Diagnostic Lab Ordering for COVID-19 Testing

Version: 1.0

Last revised on August 4, 2021

Suggest Edits

Author: Nick Biala

References

- FHIR http://hl7.org/fhir/
- SMART on FHIR http://docs.smarthealthit.org/
- Health Gorilla Clinical Network OAuth 2.0 Guide v1.3
- Health Diagnostic Network API
- HealthGorilla FHIR Profiles v1.0
- HealthGorilla FHIR Extensions v1.0
- HealthGorilla FHIR ValueSet v1.0

HL7 FHIR

Health Gorilla RESTful API is based on FHIR protocol version 3. Some custom resource profiles are defined and extension mechanisms are used to introduce some attributes and operations that are absent in the original protocol.

Access Control

Health Gorilla implements SMART-on-FHIR profile and uses OAuth 2.0 framework for authentication and authorization. You need to obtain an access token and include it into the request to access the desired API endpoint. See link for details https://developer.healthgorilla.com/docs/oauth20

Diagnostic Laboratories workflow

The common workflow is as follows:

See link for further details: https://developer.healthgorilla.com/docs/oauth20

1. Find the organization and extend the value set to facility-type to include Diagnostic Laboratory name.
2. Locate the compendium of tests to find the uuid and code for **139902019 2019 Novel Coronavirus (CoVID-19), NAA**.
3. Use the uuid and test code to find the questionnaire for the order
4. Find the practitioner providing the test for the order to gather detail.
5. Create or get the patient to obtain the patient id to include in the order.
6. Create Diagnostic Lab Order using the ResourceGroup resource type.
7. Use the RequestGroup resource to create diagnostic lab order.

1. Find Organization to extend facility type for laboratory name.

API method that allows to search for laboratory based on name

The Laboratory provider is represented by Organization resource of type:

- Organization Type
- Extend the API using the FHIR Value Set to facility-type

https://www.healthgorilla.com/fhir/organization-type/fhir/Organization?type=https://www.healthgorilla.com/facility-type|DiagnosticLaboratories&name= {laboratory value description}

Request

This is a common SEARCH operation that retrieves only Organization resources of a certain facility type. i.e. Diagnostic Laboratory, Radiology...

HTTP GET

https://api.healthgorilla.com/fhir/Organization?type=https://www.healthgorilla.com/facility-type|code&name = {laboratory value description}

Parameters

name {laboratory value description}
type: https://www.healthgorilla.com/facility-type|code&name

Example

Search for organization which includes facility type and name. This example shows Diagnostic Laboratory and LabCorp

HTTP GET

Response

The operation returns a bundle of resources matching the specified criteria.

Example

```xml
<Bundle xmlns="http://hl7.org/fhir">
    <id value="eef2dd11-4811-41dc-8ab1-eb2a25609461"/>
    <meta>
        <lastUpdated value="2019-10-17T16:57:24.039+00:00"/>
        <profile
value="https://healthgorilla.com/fhir/StructureDefinition/hg-stateless-bundle"/>
    </meta>
    <type value="searchset"/>
    <total value="2"/>
    <link>
        <relation value="self"/>
        <url
value="https://api.healthgorilla.com/fhir/Organization?type=https://www.healthgorilla.
com/facility-type%7CDiagnosticLaboratories&amp;name=LabCorp"/>
    </link>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/Organization/f-a855594f43fe879c6570b92e"/>
        <resource>
            <Organization xmlns="http://hl7.org/fhir">
                <id value="f-a855594f43fe879c6570b92e"/>
                <text>
                    <status value="generated"/>
                    <div xmlns="http://www.w3.org/1999/xhtml">LabCorp</div>
                </text>
                <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/provider-compendium">
                    <valueReference>
                        <reference value="ValueSet/f-a855594f43fe879c6570b92e"/>
                    </valueReference>
                </extension>
                <active value="true"/>
                <type>
                    <coding>
                        <system value="http://hl7.org/fhir/organization-type"/>
                        <code value="prov"/>
```

```xml
                            <display value="Healthcare Provider"/>
                        </coding>
                        <text value="Diagnostic Laboratories"/>
                    </type>
                    <type>
                        <coding>
                            <system
value="https://www.healthgorilla.com/fhir/organization-type"/>
                            <code value="F"/>
                            <display value="Facility"/>
                        </coding>
                    </type>
                    <type>
                        <coding>
                            <system value="https://www.healthgorilla.com/facility-type"/>
                            <code value="DiagnosticLaboratories"/>
                            <display value="Diagnostic Laboratories"/>
                        </coding>
                    </type>
                    <name value="LabCorp"/>
                </Organization>
            </resource>
            <search>
                <mode value="match"/>
            </search>
        </entry>
        <entry>
            <fullUrl
value="https://api.healthgorilla.com/fhir/Organization/f-0e22ee51127914bc759da9e7"/>
            <resource>
                <Organization xmlns="http://hl7.org/fhir">
                    <id value="f-0e22ee51127914bc759da9e7"/>
                    <text>
                        <status value="generated"/>
                        <div xmlns="http://www.w3.org/1999/xhtml">Medi - Lab
Corporation</div>
                    </text>
                    <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/provider-compendium">
                        <valueReference>
                            <reference value="ValueSet/f-0e22ee51127914bc759da9e7"/>
                        </valueReference>
                    </extension>
                    <active value="true"/>
                    <type>
```

```xml
                    <coding>
                        <system value="http://hl7.org/fhir/organization-type"/>
                        <code value="prov"/>
                        <display value="Healthcare Provider"/>
                    </coding>
                    <text value="Diagnostic Laboratories"/>
                </type>
                <type>
                    <coding>
                        <system
value="https://www.healthgorilla.com/fhir/organization-type"/>
                        <code value="F"/>
                        <display value="Facility"/>
                    </coding>
                </type>
                <type>
                    <coding>
                        <system value="https://www.healthgorilla.com/facility-type"/>
                        <code value="DiagnosticLaboratories"/>
                        <display value="Diagnostic Laboratories"/>
                    </coding>
                </type>
                <name value="Medi - Lab Corporation"/>
            </Organization>
        </resource>
        <search>
            <mode value="match"/>
        </search>
    </entry>
</Bundle>
```

2. Find the compendium of tests using ValueSet

API method that allows to search for specific tests

ValueSet endpoint implements the common FHIR expand operation, that should be used to lookup for a specific test. See https://www.hl7.org/fhir/valueset-operations.html#expand.

The following attributes are supported:

The provider-compendium can be found in the Organization resource of type:

- ValueSet
- Extend the API using the FHIR Value Set to provider-compendium

https://api.healthgorilla.com/fhir/ValueSet/provider-compendium/$expand?filter=testName

Request

This is a common SEARCH operation that retrieves only the specific tests based on provider-compendium and filtered test name.

- HTTP GET

https://api.healthgorilla.com/fhir/ValueSet/f-a855594f43fe879c6570b92e/$expand?filter=Lead

Parameters

Filter = test name

Required

Provider-compendium

Test name

Example

Search for compendium of tests which includes uuid and code. This example shows f-a855594f43fe879c6570b92e and Lead

- HTTP GET

https://api.healthgorilla.com/fhir/ValueSet/f-a855594f43fe879c6570b92e/$expand?filter=Lead

Response

The operation returns a bundle of resources matching the specified criteria. This is a stateless bundle, pagination available.

Example

https://api.healthgorilla.com/fhir/ValueSet/k/$expand?filter=Lead

```
<ValueSet xmlns="http://hl7.org/fhir">
   <status value="active"/>
   <expansion>
       <identifier value="d0a1a75d3c92af1528b6c7b9"/>
```

```xml
<timestamp value="2019-10-16T23:03:44+00:00"/>
<total value="10"/>
<parameter>
    <name value="query"/>
    <valueString value="Lead"/>
</parameter>
<contains>
    <system value="urn:uuid:a855594f43fe879c6570b92e"/>
    <code value="038165"/>
    <display value="Lead Standard Profile, Blood"/>
</contains>
<contains>
    <system value="urn:uuid:a855594f43fe879c6570b92e"/>
    <code value="038170"/>
    <display value="Lead Standard Profile, Blood"/>
</contains>
<contains>
    <system value="urn:uuid:a855594f43fe879c6570b92e"/>
    <code value="007629"/>
    <display value="Lead, Blood"/>
</contains>
<contains>
    <system value="urn:uuid:a855594f43fe879c6570b92e"/>
    <code value="007625"/>
    <display value="Lead, Blood (Adult)"/>
</contains>
```

3. Use this API to obtain the questionnaire to define the metadata.

API method that allows to search the questionnaire for getting metadata about the given test to identify AOEs and their requirements for the order

The following attributes are supported:

- Questionnaire
- code

https://api.healthgorilla.com/fhir/Questionnaire?code=urn:uuid|testCode

Request

This is a common SEARCH operation that retrieves the questionnaire based on the test to be performed

HTTP GET

https://api.healthgorilla.com/fhir/Questionnaire?code=urn:uuid:a855594f43fe879c6570b92e|007625

