MSH : Message Header

| Location | Data Element | Data | Categorization |
|----------|---------------------------------------|-------------------------|----------------|
| MSH-1 | Field Separator | | |
| MSH-2 | Encoding Characters | ^~\& | |
| MSH-3 | Sending Application | | |
| MSH-3.1 | Namespace ID | Test EHR Application | |
| MSH-3.2 | Universal ID | 11 | |
| MSH-3.3 | Universal ID Type | | |
| MSH-4 | Sending Facility | | |
| MSH-4.1 | Namespace ID | X68 | |
| MSH-4.2 | Universal ID | | |
| MSH-4.3 | Universal ID Type | | |
| MSH-5 | Receiving Application | | |
| MSH-5.1 | Namespace ID | | |
| MSH-5.2 | Universal ID | | |
| MSH-5.3 | Universal ID Type | | |
| MSH-6 | Receiving Facility | | |
| MSH-6.1 | Namespace ID | NIST Test Iz Reg | |
| MSH-6.2 | Universal ID | | |
| MSH-6.3 | Universal ID Type | | |
| MSH-7 | Date/Time Of Message | | |
| MSH-7.1 | Time | 20120701082240- 0500 | |
| MSH-9 | Message Type | | |
| MSH-9.1 | Message Code | VXU | |
| MSH-9.2 | Trigger Event | V04 | |
| MSH-9.3 | Message Structure | VXU_V04 | |
| MSH-10 | Message Control ID | NIST-IZ-001.00 | |
| MSH-11 | Processing ID | | |
| MSH-11.1 | Processing ID | P | |
| MSH-12 | Version ID | | |
| MSH-12.1 | Version ID | 2.5.1 | |
| MSH-15 | Accept Acknowledgment Type | ER | |
| MSH-16 | Application Acknowledgment Type | AL | |
| MSH-21 | Message Profile Identifier | | |
| MSH-21.1 | Entity Identifier | Z22 | |
| MSH-21.2 | Namespace ID | CDCPHINVS | |
| MSH-21.3 | Universal ID | | |
| MSH-21.4 | Universal ID Type | | |
| | | | |

| MSH-22 | Sending Responsible Organization | |
|------------|------------------------------------|--|
| MSH-22.1 | Organization Name | |
| MSH-22.6 | Assigning Authority | |
| MSH-22.6.1 | Namespace ID | |
| MSH-22.6.2 | Universal ID | |
| MSH-22.6.3 | Universal ID Type | |
| MSH-22.7 | Identifier Type Code | |
| MSH-22.10 | Organization Identifier | |
| MSH-23 | Receiving Responsible Organization | |
| MSH-23.1 | Organization Name | |
| MSH-23.6 | Assigning Authority | |
| MSH-23.6.1 | Namespace ID | |
| MSH-23.6.2 | Universal ID | |
| MSH-23.6.3 | Universal ID Type | |
| MSH-23.7 | Identifier Type Code | |
| MSH-23.10 | Organization Identifier | |

PID: Patient Identification

| Location | Data Element | Data | Categorization |
|--------------|-------------------------|---------|----------------|
| PID-1 | Set ID - PID | 1 | |
| PID-3[1] | Patient Identifier List | | |
| PID-3[1].1 | ID Number | 123456 | |
| PID-3[1].4 | Assigning Authority | | |
| PID-3[1].4.1 | Namespace ID | MYEHR | |
| PID-3[1].4.2 | Universal ID | | |
| PID-3[1].4.3 | Universal ID Type | | |
| PID-3[1].5 | Identifier Type Code | MR | |
| PID-3[2] | Patient Identifier List | | |
| PID-3[2].1 | ID Number | 987633 | |
| PID-3[2].4 | Assigning Authority | | |
| PID-3[2].4.1 | Namespace ID | MYIIS | |
| PID-3[2].4.2 | Universal ID | | |
| PID-3[2].4.3 | Universal ID Type | | |
| PID-3[2].5 | Identifier Type Code | SR | |
| PID-5 | Patient Name | | |
| PID-5.1 | Family Name | | |
| PID-5.1.1 | Surname | Morales | |
| | | | |

