodeSystem | Allergy Substance | Reaction | Severity | Status |
| 7982 | RxNorm | Penicillin G benzathine | Hives | Moderate | Active |
| 81953 | RxNorm | Ampicillin Sodium | Hives | Moderate | Active |

1. Medications Administered during stay (These medications were administered during the stay at the hospital)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Code | CodeSystem | Medication | Start Date | Route | Frequency | Dose |
| 563973 | RxNorm | Ceftriaxone 250MG/ML | 6/22/2015 | Injectable | BID | 250MG/ML |
| 47835 | RxNorm | Vantin (cefpodoxime 100mg) | 6/22/2015 | Oral | BID | 100mg |
| 209459 | RxNorm | Tylenol 500mg | 6/22/2015 | Oral | As needed | 500 mg |
| 576586 | RxNorm | Darbepoetin Alfa 0.5 MG/ML | 6/22/2015 | Injectable | Once a week | 0.5 MG/ML |
| 748747 | RxNorm | Clindamycin 300mg | 6/22/2015 | Oral | TID | 300 mg |
| 568809 | RxNorm | Torsemide 20mg | 6/22/2015 | Oral | Qd | 20 mg |
| 40144 | RxNorm | Levothyroxine Sodium | 6/22/2015 | Oral | QD | - |
| 668657 | RxNorm | Prednisolone 10mg | 6/22/2015 | Oral | QD | 10mg |
| 860887 | RxNorm | FenoFibric Acid 35 mg | 6/22/2015 | Oral | QHS | 35mg |
| 541585 | RxNorm | Mycophenolic Acid 360 mg | 6/22/2015 | Oral | BID | 360 mg |
| 977435 | RxNorm | Everolimus 0.5 mg | 6/22/2015 | Oral | BID | 0.5 mg |
| 848958 | RxNorm | Ciprofloxacin 2mg/ml | 6/22/2015 | Oral | TID | 2mg/ml |

1. Problems

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Code | CodeSystem | Problem Name | Start Date | Status |
| 59621000 | SNOMED-CT | Essential hypertension (Disorder, ) | 10/5/2015 | Active |
| 83986005 | SNOMED-CT | Severe Hypothyroidism (Disorder) | 31/12/2006 | Active |
| 236578006 | SNOMED-CT | Chronic rejection of renal transplant (disorder) | 31/12/2011 | Active |
| 87522002 | SNOMED-CT | Iron deficiency anemia (disorder) | 6/22/2015 | Active |
| 64667001 | SNOMED-CT | Interstitial pneumonia (disorder) | 6/22/2015 | Active |

1. Encounter Diagnoses

|  |  |  |  |
| --- | --- | --- | --- |
| Code | CodeSystem | Description | Start Date |
| D63.1 | ICD-10 | Anemia in Chronic Kidney Disease | 6/22/2015 |

1. Procedures

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Code | CodeSystem | Procedure Name | Target Site | Start Date | End Date |
| 10847001 | SNOMED-CT | Bronchoscopy | 91724006  (Tracheobronchial structure (body structure) | 6/22/2015 | 6/22/2015 |
| 168731009 | SNOMED-CT | Chest X-Ray, PA and Lateral Views | 82094008 (Lower Respiratory Tract Structure) | 6/22/2015 | 6/22/2015 |

1. Functional Status and Cognitive Status

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Functional Condition | Code | Code System | Date | Status |
| Dependence on Cane | 105504002 | SNOMED-CT | 6/22/2014 | Active |
| Memory Impairment | 386807006 | SNOMED-CT | 6/22/2014 | Active |
| Amnesia (Cognitive Status) | 48167000 | SNOMED-CT | 6/22/2014 | Active |

1. Immunizations or Immunizations Administered during visit

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Vaccine Code | CodeSystem | Vaccine Name | Date | Status |
| 88 | CVX | Influenza Virus Vaccine | 5/10/2014 | Completed |
| 103 | CVX | Tetanus and diphtheria toxoids | 1/4/2012 | Completed |

1. Vital Signs

|  |  |  |
| --- | --- | --- |
| Vitals | Date | Value |
| Height | 6/22/2015 | 177 cm or 69 inches |
| Weight | 6/22/2015 | 88 kg or 194 lbs |
| Blood Pressure | 6/22/2015 | 145/88 mmHg |

1. Laboratory Values/Results

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Test Code** | **Code System** | **Name** | **Actual Result** | **Date** | **Reference Range** |
| 30313-1 | LOINC | HGB | 10.2 g/dl | 6/22/2015 |  |
| 33765-9 | LOINC | WBC | 12.3 (10+3/ul) | 6/22/2015 | N/A - 500,000 |
| 26515-7 | LOINC | PLT | 123 (10+3/ul) | 6/22/2015 |  |
| 50544-6 | LOINC | Everolimus Blood | 10 ng/ml | 6/22/2015 | 3.0-8.0 ng/ml |

1. Smoking Status

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Element Description** | **Description** | **Start Date** | **End Date** | **Code** | **Code System** |
| Smoking Status | Former Smoker | 5/1/2005 | 2/27/2011 | 8517006 | SNOMED-CT |
| Cigarette Smoking | Current every day | 2/27/2011 | - | 449868002 | SNOMED-CT |

1. UDI List

|  |  |
| --- | --- |
| **Device Id** | **Purpose** |
| 1233444 | CRT |

1. Assessment and Plan of Treatment
   1. Goals: Review with Dr Seven after 1 week with prior appointment. Follow up with Outpatient facility for Immunosuppression treatment.
   2. Health Concerns: For Fever of > 101.5 F, or onset of chest pain/breathlessness contact Emergency.
2. Discharge Instructions
   1. Diet: Diabetic low salt diet
   2. Medications: Take prescribed medications as advised.
   3. Appointments: Schedule an appointment with Dr Seven within 1 week. Follow up with Outpatient facility for Immunosuppression treatment.