Parameters

Required
code=urn:uuid|testCode

Example

https://api.healthgorilla.com/fhir/Questionnaire?code=urn:uuid:a855594f43fe879c6570b92e|007625

```xml
<Bundle xmlns="http://hl7.org/fhir">
    <id value="3a308894-8cb1-48e3-95aa-4aadad9e84d5"/>
    <meta>
        <lastUpdated value="2019-10-18T19:57:31.298+00:00"/>
    </meta>
    <type value="searchset"/>
    <total value="1"/>
    <link>
        <relation value="self"/>
        <url
value="https://api.healthgorilla.com/fhir/Questionnaire?code=urn%3Auuid%3Aa855594f43fe879c6570b92e%7C007625"/>
    </link>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/Questionnaire/be2096570a2ec83f8f071175"/>
        <resource>
            <Questionnaire xmlns="http://hl7.org/fhir">
                <id value="be2096570a2ec83f8f071175"/>
                <name value="Lead, Blood (Adult) AOE questions"/>
                <status value="active"/>
                <code>
                    <system value="urn:uuid:a855594f43fe879c6570b92e"/>
                    <code value="007625"/></code>
                <subjectType value="Patient"/>
                <item id="ZBL-1">
                    <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/questionnaire-requiredwhen
specimen">
                        <valueBoolean value="true"/>
```

```xml
                        </extension>
                        <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/questionnaire-constraints"
>
                            <valueString value="Use: Race is required for blood lead
testing procedures."/>
                        </extension>
                        <extension
url="http://hl7.org/fhir/StructureDefinition/questionnaire-itemControl">
                            <valueCodeableConcept>
                                <coding>
                                    <code value="dropdown"/>
                                </coding>
                            </valueCodeableConcept>
                        </extension>
                        <code>
                            <code value="ZBL-1"/></code>
                        <text value="Patient Race"/>
                        <type value="choice"/>
                        <option>
                            <valueCoding>
                                <code value="1"/>
                                <display value="White/Caucasian"/>
                            </valueCoding>
                        </option>
                        <option>
                            <valueCoding>
                                <code value="2"/>
                                <display value="Black"/>
                            </valueCoding>
                        </option>
                        <option>
                            <valueCoding>
                                <code value="3"/>
                                <display value="American Indian"/>
                            </valueCoding>
                        </option>
                        <option>
                            <valueCoding>
                                <code value="4"/>
                                <display value="Asian"/>
                            </valueCoding>
                        </option>
                        <option>
                            <valueCoding>
```

```xml
                            <code value="5"/>
                            <display value="Other"/>
                        </valueCoding>
                    </option>
                    <option>
                        <valueCoding>
                            <code value="9"/>
                            <display value="Unknown/Not Indicated"/>
                        </valueCoding>
                    </option>
                    <initialString value="Unknown/Not Indicated"/>
                </item>
                <item id="ZBL-2">
                    <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/questionnaire-requiredwhen
specimen">
                        <valueBoolean value="true"/>
                    </extension>
                    <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/questionnaire-constraints"
>
                        <valueString value="Use: Race is required for blood lead
testing procedures by some states.This field is self- identification rather than
scientific classification."/>
                    </extension>
                    <extension
url="http://hl7.org/fhir/StructureDefinition/questionnaire-itemControl">
                        <valueCodeableConcept>
                            <coding>
                                <code value="dropdown"/>
                            </coding>
                        </valueCodeableConcept>
                    </extension>
                    <code>
                        <code value="ZBL-2"/></code>
                    <text value="Hispanic Heritage"/>
                    <type value="choice"/>
                    <option>
                        <valueCoding>
                            <code value="1"/>
                            <display value="Yes"/>
                        </valueCoding>
                    </option>
                    <option>
                        <valueCoding>
```

```xml
                                    <code value="2"/>
                                    <display value="No"/>
                                </valueCoding>
                            </option>
                            <option>
                                <valueCoding>
                                    <code value="9"/>
                                    <display value="Unknown"/>
                                </valueCoding>
                            </option>
                            <initialString value="Unknown"/>
                        </item>
                        <item id="ZBL-3">
                            <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/questionnaire-requiredwhen
specimen">
                                <valueBoolean value="true"/>
                            </extension>
                            <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/questionnaire-constraints"
>
                                <valueString value="Use: Indication of how specimen was
collected."/>
                            </extension>
                            <extension
url="http://hl7.org/fhir/StructureDefinition/questionnaire-itemControl">
                                <valueCodeableConcept>
                                    <coding>
                                        <code value="dropdown"/>
                                    </coding>
                                </valueCodeableConcept>
                            </extension>
                            <code>
                                <code value="ZBL-3"/></code>
                            <text value="Blood Lead Type"/>
                            <type value="choice"/>
                            <option>
                                <valueCoding>
                                    <code value="V"/>
                                    <display value="Venous (blood)"/>
                                </valueCoding>
                            </option>
                            <option>
                                <valueCoding>
                                    <code value="F"/>
```

```xml
                                <display value="Finger stick (blood)"/>
                            </valueCoding>
                        </option>
                    </item>
                    <item id="ZBL-4">
                        <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/questionnaire-requiredwhen
specimen">
                            <valueBoolean value="true"/>
                        </extension>
                        <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/questionnaire-constraints"
>
                            <valueString value="Use: Indication of reason for testing."/>
                        </extension>
                        <extension
url="http://hl7.org/fhir/StructureDefinition/questionnaire-itemControl">
                            <valueCodeableConcept>
                                <coding>
                                    <code value="dropdown"/>
                                </coding>
                            </valueCodeableConcept>
                        </extension>
                        <code>
                            <code value="ZBL-4"/></code>
                        <text value="Blood Lead Purpose"/>
                        <type value="choice"/>
                        <option>
                            <valueCoding>
                                <code value="I"/>
                                <display value="Initial"/>
                            </valueCoding>
                        </option>
                        <option>
                            <valueCoding>
                                <code value="R"/>
                                <display value="Repeat"/>
                            </valueCoding>
                        </option>
                        <option>
                            <valueCoding>
                                <code value="F"/>
                                <display value="Follow-up"/>
                            </valueCoding>
                        </option>
```

```
            </item>
          </Questionnaire>
        </resource>
      </entry>
  </Bundle>
```

4. Find Practitioner to include in the details

API method to find practitioner for getting the practitioner details. Practitioner information doesn't change over time unless you add more providers.
The following attributes are supported:

- Practitioner

https://api.healthgorilla.com/fhir/Practitioner?name=1&role=2&address-state=3&near-distance=4

Request

HTTP GET

Parameters

The following attributes are supported:

1. name   Practitioner Name
2. role   Practitioner Role
3. address-state Practitioner State
4. near-distance 3000