| PID-5.2 | Given Name | Mariela | |
|---------------|--|--------------------|--|
| PID-5.3 | Second and Further Given Names or Initials Thereof | Gonzales | |
| PID-5.7 | Name Type Code | L | |
| PID-6 | Mother's Maiden Name | | |
| PID-6.1 | Family Name | | |
| PID-6.1.1 | Surname | Gonzales | |
| PID-6.7 | Name Type Code | M | |
| PID-7 | Date/Time of Birth | | |
| PID-7.1 | Time | 201510011115 | |
| PID-8 | Administrative Sex | F | |
| PID-10 | Race | | |
| PID-10.1 | Identifier | 2106-3 | |
| PID-10.2 | Text | White | |
| PID-10.3 | Name of Coding System | CDCREC | |
| PID-11[1] | Patient Address | | |
| PID-11[1].1 | Street Address | | |
| PID-11[1].1.1 | Street or Mailing Address | 3321 Standish Way | |
| PID-11[1].2 | Other Designation | | |
| PID-11[1].3 | City | Stamford | |
| PID-11[1].4 | State or Province | CT | |
| PID-11[1].5 | Zip or Postal Code | 06903 | |
| PID-11[1].6 | Country | USA | |
| PID-11[1].7 | Address Type | L | |
| PID-11[2] | Patient Address | | |
| PID-11[2].1 | Street Address | | |
| PID-11[2].1.1 | Street or Mailing Address | 325 Shorline Drive | |
| PID-11[2].2 | Other Designation | | |
| PID-11[2].3 | City | Stamford | |
| PID-11[2].4 | State or Province | CT | |
| PID-11[2].5 | Zip or Postal Code | 06901 | |
| PID-11[2].6 | Country | | |
| PID-11[2].7 | Address Type | BDL | |
| PID-13 | Phone Number - Home | | |
| PID-13.2 | Telecommunication Use Code | PRN | |
| PID-13.3 | Telecommunication Equipment Type | PH | |
| PID-13.4 | Email Address | | |
| PID-13.6 | Area/City Code | 203 | |
| | | | |

| PID-13.7 PID-22 | Local Number Ethnic Group | 5551214 | |
|--------------------|------------------------------|--------------------|--|
| PID-22.1 | Identifier | 2135-2 | |
| PID-22.2 | Text | Hispanic or Latino | |
| PID-22.3 | Name of Coding System | CDCREC | |
| PID-24 | Multiple Birth Indicator | | |
| PID-25 | Birth Order | | |
| PID-29 | Patient Death Date and Time | | |
| PID-29.1 | Time | | |
| PID-30 | Patient Death Indicator | | |

-PD1 : Patient Additional Demographic -

| 1 D1 . 1 aucht Audhonai Demographic | | | |
|-------------------------------------|---|------------------------------|----------------|
| Location | Data Element | Data | Categorization |
| PD1-11 | Publicity Code | | |
| PD1-11.1 | Identifier | 02 | |
| PD1-11.2 | Text | Reminder/Recall - any method | |
| PD1-11.3 | Name of Coding System | HL70215 | |
| PD1-12 | Protection Indicator | | |
| PD1-13 | Protection Indicator Effective Date | | |
| PD1-16 | Immunization Registry Status | A | |
| PD1-17 | Immunization Registry Status Effective Date | 20120701 | |
| PD1-18 | Publicity Code Effective Date | 20120701 | |

-NK1: Next of Kin / Associated Parties -

| THE THERE OF IMM / THOSO CHARGE I AT LICE | | | |
|---|--|----------|----------------|
| Location | Data Element | Data | Categorization |
| NK1-1 | Set ID - NK1 | 1 | |
| NK1-2 | Name | | |
| NK1-2.1 | Family Name | | |
| NK1-2.1.1 | Surname | Morales | |
| NK1-2.2 | Given Name | Joanna | |
| NK1-2.3 | Second and Further Given Names or Initials Thereof | Gonzales | |
| NK1-2.7 | Name Type Code | L | |
| NK1-3 | Relationship | | |
| | | | |

| NK1-3.1 | Identifier | MTH | |
|-----------|-------------------------------------|-------------------|--|
| NK1-3.2 | Text | Mother | |
| NK1-3.3 | Name of Coding System | HL70063 | |
| NK1-4 | Address | | |
| NK1-4.1 | Street Address | | |
| NK1-4.1.1 | Street or Mailing Address | 4623 Standish Way | |
| NK1-4.2 | Other Designation | | |
| NK1-4.3 | City | Stamford | |
| NK1-4.4 | State or Province | CT | |
| NK1-4.5 | Zip or Postal Code | 06903 | |
| NK1-4.6 | Country | | |
| NK1-4.7 | Address Type | L | |
| NK1-5 | Phone Number | | |
| NK1-5.2 | Telecommunication Use Code | PRN | |
| NK1-5.3 | Telecommunication Equipment Type | PH | |
| NK1-5.4 | Email Address | | |
| NK1-5.6 | Area/City Code | 203 | |
| NK1-5.7 | Local Number | 5551213 | |