Example

https://api.healthgorilla.com/fhir/Practitioner?name=Neil Parikh&role=doctor&address-state=NY&near-distance=3000

```
<Bundle xmlns="http://hl7.org/fhir">
    <id value="9a64ff4d-d5f7-48bf-b277-5b5e87526e8c"/>
    <meta>
        <lastUpdated value="2019-10-18T00:12:36.305+00:00"/>
        <profile
value="https://healthgorilla.com/fhir/StructureDefinition/hg-stateless-bundle"/>
    </meta>
    <type value="searchset"/>
    <total value="9"/>
    <link>
```

```xml
        <relation value="self"/>
        <url
value="https://api.healthgorilla.com/fhir/Practitioner?name=Neil%20Parikh&amp;role=doc
tor&amp;address-state=NY&amp;near-distance=3000&amp;_revinclude=PractitionerRole:pract
itioner"/>
    </link>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/npi-d02a0c5b07f5c9692c28eb0f"/>
        <resource>
            <Practitioner xmlns="http://hl7.org/fhir">
                <id value="npi-d02a0c5b07f5c9692c28eb0f"/>
                <meta>
                    <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
                </meta>
                <identifier>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="npi-d02a0c5b07f5c9692c28eb0f"/>
                </identifier>
                <identifier>
                    <type>
                        <coding>
                            <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                            <code value="PRN"/>
                            <display value="Passport number"/>
                        </coding>
                        <text value="Passport number"/>
                    </type>
                    <system value="http://hl7.org/fhir/sid/us-npi"/>
                    <value value="1750885141"/>
                </identifier>
                <name>
                    <text value="Neilesh Parikh"/>
                    <family value="Parikh"/>
                    <given value="Neilesh"/>
                    <prefix value="MR."/>
                </name>
                <telecom>
                    <system value="phone"/>
                    <value value="5852752723"/>
                    <use value="work"/>
                </telecom>
                <address>
```

```xml
                    <use value="work"/>
                    <text value="601 Elmwood Avenue Box Surg, Rochester, NY 14642"/>
                    <line value="601 Elmwood Avenue Box Surg"/>
                    <city value="Rochester"/>
                    <state value="NY"/>
                    <postalCode value="14642"/>
                    <country value="USA"/>
                </address>
            </Practitioner>
        </resource>
        <search>
            <extension url="http://hl7.org/fhir/StructureDefinition/location-distance">
                <extension url="location-distance">
                    <valueDistance>
                        <value value="89.18257226793072"/>
                        <unit value="ml"/>
                    </valueDistance>
                </extension>
            </extension>
            <mode value="match"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/PractitionerRole/npi-d02a0c5b07f5c9692c28eb0
f"/>
        <resource>
            <PractitionerRole xmlns="http://hl7.org/fhir">
                <id value="npi-d02a0c5b07f5c9692c28eb0f"/>
                <text>
                    <status value="generated"/>
                    <div xmlns="http://www.w3.org/1999/xhtml">Neilesh Parikh</div>
                </text>
                <contained>
                    <Organization xmlns="http://hl7.org/fhir">
                        <id value="1"/>
                        <type>
                            <coding>
                                <system value="http://hl7.org/fhir/organization-type"/>
                                <code value="prov"/>
                                <display value="Healthcare Provider"/>
                            </coding>
                            <text value="Healthcare Provider"/>
                        </type>
                        <telecom>
```

```xml
                        <system value="phone"/>
                        <value value="5852752723"/>
                    </telecom>
                    <address>
                        <text value="601 Elmwood Avenue Box Surg, Rochester, NY
14642"/>
                        <line value="601 Elmwood Avenue Box Surg"/>
                        <city value="Rochester"/>
                        <state value="NY"/>
                        <postalCode value="14642"/>
                        <country value="USA"/>
                    </address>
                </Organization>
            </contained>
            <identifier>
                <system value="https://www.healthgorilla.com"/>
                <value value="d02a0c5b07f5c9692c28eb0f"/>
            </identifier>
            <identifier>
                <type>
                    <coding>
                        <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                        <code value="PRN"/>
                        <display value="Passport number"/>
                    </coding>
                    <text value="Passport number"/>
                </type>
                <system value="http://hl7.org/fhir/sid/us-npi"/>
                <value value="1750885141"/>
            </identifier>
            <practitioner>
                <reference value="Practitioner/npi-d02a0c5b07f5c9692c28eb0f"/>
                <display value="Neilesh Parikh"/>
            </practitioner>
            <organization>
                <reference value="#1"/>
            </organization>
            <code>
                <coding>
                    <system value="http://hl7.org/fhir/practitioner-role"/>
                    <code value="doctor"/>
                    <display value="Doctor"/>
                </coding>
            </code>
```

```xml
                    <specialty>
                        <text value="Student in an Organized Health Care Education/Training
Program"/>
                    </specialty>
                </PractitionerRole>
            </resource>
        <search>
            <mode value="include"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/npi-b55b7a54240f3ed66572e05c"/>
        <resource>
            <Practitioner xmlns="http://hl7.org/fhir">
                <id value="npi-b55b7a54240f3ed66572e05c"/>
                <meta>
                    <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
                </meta>
                <identifier>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="npi-b55b7a54240f3ed66572e05c"/>
                </identifier>
                <identifier>
                    <type>
                        <coding>
                            <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                            <code value="PRN"/>
                            <display value="Passport number"/>
                        </coding>
                        <text value="Passport number"/>
                    </type>
                    <system value="http://hl7.org/fhir/sid/us-npi"/>
                    <value value="1417199316"/>
                </identifier>
                <name>
                    <text value="Neil D Parikh, M.D."/>
                    <family value="Parikh"/>
                    <given value="Neil"/>
                    <given value="D"/>
                    <prefix value="DR."/>
                    <suffix value="M.D."/>
                </name>
```

```xml
                    <telecom>
                        <system value="phone"/>
                        <value value="8604094567"/>
                        <use value="work"/>
                    </telecom>
                    <telecom>
                        <system value="fax"/>
                        <value value="8604094846"/>
                        <use value="work"/>
                    </telecom>
                    <address>
                        <use value="work"/>
                        <text value="21 South Rd, Suite 100, Farmington, CT 06032"/>
                        <line value="21 South Rd"/>
                        <line value="Suite 100"/>
                        <city value="Farmington"/>
                        <state value="CT"/>
                        <postalCode value="06032"/>
                        <country value="USA"/>
                    </address>
                </Practitioner>
            </resource>
            <search>
                <extension url="http://hl7.org/fhir/StructureDefinition/location-distance">
                    <extension url="location-distance">
                        <valueDistance>
                            <value value="183.810559381648"/>
                            <unit value="ml"/>
                        </valueDistance>
                    </extension>
                </extension>
                <mode value="match"/>
            </search>
        </entry>
        <entry>
            <fullUrl
value="https://api.healthgorilla.com/fhir/PractitionerRole/npi-b55b7a54240f3ed66572e05
c"/>
            <resource>
                <PractitionerRole xmlns="http://hl7.org/fhir">
                    <id value="npi-b55b7a54240f3ed66572e05c"/>
                    <text>
                        <status value="generated"/>
                        <div xmlns="http://www.w3.org/1999/xhtml">Neil D Parikh, M.D.</div>
                    </text>
```

```xml
<contained>
    <Organization xmlns="http://hl7.org/fhir">
        <id value="1"/>
        <type>
            <coding>
                <system value="http://hl7.org/fhir/organization-type"/>
                <code value="prov"/>
                <display value="Healthcare Provider"/>
            </coding>
            <text value="Healthcare Provider"/>
        </type>
        <telecom>
            <system value="phone"/>
            <value value="8604094567"/>
        </telecom>
        <telecom>
            <system value="fax"/>
            <value value="8604094846"/>
        </telecom>
        <address>
            <text value="21 South Rd, Suite 100, Farmington, CT 06032"/>
            <line value="21 South Rd"/>
            <line value="Suite 100"/>
            <city value="Farmington"/>
            <state value="CT"/>
            <postalCode value="06032"/>
            <country value="USA"/>
        </address>
    </Organization>
</contained>
<identifier>
    <system value="https://www.healthgorilla.com"/>
    <value value="b55b7a54240f3ed66572e05c"/>
</identifier>
<identifier>
    <type>
        <coding>
            <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
            <code value="PRN"/>
            <display value="Passport number"/>
        </coding>
        <text value="Passport number"/>
    </type>
```

```xml
                    <system value="http://hl7.org/fhir/sid/us-npi"/>
                    <value value="1417199316"/>
                </identifier>
                <practitioner>
                    <reference value="Practitioner/npi-b55b7a54240f3ed66572e05c"/>
                    <display value="Neil D Parikh, M.D."/>
                </practitioner>
                <organization>
                    <reference value="#1"/>
                </organization>
                <code>
                    <coding>
                        <system value="http://hl7.org/fhir/practitioner-role"/>
                        <code value="doctor"/>
                        <display value="Doctor"/>
                    </coding>
                </code>
                <specialty>
                    <text value="Gastroenterology"/>
                </specialty>
                <specialty>
                    <text value="Internal Medicine"/>
                </specialty>
            </PractitionerRole>
        </resource>
        <search>
            <mode value="include"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/Practitioner/39b8165d0123fcf10ef2ae6f"/>
        <resource>
            <Practitioner xmlns="http://hl7.org/fhir">
                <id value="39b8165d0123fcf10ef2ae6f"/>
                <meta>
                    <lastUpdated value="2019-10-07T21:20:59.545+00:00"/>
                    <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
                </meta>
                <text>
                    <status value="generated"/>
                    <div xmlns="http://www.w3.org/1999/xhtml">Neil Nitin Parikh, M.D.,
M.B.A.</div>
                </text>
```

```xml
            <identifier>
                <system value="https://www.healthgorilla.com"/>
                <value value="39b8165d0123fcf10ef2ae6f"/>
            </identifier>
            <identifier>
                <type>
                    <coding>
                        <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                        <code value="PRN"/>
                        <display value="Passport number"/>
                    </coding>
                    <text value="Passport number"/>
                </type>
                <system value="http://hl7.org/fhir/sid/us-npi"/>
                <value value="1689942526"/>
            </identifier>
            <active value="true"/>
            <name>
                <use value="official"/>
                <text value="Neil Nitin Parikh, M.D., M.B.A."/>
                <family value="Parikh"/>
                <given value="Neil"/>
                <given value="Nitin"/>
                <suffix value="M.D., M.B.A."/>
            </name>
            <address>
                <extension
url="http://hl7.org/fhir/StructureDefinition/geolocation">
                    <extension url="latitude">
                        <valueDecimal value="40.723664"/>
                    </extension>
                    <extension url="longitude">
                        <valueDecimal value="-74.0063695"/>
                    </extension>
                </extension>
                <use value="work"/>
                <text value="75 Varick Street, New York, NY 10013"/>
                <line value="75 Varick Street"/>
                <city value="New York"/>
                <state value="NY"/>
                <postalCode value="10013"/>
                <country value="USA"/>
            </address>
        </Practitioner>
```

```xml
        </resource>
        <search>
            <extension url="http://hl7.org/fhir/StructureDefinition/location-distance">
                <extension url="location-distance">
                    <valueDistance>
                        <value value="192.72900443886024"/>
                        <unit value="ml"/>
                    </valueDistance>
                </extension>
            </extension>
            <mode value="match"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/PractitionerRole/39b8165d0123fcf10ef2ae6f"/>
        <resource>
            <PractitionerRole xmlns="http://hl7.org/fhir">
                <id value="39b8165d0123fcf10ef2ae6f"/>
                <meta>
                    <lastUpdated value="2019-10-07T21:20:59.545+00:00"/>
                </meta>
                <text>
                    <status value="generated"/>
                    <div xmlns="http://www.w3.org/1999/xhtml">Dr. Neil Nitin Parikh,
M.D., M.B.A.</div>
                </text>
                <identifier>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="39b8165d0123fcf10ef2ae6f"/>
                </identifier>
                <identifier>
                    <type>
                        <coding>
                            <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                            <code value="PRN"/>
                            <display value="Passport number"/>
                        </coding>
                        <text value="Passport number"/>
                    </type>
                    <system value="http://hl7.org/fhir/sid/us-npi"/>
                    <value value="1689942526"/>
                </identifier>
                <active value="true"/>
```

```xml
                    <practitioner>
                        <reference value="Practitioner/39b8165d0123fcf10ef2ae6f"/>
                        <display value="Neil Nitin Parikh, M.D., M.B.A."/>
                    </practitioner>
                    <organization>
                        <reference value="Organization/t-45b5165d3ec7da692c10c139"/>
                        <display value="Oscar Health"/>
                    </organization>
                    <code>
                        <coding>
                            <system value="http://hl7.org/fhir/practitioner-role"/>
                            <code value="doctor"/>
                            <display value="Doctor"/>
                        </coding>
                        <coding>
                            <system
value="https://www.healthgorilla.com/administrative-role"/>
                            <code value="provider"/>
                            <display value="Provider"/>
                        </coding>
                    </code>
                    <specialty>
                        <text value="Internal Medicine"/>
                    </specialty>
                    <specialty>
                        <text value="Hospitalist"/>
                    </specialty>
                    <location>
                        <reference
value="Location/tl-45b5165d3ec7da692c10c139-45b5165d83a726082c0ae24c"/>
                        <display value="75 Varick Street, New York, NY"/>
                    </location>
                </PractitionerRole>
        </resource>
        <search>
            <mode value="include"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/npi-0be11056d2997d5010e6d0b4"/>
        <resource>
            <Practitioner xmlns="http://hl7.org/fhir">
                <id value="npi-0be11056d2997d5010e6d0b4"/>
                <meta>
```

```xml
                <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
            </meta>
            <identifier>
                <system value="https://www.healthgorilla.com"/>
                <value value="npi-0be11056d2997d5010e6d0b4"/>
            </identifier>
            <identifier>
                <type>
                    <coding>
                        <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                        <code value="PRN"/>
                        <display value="Passport number"/>
                    </coding>
                    <text value="Passport number"/>
                </type>
                <system value="http://hl7.org/fhir/sid/us-npi"/>
                <value value="1760895197"/>
            </identifier>
            <name>
                <text value="Neil Rohit Parikh, M.D. M.B.A."/>
                <family value="Parikh"/>
                <given value="Neil"/>
                <given value="Rohit"/>
                <suffix value="M.D. M.B.A."/>
            </name>
            <telecom>
                <system value="phone"/>
                <value value="6176677000"/>
                <use value="work"/>
            </telecom>
            <address>
                <use value="work"/>
                <text value="330 Brookline Ave, Boston, MA 02215"/>
                <line value="330 Brookline Ave"/>
                <city value="Boston"/>
                <state value="MA"/>
                <postalCode value="02215"/>
                <country value="USA"/>
            </address>
        </Practitioner>
    </resource>
    <search>
        <extension url="http://hl7.org/fhir/StructureDefinition/location-distance">
```

```xml
                    <extension url="location-distance">
                        <valueDistance>
                            <value value="246.88993369065605"/>
                            <unit value="ml"/>
                        </valueDistance>
                    </extension>
                </extension>
                <mode value="match"/>
            </search>
        </entry>
        <entry>
            <fullUrl
value="https://api.healthgorilla.com/fhir/PractitionerRole/npi-0be11056d2997d5010e6d0b
4"/>
            <resource>
                <PractitionerRole xmlns="http://hl7.org/fhir">
                    <id value="npi-0be11056d2997d5010e6d0b4"/>
                    <text>
                        <status value="generated"/>
                        <div xmlns="http://www.w3.org/1999/xhtml">Neil Rohit Parikh, M.D.
M.B.A.</div>
                    </text>
                    <contained>
                        <Organization xmlns="http://hl7.org/fhir">
                            <id value="1"/>
                            <type>
                                <coding>
                                    <system value="http://hl7.org/fhir/organization-type"/>
                                    <code value="prov"/>
                                    <display value="Healthcare Provider"/>
                                </coding>
                                <text value="Healthcare Provider"/>
                            </type>
                            <telecom>
                                <system value="phone"/>
                                <value value="6176677000"/>
                            </telecom>
                            <address>
                                <text value="330 Brookline Ave, Boston, MA 02215"/>
                                <line value="330 Brookline Ave"/>
                                <city value="Boston"/>
                                <state value="MA"/>
                                <postalCode value="02215"/>
                                <country value="USA"/>
                            </address>
```

```xml
                    </Organization>
                </contained>
                <identifier>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="0be11056d2997d5010e6d0b4"/>
                </identifier>
                <identifier>
                    <type>
                        <coding>
                            <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                            <code value="PRN"/>
                            <display value="Passport number"/>
                        </coding>
                        <text value="Passport number"/>
                    </type>
                    <system value="http://hl7.org/fhir/sid/us-npi"/>
                    <value value="1760895197"/>
                </identifier>
                <practitioner>
                    <reference value="Practitioner/npi-0be11056d2997d5010e6d0b4"/>
                    <display value="Neil Rohit Parikh, M.D. M.B.A."/>
                </practitioner>
                <organization>
                    <reference value="#1"/>
                </organization>
                <code>
                    <coding>
                        <system value="http://hl7.org/fhir/practitioner-role"/>
                        <code value="doctor"/>
                        <display value="Doctor"/>
                    </coding>
                </code>
                <specialty>
                    <text value="Student in an Organized Health Care Education/Training
Program"/>
                </specialty>
            </PractitionerRole>
        </resource>
        <search>
            <mode value="include"/>
        </search>
    </entry>
    <entry>
```

```xml
        <fullUrl
value="https://api.healthgorilla.com/fhir/npi-2ae01056375d7434a8e80b43"/>
        <resource>
            <Practitioner xmlns="http://hl7.org/fhir">
                <id value="npi-2ae01056375d7434a8e80b43"/>
                <meta>
                    <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
                </meta>
                <identifier>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="npi-2ae01056375d7434a8e80b43"/>
                </identifier>
                <identifier>
                    <type>
                        <coding>
                            <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                            <code value="PRN"/>
                            <display value="Passport number"/>
                        </coding>
                        <text value="Passport number"/>
                    </type>
                    <system value="http://hl7.org/fhir/sid/us-npi"/>
                    <value value="1700211455"/>
                </identifier>
                <name>
                    <text value="Neil P Parikh, M.D."/>
                    <family value="Parikh"/>
                    <given value="Neil"/>
                    <given value="P"/>
                    <prefix value="DR."/>
                    <suffix value="M.D."/>
                </name>
                <telecom>
                    <system value="phone"/>
                    <value value="3304807643"/>
                    <use value="work"/>
                </telecom>
                <address>
                    <use value="work"/>
                    <text value="1044 Belmont Ave, Youngstown, OH 44504"/>
                    <line value="1044 Belmont Ave"/>
                    <city value="Youngstown"/>
                    <state value="OH"/>
```

```xml
                    <postalCode value="44504"/>
                    <country value="USA"/>
                </address>
            </Practitioner>
        </resource>
        <search>
            <extension url="http://hl7.org/fhir/StructureDefinition/location-distance">
                <extension url="location-distance">
                    <valueDistance>
                        <value value="283.9405686414895"/>
                        <unit value="ml"/>
                    </valueDistance>
                </extension>
            </extension>
            <mode value="match"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/PractitionerRole/npi-2ae01056375d7434a8e80b4
3"/>
        <resource>
            <PractitionerRole xmlns="http://hl7.org/fhir">
                <id value="npi-2ae01056375d7434a8e80b43"/>
                <text>
                    <status value="generated"/>
                    <div xmlns="http://www.w3.org/1999/xhtml">Neil P Parikh, M.D.</div>
                </text>
                <contained>
                    <Organization xmlns="http://hl7.org/fhir">
                        <id value="1"/>
                        <type>
                            <coding>
                                <system value="http://hl7.org/fhir/organization-type"/>
                                <code value="prov"/>
                                <display value="Healthcare Provider"/>
                            </coding>
                            <text value="Healthcare Provider"/>
                        </type>
                        <telecom>
                            <system value="phone"/>
                            <value value="3304807643"/>
                        </telecom>
                        <address>
                            <text value="1044 Belmont Ave, Youngstown, OH 44504"/>
```

```xml
                    <line value="1044 Belmont Ave"/>
                    <city value="Youngstown"/>
                    <state value="OH"/>
                    <postalCode value="44504"/>
                    <country value="USA"/>
                </address>
            </Organization>
        </contained>
        <identifier>
            <system value="https://www.healthgorilla.com"/>
            <value value="2ae01056375d7434a8e80b43"/>
        </identifier>
        <identifier>
            <type>
                <coding>
                    <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                    <code value="PRN"/>
                    <display value="Passport number"/>
                </coding>
                <text value="Passport number"/>
            </type>
            <system value="http://hl7.org/fhir/sid/us-npi"/>
            <value value="1700211455"/>
        </identifier>
        <practitioner>
            <reference value="Practitioner/npi-2ae01056375d7434a8e80b43"/>
            <display value="Neil P Parikh, M.D."/>
        </practitioner>
        <organization>
            <reference value="#1"/>
        </organization>
        <code>
            <coding>
                <system value="http://hl7.org/fhir/practitioner-role"/>
                <code value="doctor"/>
                <display value="Doctor"/>
            </coding>
        </code>
        <specialty>
            <text value="Student in an Organized Health Care Education/Training
Program"/>
        </specialty>
    </PractitionerRole>
</resource>
```

```xml
        <search>
            <mode value="include"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/npi-e3607a548ad2579c7d23f311"/>
        <resource>
            <Practitioner xmlns="http://hl7.org/fhir">
                <id value="npi-e3607a548ad2579c7d23f311"/>
                <meta>
                    <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
                </meta>
                <identifier>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="npi-e3607a548ad2579c7d23f311"/>
                </identifier>
                <identifier>
                    <type>
                        <coding>
                            <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                            <code value="PRN"/>
                            <display value="Passport number"/>
                        </coding>
                        <text value="Passport number"/>
                    </type>
                    <system value="http://hl7.org/fhir/sid/us-npi"/>
                    <value value="1427344100"/>
                </identifier>
                <name>
                    <text value="Neil P Parikh, DDS"/>
                    <family value="Parikh"/>
                    <given value="Neil"/>
                    <given value="P"/>
                    <prefix value="DR."/>
                    <suffix value="DDS"/>
                </name>
                <telecom>
                    <system value="phone"/>
                    <value value="7737020660"/>
                    <use value="work"/>
                </telecom>
                <address>
```

```xml
                    <use value="work"/>
                    <text value="5843 S Western Ave, Chicago, IL 60636"/>
                    <line value="5843 S Western Ave"/>
                    <city value="Chicago"/>
                    <state value="IL"/>
                    <postalCode value="60636"/>
                    <country value="USA"/>
                </address>
            </Practitioner>
        </resource>
        <search>
            <extension url="http://hl7.org/fhir/StructureDefinition/location-distance">
                <extension url="location-distance">
                    <valueDistance>
                        <value value="610.1659947481975"/>
                        <unit value="ml"/>
                    </valueDistance>
                </extension>
            </extension>
            <mode value="match"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/PractitionerRole/npi-e3607a548ad2579c7d23f31
1"/>
        <resource>
            <PractitionerRole xmlns="http://hl7.org/fhir">
                <id value="npi-e3607a548ad2579c7d23f311"/>
                <text>
                    <status value="generated"/>
                    <div xmlns="http://www.w3.org/1999/xhtml">Neil P Parikh, DDS</div>
                </text>
                <contained>
                    <Organization xmlns="http://hl7.org/fhir">
                        <id value="1"/>
                        <type>
                            <coding>
                                <system value="http://hl7.org/fhir/organization-type"/>
                                <code value="prov"/>
                                <display value="Healthcare Provider"/>
                            </coding>
                            <text value="Healthcare Provider"/>
                        </type>
                        <telecom>
```

```xml
                <system value="phone"/>
                <value value="7737020660"/>
            </telecom>
            <address>
                <text value="5843 S Western Ave, Chicago, IL 60636"/>
                <line value="5843 S Western Ave"/>
                <city value="Chicago"/>
                <state value="IL"/>
                <postalCode value="60636"/>
                <country value="USA"/>
            </address>
        </Organization>
    </contained>
    <identifier>
        <system value="https://www.healthgorilla.com"/>
        <value value="e3607a548ad2579c7d23f311"/>
    </identifier>
    <identifier>
        <type>
            <coding>
                <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                <code value="PRN"/>
                <display value="Passport number"/>
            </coding>
            <text value="Passport number"/>
        </type>
        <system value="http://hl7.org/fhir/sid/us-npi"/>
        <value value="1427344100"/>
    </identifier>
    <practitioner>
        <reference value="Practitioner/npi-e3607a548ad2579c7d23f311"/>
        <display value="Neil P Parikh, DDS"/>
    </practitioner>
    <organization>
        <reference value="#1"/>
    </organization>
    <code>
        <coding>
            <system value="http://hl7.org/fhir/practitioner-role"/>