-ORC[*]-

| Location | Data Element | Data | Categorization |
|------------|--|--------|----------------|
| ORC-1 | Order Control | RE | |
| ORC-2 | Placer Order Number | | |
| ORC-2.1 | Entity Identifier | | |
| ORC-2.2 | Namespace ID | | |
| ORC-2.3 | Universal ID | | |
| ORC-2.4 | Universal ID Type | | |
| ORC-3 | Filler Order Number | | |
| ORC-3.1 | Entity Identifier | 197027 | |
| ORC-3.2 | Namespace ID | DCS | |
| ORC-3.3 | Universal ID | | |
| ORC-3.4 | Universal ID Type | | |
| ORC-10 | Entered By | | |
| ORC-10.1 | ID Number | | |
| ORC-10.2 | Family Name | | |
| ORC-10.2.1 | Surname | Sirtis | |
| ORC-10.3 | Given Name | Lisa | |
| ORC-10.4 | Second and Further Given Names or Initials Thereof | | |

| ORC-10.9 | Assigning Authority | | |
|------------|--|--------------------|--|
| ORC-10.9.1 | Namespace ID | | |
| ORC-10.9.2 | Universal ID | | |
| ORC-10.9.3 | Universal ID Type | | |
| ORC-10.10 | Name Type Code | | |
| ORC-10.13 | Identifier Type Code | | |
| ORC-12 | Ordering Provider | | |
| ORC-12.1 | ID Number | | |
| ORC-12.2 | Family Name | | |
| ORC-12.2.1 | Surname | Carter | |
| ORC-12.3 | Given Name | Jane | |
| ORC-12.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-12.9 | Assigning Authority | | |
| ORC-12.9.1 | Namespace ID | | |
| ORC-12.9.2 | Universal ID | | |
| ORC-12.9.3 | Universal ID Type | | |
| ORC-12.10 | Name Type Code | L | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SH | |
| ORC-17.2 | Text | Shoreline Hospital | |
| ORC-17.3 | Name of Coding System | HL70362 | |

| Location | Data Element | Data | Categorization |
|----------|---------------------|------|----------------|
| ORC-1 | Order Control | RE | |
| ORC-2 | Placer Order Number | | |
| ORC-2.1 | Entity Identifier | | |
| ORC-2.2 | Namespace ID | | |
| ORC-2.3 | Universal ID | | |
| ORC-2.4 | Universal ID Type | | |
| ORC-3 | Filler Order Number | | |
| ORC-3.1 | Entity Identifier | 9999 | |
| ORC-3.2 | Namespace ID | DCS | |
| ORC-3.3 | Universal ID | | |
| ORC-3.4 | Universal ID Type | | |

| ORC-10 | Entered By | | |
|------------|--|----------------------|--|
| ORC-10.1 | ID Number | | |
| ORC-10.2 | Family Name | | |
| ORC-10.2.1 | Surname | Molina | |
| ORC-10.3 | Given Name | Sandra | |
| ORC-10.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-10.9 | Assigning Authority | | |
| ORC-10.9.1 | Namespace ID | | |
| ORC-10.9.2 | Universal ID | | |
| ORC-10.9.3 | Universal ID Type | | |
| ORC-10.10 | Name Type Code | | |
| ORC-10.13 | Identifier Type Code | | |
| ORC-12 | Ordering Provider | | |
| ORC-12.1 | ID Number | | |
| ORC-12.2 | Family Name | | |
| ORC-12.2.1 | Surname | Smith | |
| ORC-12.3 | Given Name | Frank | |
| ORC-12.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-12.9 | Assigning Authority | | |
| ORC-12.9.1 | Namespace ID | | |
| ORC-12.9.2 | Universal ID | | |
| ORC-12.9.3 | Universal ID Type | | |
| ORC-12.10 | Name Type Code | L | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |

| Location | Data Element | Data | Categorization |
|----------|---------------------|------|----------------|
| ORC-1 | Order Control | RE | |
| ORC-2 | Placer Order Number | | |
| ORC-2.1 | Entity Identifier | | |
| | | | |