            <code value="doctor"/>
            <display value="Doctor"/>
        </coding>
    </code>
    <specialty>
```

```xml
                    <text value="Dentist"/>
                </specialty>
            </PractitionerRole>
        </resource>
        <search>
            <mode value="include"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/npi-33607a54e8a477040b556974"/>
        <resource>
            <Practitioner xmlns="http://hl7.org/fhir">
                <id value="npi-33607a54e8a477040b556974"/>
                <meta>
                    <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
                </meta>
                <identifier>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="npi-33607a54e8a477040b556974"/>
                </identifier>
                <identifier>
                    <type>
                        <coding>
                            <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                            <code value="PRN"/>
                            <display value="Passport number"/>
                        </coding>
                        <text value="Passport number"/>
                    </type>
                    <system value="http://hl7.org/fhir/sid/us-npi"/>
                    <value value="1134428691"/>
                </identifier>
                <name>
                    <text value="Neil Umeshbhai Parikh, MD"/>
                    <family value="Parikh"/>
                    <given value="Neil"/>
                    <given value="Umeshbhai"/>
                    <suffix value="MD"/>
                </name>
                <telecom>
                    <system value="phone"/>
                    <value value="4072997333"/>
```

```xml
                    <use value="work"/>
                </telecom>
                <address>
                    <use value="work"/>
                    <text value="733 S Goldenrod Rd Ste A, Orlando, FL 32822"/>
                    <line value="733 S Goldenrod Rd Ste A"/>
                    <city value="Orlando"/>
                    <state value="FL"/>
                    <postalCode value="32822"/>
                    <country value="USA"/>
                </address>
            </Practitioner>
        </resource>
        <search>
            <extension url="http://hl7.org/fhir/StructureDefinition/location-distance">
                <extension url="location-distance">
                    <valueDistance>
                        <value value="1055.1699912978638"/>
                        <unit value="ml"/>
                    </valueDistance>
                </extension>
            </extension>
            <mode value="match"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/PractitionerRole/npi-33607a54e8a477040b55697
4"/>
        <resource>
            <PractitionerRole xmlns="http://hl7.org/fhir">
                <id value="npi-33607a54e8a477040b556974"/>
                <text>
                    <status value="generated"/>
                    <div xmlns="http://www.w3.org/1999/xhtml">Neil Umeshbhai Parikh,
MD</div>
                </text>
                <contained>
                    <Organization xmlns="http://hl7.org/fhir">
                        <id value="1"/>
                        <type>
                            <coding>
                                <system value="http://hl7.org/fhir/organization-type"/>
                                <code value="prov"/>
                                <display value="Healthcare Provider"/>
```

```xml
                    </coding>
                    <text value="Healthcare Provider"/>
                </type>
                <telecom>
                    <system value="phone"/>
                    <value value="4072997333"/>
                </telecom>
                <address>
                    <text value="733 S Goldenrod Rd Ste A, Orlando, FL 32822"/>
                    <line value="733 S Goldenrod Rd Ste A"/>
                    <city value="Orlando"/>
                    <state value="FL"/>
                    <postalCode value="32822"/>
                    <country value="USA"/>
                </address>
            </Organization>
        </contained>
        <identifier>
            <system value="https://www.healthgorilla.com"/>
            <value value="33607a54e8a477040b556974"/>
        </identifier>
        <identifier>
            <type>
                <coding>
                    <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                    <code value="PRN"/>
                    <display value="Passport number"/>
                </coding>
                <text value="Passport number"/>
            </type>
            <system value="http://hl7.org/fhir/sid/us-npi"/>
            <value value="1134428691"/>
        </identifier>
        <practitioner>
            <reference value="Practitioner/npi-33607a54e8a477040b556974"/>
            <display value="Neil Umeshbhai Parikh, MD"/>
        </practitioner>
        <organization>
            <reference value="#1"/>
        </organization>
        <code>
            <coding>
                <system value="http://hl7.org/fhir/practitioner-role"/>
                <code value="doctor"/>
```

```xml
                    <display value="Doctor"/>
                </coding>
            </code>
            <specialty>
                <text value="Allergy / Immunology"/>
            </specialty>
            <specialty>
                <text value="Internal Medicine"/>
            </specialty>
        </PractitionerRole>
    </resource>
    <search>
        <mode value="include"/>
    </search>
</entry>
<entry>
    <fullUrl
value="https://api.healthgorilla.com/fhir/npi-00dd1056d4a1024bb370df40"/>
    <resource>
        <Practitioner xmlns="http://hl7.org/fhir">
            <id value="npi-00dd1056d4a1024bb370df40"/>
            <meta>
                <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
            </meta>
            <identifier>
                <system value="https://www.healthgorilla.com"/>
                <value value="npi-00dd1056d4a1024bb370df40"/>
            </identifier>
            <identifier>
                <type>
                    <coding>
                        <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                        <code value="PRN"/>
                        <display value="Passport number"/>
                    </coding>
                    <text value="Passport number"/>
                </type>
                <system value="http://hl7.org/fhir/sid/us-npi"/>
                <value value="1841587748"/>
            </identifier>
            <name>
                <text value="Neil Parikh, M.D."/>
                <family value="Parikh"/>
```

```xml
                    <given value="Neil"/>
                    <suffix value="M.D."/>
                </name>
                <telecom>
                    <system value="phone"/>
                    <value value="9165375079"/>
                    <use value="work"/>
                </telecom>
                <telecom>
                    <system value="fax"/>
                    <value value="9169663189"/>
                    <use value="work"/>
                </telecom>
                <address>
                    <use value="work"/>
                    <text value="6501 Coyle Avenue, Carmichael, CA 95608"/>
                    <line value="6501 Coyle Avenue"/>
                    <city value="Carmichael"/>
                    <state value="CA"/>
                    <postalCode value="95608"/>
                    <country value="USA"/>
                </address>
            </Practitioner>
        </resource>
        <search>
            <extension url="http://hl7.org/fhir/StructureDefinition/location-distance">
                <extension url="location-distance">
                    <valueDistance>
                        <value value="2365.730189673836"/>
                        <unit value="ml"/>
                    </valueDistance>
                </extension>
            </extension>
            <mode value="match"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/PractitionerRole/npi-00dd1056d4a1024bb370df4
0"/>
        <resource>
            <PractitionerRole xmlns="http://hl7.org/fhir">
                <id value="npi-00dd1056d4a1024bb370df40"/>
                <text>
                    <status value="generated"/>
```

```xml
            <div xmlns="http://www.w3.org/1999/xhtml">Neil Parikh, M.D.</div>
        </text>
        <contained>
            <Organization xmlns="http://hl7.org/fhir">
                <id value="1"/>
                <type>
                    <coding>
                        <system value="http://hl7.org/fhir/organization-type"/>
                        <code value="prov"/>
                        <display value="Healthcare Provider"/>
                    </coding>
                    <text value="Healthcare Provider"/>
                </type>
                <telecom>
                    <system value="phone"/>
                    <value value="9165375079"/>
                </telecom>
                <telecom>
                    <system value="fax"/>
                    <value value="9169663189"/>
                </telecom>
                <address>
                    <text value="6501 Coyle Avenue, Carmichael, CA 95608"/>
                    <line value="6501 Coyle Avenue"/>
                    <city value="Carmichael"/>
                    <state value="CA"/>
                    <postalCode value="95608"/>
                    <country value="USA"/>
                </address>
            </Organization>
        </contained>
        <identifier>
            <system value="https://www.healthgorilla.com"/>
            <value value="00dd1056d4a1024bb370df40"/>
        </identifier>
        <identifier>
            <type>
                <coding>
                    <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                    <code value="PRN"/>
                    <display value="Passport number"/>
                </coding>
                <text value="Passport number"/>
            </type>
```

```xml
                    <system value="http://hl7.org/fhir/sid/us-npi"/>
                    <value value="1841587748"/>
                </identifier>
                <practitioner>
                    <reference value="Practitioner/npi-00dd1056d4a1024bb370df40"/>
                    <display value="Neil Parikh, M.D."/>
                </practitioner>
                <organization>
                    <reference value="#1"/>
                </organization>
                <code>
                    <coding>
                        <system value="http://hl7.org/fhir/practitioner-role"/>
                        <code value="doctor"/>
                        <display value="Doctor"/>
                    </coding>
                </code>
                <specialty>
                    <text value="Hospitalist"/>
                </specialty>
            </PractitionerRole>
        </resource>
        <search>
            <mode value="include"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/npi-7f5c7a54b96c23e8e7b91eb5"/>
        <resource>
            <Practitioner xmlns="http://hl7.org/fhir">
                <id value="npi-7f5c7a54b96c23e8e7b91eb5"/>
                <meta>
                    <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
                </meta>
                <identifier>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="npi-7f5c7a54b96c23e8e7b91eb5"/>
                </identifier>
                <identifier>
                    <type>
                        <coding>
                            <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
```

```xml
                    <code value="PRN"/>
                    <display value="Passport number"/>
                </coding>
                <text value="Passport number"/>
            </type>
            <system value="http://hl7.org/fhir/sid/us-npi"/>
            <value value="1952531030"/>
        </identifier>
        <name>
            <text value="Neil G. Parikh, M.D."/>
            <family value="Parikh"/>
            <given value="Neil"/>
            <given value="G."/>
            <prefix value="DR."/>
            <suffix value="M.D."/>
        </name>
        <telecom>
            <system value="phone"/>
            <value value="9164538696"/>
            <use value="work"/>
        </telecom>
        <telecom>
            <system value="fax"/>
            <value value="9164538715"/>
            <use value="work"/>
        </telecom>
        <address>
            <use value="work"/>
            <text value="5609 J Street, Suite C, Sacramento, CA 95819"/>
            <line value="5609 J Street"/>
            <line value="Suite C"/>
            <city value="Sacramento"/>
            <state value="CA"/>
            <postalCode value="95819"/>
            <country value="USA"/>
        </address>
    </Practitioner>
</resource>
<search>
    <extension url="http://hl7.org/fhir/StructureDefinition/location-distance">
        <extension url="location-distance">
            <valueDistance>
                <value value="2373.375506701983"/>
                <unit value="ml"/>
            </valueDistance>
```

```xml
                </extension>
            </extension>
            <mode value="match"/>
        </search>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/PractitionerRole/npi-7f5c7a54b96c23e8e7b91eb
5"/>
        <resource>
            <PractitionerRole xmlns="http://hl7.org/fhir">
                <id value="npi-7f5c7a54b96c23e8e7b91eb5"/>
                <text>
                    <status value="generated"/>
                    <div xmlns="http://www.w3.org/1999/xhtml">Neil G. Parikh,
M.D.</div>
                </text>
                <contained>
                    <Organization xmlns="http://hl7.org/fhir">
                        <id value="1"/>
                        <type>
                            <coding>
                                <system value="http://hl7.org/fhir/organization-type"/>
                                <code value="prov"/>
                                <display value="Healthcare Provider"/>
                            </coding>
                            <text value="Healthcare Provider"/>
                        </type>
                        <telecom>
                            <system value="phone"/>
                            <value value="9164538696"/>
                        </telecom>
                        <telecom>
                            <system value="fax"/>
                            <value value="9164538715"/>
                        </telecom>
                        <address>
                            <text value="5609 J Street, Suite C, Sacramento, CA
95819"/>
                            <line value="5609 J Street"/>
                            <line value="Suite C"/>
                            <city value="Sacramento"/>
                            <state value="CA"/>
                            <postalCode value="95819"/>
                            <country value="USA"/>
```

```xml
                    </address>
                </Organization>
            </contained>
            <identifier>
                <system value="https://www.healthgorilla.com"/>
                <value value="7f5c7a54b96c23e8e7b91eb5"/>
            </identifier>
            <identifier>
                <type>
                    <coding>
                        <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                        <code value="PRN"/>
                        <display value="Passport number"/>
                    </coding>
                    <text value="Passport number"/>
                </type>
                <system value="http://hl7.org/fhir/sid/us-npi"/>
                <value value="1952531030"/>
            </identifier>
            <practitioner>
                <reference value="Practitioner/npi-7f5c7a54b96c23e8e7b91eb5"/>
                <display value="Neil G. Parikh, M.D."/>
            </practitioner>
            <organization>
                <reference value="#1"/>
            </organization>
            <code>
                <coding>
                    <system value="http://hl7.org/fhir/practitioner-role"/>
                    <code value="doctor"/>
                    <display value="Doctor"/>
                </coding>
            </code>
            <specialty>
                <text value="Allergy / Immunology"/>
            </specialty>
        </PractitionerRole>
    </resource>
    <search>
        <mode value="include"/>
    </search>
</entry>
</Bundle>
```

5. Create or find patient details in the order

API method to create or find patient details. This step might be optional in the case patient identifiers are stored at the customer site.

Create Patient Request

HTTP POST

Parameters
 None
Body

```
{
"name": [
    {
      "use": "usual",
      "family": "Patient",
      "given": [
        "Test"
      ]
    }
  ],
"gender": "male",
"birthDate": "2000-03-01",
"identifier": [
        {
          "type": {
            "coding": [
              {
                "system": "http://hl7.org/fhir/v2/0203",
                "code": "MR",
                "display" : "Medical record number"
              }
            ]
          },
          "system": "http://ltest.com/",
          "value": "1025"
        }
      ],
      "telecom": [
    {
      "system": "email",
      "value": "test7@testpatient.com",
```

```
        "use": "work"
      }
    ],
  "resourceType": "Patient"
}
```

Example

POST: https://api.healthgorilla.com/fhir/Patient

See get request for the response example

Get Request

HTTP GET

Parameters
given
family

Example

https://api.healthgorilla.com/fhir/Patient?given=Test&family=Patient

Response
```
<Bundle xmlns="http://hl7.org/fhir">
    <value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                        <code value="MR"/>
                        <display value="Medical record number"/>
                    </coding>
                    <text value="Medical record number"/>
                </type>
                <value value="3740631"/>
            </identifier>
            <active value="true"/>
            <name>
                <text value="Test Patient"/>
                <family value="Patient"/>
```

```xml
                    <given value="Test"/>
                </name>
                <telecom>
                    <system value="phone"/>
                    <value value="(817)464-6466"/>
                    <use value="home"/>
                </telecom>
                <gender value="female"/>
                <birthDate value="1993-07-15"/>
                <address>
                    <text value="Horsham, PA 19044"/>
                    <city value="Horsham"/>
                    <state value="PA"/>
                    <postalCode value="19044"/>
                    <country value="USA"/>
                </address>
                <managingOrganization>
                    <reference value="Organization/t-a855594f7289f320852987c3"/>
                    <display value="Health Gorilla Demo Account"/>
                </managingOrganization>
            </Patient>
        </resource>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/Patient/cb48f152e7973cd3d573c16c"/>
        <resource>
            <Patient xmlns="http://hl7.org/fhir">
                <id value="cb48f152e7973cd3d573c16c"/>
                <meta>
                    <versionId value="1509462828182"/>
                    <lastUpdated value="2017-10-31T15:13:48.182+00:00"/>
                    <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-patient"/>
                    <profile
value="http://fhir.org/guides/argonaut/StructureDefinition/argo-patient"/>
                </meta>
                <text>
                    <status value="generated"/>
                    <div xmlns="http://www.w3.org/1999/xhtml">Test Patient, 36y.o.,
Female, Santa Clara, CA, United States</div>
                </text>
                <identifier>
                    <use value="usual"/>
                    <type>
```

```xml
                    <coding>
                        <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                        <code value="MR"/>
                        <display value="Medical record number"/>
                    </coding>
                    <text value="Medical record number"/>
                </type>
                <system value="https://www.healthgorilla.com"/>
                <value value="d79d7c52db9993cf1da9a280"/>
            </identifier>
            <identifier>
                <type>
                    <coding>
                        <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                        <code value="MR"/>
                        <display value="Medical record number"/>
                    </coding>
                    <text value="Medical record number"/>
                </type>
                <value value="88589"/>
            </identifier>
            <active value="true"/>
            <name>
                <text value="Test Patient"/>
                <family value="Patient"/>
                <given value="Test"/>
            </name>
            <telecom>
                <system value="phone"/>
                <value value="408-1234567"/>
                <use value="home"/>
            </telecom>
            <gender value="female"/>
            <birthDate value="1983-07-01"/>
            <address>
                <text value="1 Nantucket cir, Santa Clara, CA 95054"/>
                <line value="1 Nantucket cir"/>
                <city value="Santa Clara"/>
                <state value="CA"/>
                <postalCode value="95054"/>
                <country value="USA"/>
            </address>
            <managingOrganization>
```

```xml
                    <reference value="Organization/t-a855594f7289f320852987c3"/>
                    <display value="Health Gorilla Demo Account"/>
                </managingOrganization>
                <link>
                    <other>
                        <reference value="Patient/np-cfda05565ed7503a6d786958"/>
                        <display value="Test Patient"/>
                    </other>
                    <type value="seealso"/>
                </link>
            </Patient>
        </resource>
    </entry>
    <entry>
        <fullUrl
value="https://api.healthgorilla.com/fhir/Patient/e10334580ec33d7c411237e0"/>
        <resource>
            <Patient xmlns="http://hl7.org/fhir">
                <id value="e10334580ec33d7c411237e0"/>
                <meta>
                    <versionId value="1479803873828"/>
                    <lastUpdated value="2016-11-22T08:37:53.828+00:00"/>
                    <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-patient"/>
                    <profile
value="http://fhir.org/guides/argonaut/StructureDefinition/argo-patient"/>
                </meta>
                <text>
                    <status value="generated"/>
                    <div xmlns="http://www.w3.org/1999/xhtml">Test Patient, 2y.o.,
Male</div>
                </text>
                <identifier>
                    <use value="usual"/>
                    <type>
                        <coding>
                            <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                            <code value="MR"/>
                            <display value="Medical record number"/>
                        </coding>
                        <text value="Medical record number"/>
                    </type>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="e10334580ec33d7c411237e0"/>
```

```xml
            </identifier>
            <identifier>
                <type>
                    <coding>
                        <system
value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                        <code value="MR"/>
                        <display value="Medical record number"/>
                    </coding>
                    <text value="Medical record number"/>
                </type>
                <value value="1356033"/>
            </identifier>
            <active value="true"/>
            <name>
                <text value="Test Patient"/>
                <family value="Patient"/>
                <given value="Test"/>
            </name>
            <gender value="male"/>
            <birthDate value="2016-11-01"/>
            <managingOrganization>
                <reference value="Organization/t-a855594f7289f320852987c3"/>
                <display value="Health Gorilla Demo Account"/>
            </managingOrganization>
        </Patient>
    </resource>
</entry>
</Bundle>
```

6. Creating a Diagnostic Lab orders using values collected from the above requests

The Diagnostic Lab Ordering is represented by RequestGroup resource of type:

RequestGroup

Post Request

This is a common SEARCH operation that retrieves only Organization resources of a certain facility type. i.e. Diagnostic Laboratory, Radiology...

HTTP POST

Headers

Content-Type	application/json
Authorization	Bearer (access_token)

Body

```json
{
    "resourceType": "RequestGroup",
    "meta": {
        "profile": [
            "https://healthgorilla.com/fhir/StructureDefinition/hg-order"
        ]
    },
    "contained": [
        {
    "resourceType": "QuestionnaireResponse",
    "id": "aoes",
    "status": "completed",
    "item": [
        {
            "linkId": "ZBL-1",
            "answer": [
                {
                    "valueCoding": {
                        "code": "1",
                        "display": "White/Caucasian"
                    }
                }
            ]
        },
        {
            "linkId": "ZBL-2",
            "answer": [
                {
                    "valueCoding": {
                        "code": "1",
                        "display": "Yes"
                    }
                }
            ]
        },
        {
            "linkId": "ZBL-3",
            "answer": [
```

```json
            {
              "valueCoding": {
                "code": "V",
                "display": "Venous (blood)"
              }
            }
          ]
        },
        {
          "linkId": "ZBL-4",
          "answer": [
            {
              "valueCoding": {
                "code": "R",
                "display": "Repeat"
              }
            }
          ]
        }
      ]
    },
      {
          "resourceType": "ProcedureRequest",
          "id": "test",
          "status": "active",
          "intent": "order",
          "category": [
              {
                  "coding": [
                      {
                          "system": "http://snomed.info/sct",
                          "code": "103693007",
                          "display": "Diagnostic procedure"
                      }
                  ]
              }
          ],
          "code": {
              "coding": [
                  {
                      "code": "007625",
                      "display": "Lead, Blood (Adult)"
                  }
              ],
              "text": "Lead, Blood (Adult)"
          },
          "supportingInfo": [
              {
```

```json
                    "reference": "#aoes"
                }
            ]
        },
        {
            "resourceType": "Account",
            "id": "1",
            "meta": {
                "profile": [

"https://healthgorilla.com/fhir/StructureDefinition/hg-order-account"
                ]
            },
            "type": {
                "coding": [
                    {
                        "system":
"https://www.healthgorilla.com/order-billto",
                        "code": "patient",
                        "display": "Patient"
                    }
                ],
                "text": "Patient"
            }
        },
        {
            "resourceType": "Practitioner",
            "id": "2",
            "identifier": [
                {
                    "type": {
                        "coding": [
                            {
                                "system": "http://hl7.org/fhir/v2/0203",
                                "code": "PRN",
                                "display": "Passport number"
                            }
                        ]
                    },
                    "system": "http://hl7.org/fhir/sid/us-npi",
                    "value": "1689942526"
                },
                {
                    "type": {
                        "coding": [
                            {
                                "system": "http://hl7.org/fhir/v2/0203",
                                "code": "AN",
```

```json
                                "display": "Account number"
                            }
                        ],
                        "text": "Account Number"
                    },
                    "value": "04843980"
                }
            ],
            "active": true,
            "name": [
                {
                    "family": "Parikh",
                    "given": [
                        "Neil"
                    ],
                    "suffix": [
                        "M.D."
                    ]
                }
            ]
        },
        {
            "resourceType": "Organization",
            "id": "3",
            "identifier": [
                {
                    "type": {
                        "coding": [
                            {
                                "system": "http://hl7.org/fhir/v2/0203",
                                "code": "AN",
                                "display": "Account number"
                            }
                        ],
                        "text": "Account Number"
                    },
                    "value": "1A45HT6"
                }
            ],
            "name": "Dr. Neil Nitin Parikh - 75 Varick Street, New York,
NY"
        },
        {
            "resourceType": "Specimen",
            "id": "4",
            "collection": {
                "collectedDateTime": "2018-09-20T12:21:26+03:00"
            }
```

```
                }
            ],
            "extension": [
                {
                    "url":
"https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-authorized
By",
                    "valueReference": {
                        "reference":
"Organization/t1-d5da4352af2201ace56ca725-45b5165d83a726082c0ae24c",
                        "display": "Oscar Medical Group"
                    }
                },
                {
                    "url":
"https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-account",
                    "valueReference": {
                        "reference": "#1"
                    }
                },
                {
                    "url":
"https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-performer"
,
                    "valueReference": {
                        "reference": "Organization/f-a855594f43fe879c6570b92e",
                        "display": "LabCorp"
                    }
                },
                {
                    "url":
"https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-requester"
,
                    "extension": [
                        {
                            "url": "agent",
                            "valueReference": {
                                "reference": "#2",
                                "display": "Neil, M.D."
                            }
                        },
                        {
                            "url": "onBehalfOf",
                            "valueReference": {
                                "reference":
"Organization/t-45b5165d3ec7da692c10c139",
                                "display": "Oscar Health"
                            }
                        }
```

```
                    }
                ]
            },
            {
                "url":
"https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-specimen",
                "valueReference": {
                    "reference": "#4"
                }
            },
            {
                "url":
"https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-deliveryOp
tions",
                "extension": [
                    {
                        "url": "electronic",
                        "valueBoolean": false
                    }
                ]
            }
        ],
        "status": "active",
        "intent": "order",
        "subject": {
            "reference": "Patient/42678d5d78c7205e82751082",
            "display": "Test Patient"
        },
        "author": {
            "reference": "#2",
            "display": "Neil Parikh, M.D."
        },
        "note": [
            {
                "text": "Diagnostic Test."
            }
        ],
        "action": [
            {
                "resource": {
                    "reference": "#test",
                    "display": "074666 9 Drug-Scr"
                }
            }
        ]
    }
```