| ORC-2.2 | Namespace ID | | |
|------------|--|----------------------|--|
| ORC-2.3 | Universal ID | | |
| ORC-2.4 | Universal ID Type | | |
| ORC-3 | Filler Order Number | | |
| ORC-3.1 | Entity Identifier | 9999 | |
| ORC-3.2 | Namespace ID | DCS | |
| ORC-3.3 | Universal ID | | |
| ORC-3.4 | Universal ID Type | | |
| ORC-10 | Entered By | | |
| ORC-10.1 | ID Number | | |
| ORC-10.2 | Family Name | | |
| ORC-10.2.1 | Surname | Molina | |
| ORC-10.3 | Given Name | Sandra | |
| ORC-10.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-10.9 | Assigning Authority | | |
| ORC-10.9.1 | Namespace ID | | |
| ORC-10.9.2 | Universal ID | | |
| ORC-10.9.3 | Universal ID Type | | |
| ORC-10.10 | Name Type Code | | |
| ORC-10.13 | Identifier Type Code | | |
| ORC-12 | Ordering Provider | | |
| ORC-12.1 | ID Number | | |
| ORC-12.2 | Family Name | | |
| ORC-12.2.1 | Surname | Smith | |
| ORC-12.3 | Given Name | Frank | |
| ORC-12.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-12.9 | Assigning Authority | | |
| ORC-12.9.1 | Namespace ID | | |
| ORC-12.9.2 | Universal ID | | |
| ORC-12.9.3 | Universal ID Type | | |
| ORC-12.10 | Name Type Code | L | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | |
| | Name of Coding | | |

| ORC-17.3 | System | HL70362 |
|----------|--------|---------|
|----------|--------|---------|

| Location | Data Element | Data | Categorization |
|------------|--|--------|----------------|
| ORC-1 | Order Control | RE | |
| ORC-2 | Placer Order Number | | |
| ORC-2.1 | Entity Identifier | | |
| ORC-2.2 | Namespace ID | | |
| ORC-2.3 | Universal ID | | |
| ORC-2.4 | Universal ID Type | | |
| ORC-3 | Filler Order Number | | |
| ORC-3.1 | Entity Identifier | 9999 | |
| ORC-3.2 | Namespace ID | DCS | |
| ORC-3.3 | Universal ID | | |
| ORC-3.4 | Universal ID Type | | |
| ORC-10 | Entered By | | |
| ORC-10.1 | ID Number | | |
| ORC-10.2 | Family Name | | |
| ORC-10.2.1 | Surname | Molina | |
| ORC-10.3 | Given Name | Sandra | |
| ORC-10.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-10.9 | Assigning Authority | | |
| ORC-10.9.1 | Namespace ID | | |
| ORC-10.9.2 | Universal ID | | |
| ORC-10.9.3 | Universal ID Type | | |
| ORC-10.10 | Name Type Code | | |
| ORC-10.13 | Identifier Type Code | | |
| ORC-12 | Ordering Provider | | |
| ORC-12.1 | ID Number | | |
| ORC-12.2 | Family Name | | |
| ORC-12.2.1 | Surname | Smith | |
| ORC-12.3 | Given Name | Frank | |
| ORC-12.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-12.9 | Assigning Authority | | |
| ORC-12.9.1 | Namespace ID | | |
| ORC-12.9.2 | Universal ID | | |
| | Universal ID | | |

| ORC-12.9.3 | Type | | |
|------------|--------------------------|----------------------|--|
| ORC-12.10 | Name Type Code | L | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |

| Location | Data Element | Data | Categorization |
|------------|--|--------|----------------|
| ORC-1 | Order Control | RE | |
| ORC-2 | Placer Order Number | | |
| ORC-2.1 | Entity Identifier | | |
| ORC-2.2 | Namespace ID | | |
| ORC-2.3 | Universal ID | | |
| ORC-2.4 | Universal ID Type | | |
| ORC-3 | Filler Order Number | | |
| ORC-3.1 | Entity Identifier | 9999 | |
| ORC-3.2 | Namespace ID | DCS | |
| ORC-3.3 | Universal ID | | |
| ORC-3.4 | Universal ID Type | | |
| ORC-10 | Entered By | | |
| ORC-10.1 | ID Number | | |
| ORC-10.2 | Family Name | | |
| ORC-10.2.1 | Surname | Molina | |
| ORC-10.3 | Given Name | Sandra | |
| ORC-10.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-10.9 | Assigning Authority | | |
| ORC-10.9.1 | Namespace ID | | |
| ORC-10.9.2 | Universal ID | | |
| ORC-10.9.3 | Universal ID Type | | |
| ORC-10.10 | Name Type Code | | |
| ORC-10.13 | Identifier Type Code | | |
| ORC-12 | Ordering Provider | | |
| ORC-12.1 | ID Number | | |
| ORC-12.2 | Family Name | | |
| ORC-12.2.1 | Surname | Smith | |