Example

HTTP Get

```xml
<Bundle xmlns="http://hl7.org/fhir">
   <id value="24d9e78b-92fc-44d0-a2d3-55ca00f78076"/>
   <meta>
      <lastUpdated value="2019-10-18T23:59:11.449+00:00"/>
   </meta>
   <type value="searchset"/>
   <total value="6"/>
   <link>
      <relation value="self"/>
      <url
value="https://healthgorilla.com/fhir/RequestGroup?patient=42678d5d78c7205e82751082
"/>
   </link>
   <entry>
      <fullUrl
value="https://healthgorilla.com/fhir/RequestGroup/1da4a75d4bfb948a97ca0961"/>
      <resource>
         <RequestGroup xmlns="http://hl7.org/fhir">
            <id value="1da4a75d4bfb948a97ca0961"/>
            <meta>
               <lastUpdated value="2019-10-16T23:13:33.641+00:00"/>
               <profile value="https://healthgorilla.com/fhir/StructureDefinition/hg-order"/>
            </meta>
            <contained>
               <Account xmlns="http://hl7.org/fhir">
                  <id value="1"/>
                  <meta>
                     <profile
value="https://healthgorilla.com/fhir/StructureDefinition/hg-order-account"/>
                  </meta>
                  <type>
                     <coding>
                        <system value="https://www.healthgorilla.com/order-billto"/>
                        <code value="patient"/>
                        <display value="Patient"/>
                     </coding>
                     <text value="Patient"/>
                  </type>
                  <guarantor>
```

```xml
          <party>
            <reference value="Patient/42678d5d78c7205e82751082"/>
            <display value="Test Patient"/>
          </party>
        </guarantor>
      </Account>
    </contained>
    <contained>
      <Practitioner xmlns="http://hl7.org/fhir">
        <id value="2"/>
        <meta>
          <lastUpdated value="2019-10-07T21:20:59.545+00:00"/>
          <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
        </meta>
        <identifier>
          <system value="https://www.healthgorilla.com"/>
          <value value="39b8165d0123fcf10ef2ae6f"/>
        </identifier>
        <identifier>
          <type>
            <coding>
              <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
              <code value="PRN"/>
              <display value="Passport number"/>
            </coding>
            <text value="Passport number"/>
          </type>
          <system value="http://hl7.org/fhir/sid/us-npi"/>
          <value value="1689942526"/>
        </identifier>
        <identifier>
          <type>
            <coding>
              <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
              <code value="AN"/>
              <display value="Account number"/>
            </coding>
            <text value="Account number"/>
          </type>
          <value value="04843980"/>
        </identifier>
        <active value="true"/>
```

```xml
        <name>
          <use value="official"/>
          <text value="Neil Nitin Parikh, M.D., M.B.A."/>
          <family value="Parikh"/>
          <given value="Neil"/>
          <given value="Nitin"/>
          <suffix value="M.D., M.B.A."/>
        </name>
        <address>
          <extension url="http://hl7.org/fhir/StructureDefinition/geolocation">
            <extension url="latitude">
              <valueDecimal value="40.723664"/>
            </extension>
            <extension url="longitude">
              <valueDecimal value="-74.0063695"/>
            </extension>
          </extension>
          <use value="work"/>
          <text value="75 Varick Street, New York, NY 10013"/>
          <line value="75 Varick Street"/>
          <city value="New York"/>
          <state value="NY"/>
          <postalCode value="10013"/>
          <country value="USA"/>
        </address>
      </Practitioner>
    </contained>
    <contained>
      <Organization xmlns="http://hl7.org/fhir">
        <id value="3"/>
        <meta>
          <lastUpdated value="2019-08-02T23:19:04.648+00:00"/>
        </meta>
        <identifier>
          <system value="https://www.healthgorilla.com"/>
          <value value="45b5165d3ec7da692c10c139"/>
        </identifier>
        <identifier>
          <type>
            <coding>
              <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
              <code value="AN"/>
              <display value="Account number"/>
```

```xml
          </coding>
          <text value="Account Number"/>
        </type>
        <value value="SO006686"/>
      </identifier>
      <active value="true"/>
      <type>
        <coding>
          <system value="http://hl7.org/fhir/organization-type"/>
          <code value="prov"/>
          <display value="Healthcare Provider"/>
        </coding>
        <text value="Healthcare Provider"/>
      </type>
      <type>
        <coding>
          <system
value="https://www.healthgorilla.com/fhir/organization-type"/>
          <code value="PR"/>
          <display value="Practice"/>
        </coding>
        <text value="Practice"/>
      </type>
      <name value="Oscar Health"/>
    </Organization>
  </contained>
  <contained>
    <Specimen xmlns="http://hl7.org/fhir">
      <id value="4"/>
      <subject>
        <reference value="Patient/42678d5d78c7205e82751082"/>
        <display value="Test Patient"/>
      </subject>
      <collection>
        <collectedDateTime value="2018-09-20T09:21:26+00:00"/>
      </collection>
    </Specimen>
  </contained>
  <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-authorizedBy">
    <valueReference>
      <reference
value="Organization/tl-a855594f7289f320852987c3-45b5165d83a726082c0ae24c"/>
```

```xml
                    <display value="Health Gorilla Demo Account"/>
                  </valueReference>
                </extension>
                <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-account">
                  <valueReference>
                    <reference value="#1"/>
                  </valueReference>
                </extension>
                <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-performer">
                  <valueReference>
                    <reference value="Organization/f-a855594f43fe879c6570b92e"/>
                    <display value="LabCorp"/>
                  </valueReference>
                </extension>
                <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-requester">
                  <extension url="agent">
                    <valueReference>
                      <reference value="#2"/>
                    </valueReference>
                  </extension>
                  <extension url="onBehalfOf">
                    <valueReference>
                      <reference value="#3"/>
                    </valueReference>
                  </extension>
                </extension>
                <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-specimen">
                  <valueReference>
                    <reference value="#4"/>
                  </valueReference>
                </extension>
                <identifier>
                  <system value="https://www.healthgorilla.com"/>
                  <value value="1da4a75d4bfb948a97ca0961"/>
                </identifier>
                <identifier>
                  <type>
                    <coding>
                      <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
```

```xml
          <code value="ACSN"/>
          <display value="Accession ID"/>
        </coding>
        <text value="Lab Reference ID"/>
      </type>
      <value value="110455"/>
    </identifier>
    <status value="active"/>
    <intent value="order"/>
    <subject>
      <reference value="Patient/42678d5d78c7205e82751082"/>
      <display value="Test Patient"/>
    </subject>
    <authoredOn value="2019-10-16T23:13:33+00:00"/>
    <author>
      <reference value="Practitioner/ea7f8e5d71d478f30bc37754"/>
      <display value="Neil Nitin Parikh, M.D., M.B.A."/>
    </author>
    <note>
      <text value="Diagnostic Test."/>
    </note>
    <action>
      <resource>
        <reference
value="ProcedureRequest/1da4a75d4bfb948a97ca0961-007625"/>
        <display value="Lead, Blood (Adult)"/>
      </resource>
    </action>
  </RequestGroup>
</resource>
</entry>
<entry>
  <fullUrl
value="https://healthgorilla.com/fhir/RequestGroup/68ffa55dfa1816d7e3c17260"/>
  <resource>
    <RequestGroup xmlns="http://hl7.org/fhir">
      <id value="68ffa55dfa1816d7e3c17260"/>
      <meta>
        <lastUpdated value="2019-10-15T17:18:32.403+00:00"/>
        <profile
value="https://healthgorilla.com/fhir/StructureDefinition/hg-order"/>
      </meta>
```

```xml
<contained>
   <Account xmlns="http://hl7.org/fhir">
      <id value="1"/>
      <meta>
         <profile value="https://healthgorilla.com/fhir/StructureDefinition/hg-order-account"/>
      </meta>
      <type>
         <coding>
            <system value="https://www.healthgorilla.com/order-billto"/>
            <code value="patient"/>
            <display value="Patient"/>
         </coding>
         <text value="Patient"/>
      </type>
      <guarantor>
         <party>
            <reference value="Patient/42678d5d78c7205e82751082"/>
            <display value="Test Patient"/>
         </party>
      </guarantor>
   </Account>
</contained>
<contained>
   <Practitioner xmlns="http://hl7.org/fhir">
      <id value="2"/>
      <meta>
         <lastUpdated value="2019-10-07T21:20:59.545+00:00"/>
         <profile value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
      </meta>
      <identifier>
         <system value="https://www.healthgorilla.com"/>
```

```xml
            <value value="39b8165d0123fcf10ef2ae6f"/>
        </identifier>
        <identifier>
            <type>
                <coding>
                    <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                    <code value="PRN"/>
                    <display value="Passport number"/>
                </coding>
                <text value="Passport number"/>
            </type>
            <system value="http://hl7.org/fhir/sid/us-npi"/>
            <value value="1689942526"/>
        </identifier>
        <identifier>
            <type>
                <coding>
                    <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                    <code value="AN"/>
                    <display value="Account number"/>
                </coding>
                <text value="Account number"/>
            </type>
            <value value="04843980"/>
        </identifier>
        <active value="true"/>
        <name>
            <use value="official"/>
            <text value="Neil Nitin Parikh, M.D., M.B.A."/>
            <family value="Parikh"/>
            <given value="Neil"/>
            <given value="Nitin"/>
            <suffix value="M.D., M.B.A."/>
        </name>
        <address>
            <extension url="http://hl7.org/fhir/StructureDefinition/geolocation">
                <extension url="latitude">
                    <valueDecimal value="40.723664"/>
                </extension>
                <extension url="longitude">
                    <valueDecimal value="-74.0063695"/>
                </extension>
            </extension>
```

```xml
                    <use value="work"/>
                    <text value="75 Varick Street, New York, NY 10013"/>
                    <line value="75 Varick Street"/>
                    <city value="New York"/>
                    <state value="NY"/>
                    <postalCode value="10013"/>
                    <country value="USA"/>
                </address>
            </Practitioner>
        </contained>
        <contained>
            <Organization xmlns="http://hl7.org/fhir">
                <id value="3"/>
                <meta>
                    <lastUpdated value="2019-08-02T23:19:04.648+00:00"/>
                </meta>
                <identifier>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="45b5165d3ec7da692c10c139"/>
                </identifier>
                <identifier>
                    <type>
                        <coding>
                            <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                            <code value="AN"/>
                            <display value="Account number"/>
                        </coding>
                        <text value="Account Number"/>
                    </type>
                    <value value="SO006686"/>
                </identifier>
                <active value="true"/>
                <type>
                    <coding>
                        <system value="http://hl7.org/fhir/organization-type"/>
                        <code value="prov"/>
                        <display value="Healthcare Provider"/>
                    </coding>
                    <text value="Healthcare Provider"/>
                </type>
                <type>
                    <coding>
                        <system value="https://www.healthgorilla.com/fhir/organization-type"/>
```

```xml
                <code value="PR"/>
                <display value="Practice"/>
              </coding>
              <text value="Practice"/>
            </type>
            <name value="Oscar Health"/>
          </Organization>
        </contained>
        <contained>
          <Specimen xmlns="http://hl7.org/fhir">
            <id value="4"/>
            <subject>
              <reference value="Patient/42678d5d78c7205e82751082"/>
              <display value="Test Patient"/>
            </subject>
            <collection>
              <collectedDateTime value="2018-09-20T09:21:26+00:00"/>
            </collection>
          </Specimen>
        </contained>
        <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-authorizedBy">
          <valueReference>
            <reference
value="Organization/tl-a855594f7289f320852987c3-45b5165d83a726082c0ae24c"/>
            <display value="Health Gorilla Demo Account"/>
          </valueReference>
        </extension>
        <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-account">
          <valueReference>
            <reference value="#1"/>
          </valueReference>
        </extension>
        <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-performer">
          <valueReference>
            <reference value="Organization/f-a855594f43fe879c6570b92e"/>
            <display value="LabCorp"/>
          </valueReference>
        </extension>
        <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-requester">
```

```xml
          <extension url="agent">
            <valueReference>
              <reference value="#2"/>
            </valueReference>
          </extension>
          <extension url="onBehalfOf">
            <valueReference>
              <reference value="#3"/>
            </valueReference>
          </extension>
        </extension>
        <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-specimen">
          <valueReference>
            <reference value="#4"/>
          </valueReference>
        </extension>
        <identifier>
          <system value="https://www.healthgorilla.com"/>
          <value value="68ffa55dfa1816d7e3c17260"/>
        </identifier>
        <identifier>
          <type>
            <coding>
              <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
              <code value="ACSN"/>
              <display value="Accession ID"/>
            </coding>
            <text value="Lab Reference ID"/>
          </type>
          <value value="110030"/>
        </identifier>
        <status value="active"/>
        <intent value="order"/>
        <subject>
          <reference value="Patient/42678d5d78c7205e82751082"/>
          <display value="Test Patient"/>
        </subject>
        <authoredOn value="2019-10-15T17:18:32+00:00"/>
        <author>
          <reference value="Practitioner/ea7f8e5d71d478f30bc37754"/>
          <display value="Neil Nitin Parikh, M.D., M.B.A."/>
        </author>
```

```xml
            <note>
               <text value="Diagnostic Test."/>
            </note>
            <action>
               <resource>
                  <reference value="ProcedureRequest/68ffa55dfa1816d7e3c17260-007625"/>
                  <display value="Lead, Blood (Adult)"/>
               </resource>
            </action>
         </RequestGroup>
      </resource>
   </entry>
   <entry>
      <fullUrl value="https://healthgorilla.com/fhir/RequestGroup/5bfda55d87bc8c7df2303c6f"/>
      <resource>
         <RequestGroup xmlns="http://hl7.org/fhir">
            <id value="5bfda55d87bc8c7df2303c6f"/>
            <meta>
               <lastUpdated value="2019-10-15T17:09:47.964+00:00"/>
               <profile value="https://healthgorilla.com/fhir/StructureDefinition/hg-order"/>
            </meta>
            <contained>
               <Account xmlns="http://hl7.org/fhir">
                  <id value="1"/>
                  <meta>
                     <profile
value="https://healthgorilla.com/fhir/StructureDefinition/hg-order-account"/>
                  </meta>
                  <type>
                     <coding>
                        <system value="https://www.healthgorilla.com/order-billto"/>
                        <code value="patient"/>
                        <display value="Patient"/>
                     </coding>
                     <text value="Patient"/>
                  </type>
                  <guarantor>
                     <party>
                        <reference value="Patient/42678d5d78c7205e82751082"/>
                        <display value="Test Patient"/>
                     </party>
                  </guarantor>
               </Account>
```

```xml
        </contained>
        <contained>
          <Practitioner xmlns="http://hl7.org/fhir">
            <id value="2"/>
            <meta>
              <lastUpdated value="2019-10-07T21:20:59.545+00:00"/>
              <profile
value="http://hl7.org/fhir/us/core/StructureDefinition/us-core-practitioner"/>
            </meta>
            <identifier>
              <system value="https://www.healthgorilla.com"/>
              <value value="39b8165d0123fcf10ef2ae6f"/>
            </identifier>
            <identifier>
              <type>
                <coding>
                  <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                  <code value="PRN"/>
                  <display value="Passport number"/>
                </coding>
                <text value="Passport number"/>
              </type>
              <system value="http://hl7.org/fhir/sid/us-npi"/>
              <value value="1689942526"/>
            </identifier>
            <identifier>
              <type>
                <coding>
                  <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                  <code value="AN"/>
                  <display value="Account number"/>
                </coding>
                <text value="Account number"/>
              </type>
              <value value="04843980"/>
            </identifier>
            <active value="true"/>
            <name>
              <use value="official"/>
              <text value="Neil Nitin Parikh, M.D., M.B.A."/>
              <family value="Parikh"/>
              <given value="Neil"/>
              <given value="Nitin"/>
```

```xml
                    <suffix value="M.D., M.B.A."/>
                </name>
                <address>
                    <extension url="http://hl7.org/fhir/StructureDefinition/geolocation">
                        <extension url="latitude">
                            <valueDecimal value="40.723664"/>
                        </extension>
                        <extension url="longitude">
                            <valueDecimal value="-74.0063695"/>
                        </extension>
                    </extension>
                    <use value="work"/>
                    <text value="75 Varick Street, New York, NY 10013"/>
                    <line value="75 Varick Street"/>
                    <city value="New York"/>
                    <state value="NY"/>
                    <postalCode value="10013"/>
                    <country value="USA"/>
                </address>
            </Practitioner>
        </contained>
        <contained>
            <Organization xmlns="http://hl7.org/fhir">
                <id value="3"/>
                <meta>
                    <lastUpdated value="2019-08-02T23:19:04.648+00:00"/>
                </meta>
                <identifier>
                    <system value="https://www.healthgorilla.com"/>
                    <value value="45b5165d3ec7da692c10c139"/>
                </identifier>
                <identifier>
                    <type>
                        <coding>
                            <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
                            <code value="AN"/>
                            <display value="Account number"/>
                        </coding>
                        <text value="Account Number"/>
                    </type>
                    <value value="SO006686"/>
                </identifier>
                <active value="true"/>
```

```xml
            <type>
               <coding>
                  <system value="http://hl7.org/fhir/organization-type"/>
                  <code value="prov"/>
                  <display value="Healthcare Provider"/>
               </coding>
               <text value="Healthcare Provider"/>
            </type>
            <type>
               <coding>
                  <system value="https://www.healthgorilla.com/fhir/organization-type"/>
                  <code value="PR"/>
                  <display value="Practice"/>
               </coding>
               <text value="Practice"/>
            </type>
            <name value="Oscar Health"/>
         </Organization>
      </contained>
      <contained>
         <Specimen xmlns="http://hl7.org/fhir">
            <id value="4"/>
            <subject>
               <reference value="Patient/42678d5d78c7205e82751082"/>
               <display value="Test Patient"/>
            </subject>
            <collection>
               <collectedDateTime value="2018-09-20T09:21:26+00:00"/>
            </collection>
         </Specimen>
      </contained>
      <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-authorizedBy">
         <valueReference>
            <reference
value="Organization/tl-a855594f7289f320852987c3-45b5165d83a726082c0ae24c"/>
            <display value="Health Gorilla Demo Account"/>
         </valueReference>
      </extension>
      <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-account">
         <valueReference>
            <reference value="#1"/>
```

```xml
        </valueReference>
      </extension>
      <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-performer">
        <valueReference>
          <reference value="Organization/f-a855594f43fe879c6570b92e"/>
          <display value="LabCorp"/>
        </valueReference>
      </extension>
      <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-requester">
        <extension url="agent">
          <valueReference>
            <reference value="#2"/>
          </valueReference>
        </extension>
        <extension url="onBehalfOf">
          <valueReference>
            <reference value="#3"/>
          </valueReference>
        </extension>
      </extension>
      <extension
url="https://www.healthgorilla.com/fhir/StructureDefinition/requestgroup-specimen">
        <valueReference>
          <reference value="#4"/>
        </valueReference>
      </extension>
      <identifier>
        <system value="https://www.healthgorilla.com"/>
        <value value="5bfda55d87bc8c7df2303c6f"/>
      </identifier>
      <identifier>
        <type>
          <coding>
            <system value="http://terminology.hl7.org/CodeSystem/v2-0203"/>
            <code value="ACSN"/>
            <display value="Accession ID"/>
          </coding>
          <text value="Lab Reference ID"/>
        </type>
        <value value="110026"/>
      </identifier>
```

```xml
                <status value="active"/>
                <intent value="order"/>
                <subject>
                    <reference value="Patient/42678d5d78c7205e82751082"/>
                    <display value="Test Patient"/>
                </subject>
                <authoredOn value="2019-10-15T17:09:47+00:00"/>
                <author>
                    <reference value="Practitioner/ea7f8e5d71d478f30bc37754"/>
                    <display value="Neil Nitin Parikh, M.D., M.B.A."/>
                </author>
                <note>
                    <text value="Diagnostic Test."/>
                </note>
                <action>
                    <resource>
                        <reference value="ProcedureRequest/5bfda55d87bc8c7df2303c6f-007625"/>
                        <display value="Lead, Blood (Adult)"/>
                    </resource>
                </action>
            </RequestGroup>
        </resource>
    </entry>
    <entry>
        <fullUrl value="https://healthgorilla.com/fhir/RequestGroup/30fda55d29fcf04729b2f680"/>
        <resource>
            <RequestGroup xmlns="http://hl7.org/fhir">
                <id value="30fda55d29fcf04729b2f680"/>
                <meta>
                    <lastUpdated value="2019-10-15T17:09:04.953+00:00"/>
                    <profile value="https://healthgorilla.com/fhir/StructureDefinition/hg-order"/>
                </meta>
                <contained>
                    <Account xmlns="http://hl7.org/fhir">
                        <id value="1"/>
                        <meta>
                            <profile
value="https://healthgorilla.com/fhir/StructureDefinition/hg-order-account"/>
                        </meta>
                        <type>
                            <coding>
                                <system value="https://www.healthgorilla.com/order-billto"/>
                                <code value="patient"/>
```

```
    <display value="Patient"/>
</coding>
```