| ORC-12.3 | Given Name | Frank | |
|------------|--|----------------------|--|
| ORC-12.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-12.9 | Assigning Authority | | |
| ORC-12.9.1 | Namespace ID | | |
| ORC-12.9.2 | Universal ID | | |
| ORC-12.9.3 | Universal ID Type | | |
| ORC-12.10 | Name Type Code | L | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |

| Location | Data Element | Data | Categorization |
|------------|--|--------|----------------|
| ORC-1 | Order Control | RE | |
| ORC-2 | Placer Order Number | | |
| ORC-2.1 | Entity Identifier | | |
| ORC-2.2 | Namespace ID | | |
| ORC-2.3 | Universal ID | | |
| ORC-2.4 | Universal ID Type | | |
| ORC-3 | Filler Order Number | | |
| ORC-3.1 | Entity Identifier | 9999 | |
| ORC-3.2 | Namespace ID | DCS | |
| ORC-3.3 | Universal ID | | |
| ORC-3.4 | Universal ID Type | | |
| ORC-10 | Entered By | | |
| ORC-10.1 | ID Number | | |
| ORC-10.2 | Family Name | | |
| ORC-10.2.1 | Surname | Molina | |
| ORC-10.3 | Given Name | Sandra | |
| ORC-10.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-10.9 | Assigning Authority | | |
| ORC-10.9.1 | Namespace ID | | |
| ORC-10.9.2 | Universal ID | | |
| ORC-10.9.3 | Universal ID | | |

| | Type | | |
|------------|--|----------------------|--|
| ORC-10.10 | Name Type Code | | |
| ORC-10.13 | Identifier Type Code | | |
| ORC-12 | Ordering Provider | | |
| ORC-12.1 | ID Number | | |
| ORC-12.2 | Family Name | | |
| ORC-12.2.1 | Surname | Smith | |
| ORC-12.3 | Given Name | Frank | |
| ORC-12.4 | Second and Further Given Names or Initials Thereof | | |
| ORC-12.9 | Assigning Authority | | |
| ORC-12.9.1 | Namespace ID | | |
| ORC-12.9.2 | Universal ID | | |
| ORC-12.9.3 | Universal ID Type | | |
| ORC-12.10 | Name Type Code | L | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |

-RXA[*]-

RXA: Pharmacy/Treatment Administration

| Location | Data Element | Data | Categorization |
|----------|-----------------------------------|--|----------------|
| RXA-1 | Give Sub-ID Counter | 0 | |
| RXA-2 | Administration Sub- ID Counter | 1 | |
| RXA-3 | Date/Time Start of Administration | | |
| RXA-3.1 | Time | 20151001 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 08 | |
| RXA-5.2 | Text | hepatitis B vaccine, pediatric or pediatric/adolescent dosage | |
| RXA-5.3 | Name of Coding System | CVX | |
| | Administered | | |

| RXA-6 | Amount | 999 | |
|------------|--|---|--|
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | Historical information - from public agency | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Sirtis | |
| RXA-10.3 | Given Name | Lisa | |
| RXA-10.4 | Second and Further Given Names or Initials Thereof | | |
| RXA-10.9 | Assigning Authority | | |
| RXA-10.9.1 | Namespace ID | | |
| RXA-10.9.2 | Universal ID | | |
| RXA-10.9.3 | Universal ID Type | | |
| RXA-10.10 | Name Type Code | | |
| RXA-10.13 | Identifier Type Code | | |
| RXA-11 | Administered-at Location | | |
| RXA-11.4 | Facility | | |
| RXA-11.4.1 | Namespace ID | DCS_DC | |
| RXA-11.4.2 | Universal ID | | |
| RXA-11.4.3 | Universal ID Type | | |
| RXA-15 | Substance Lot Number | 6332FK33 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101214 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | SKB | |
| RXA-17.2 | Text | GlaxoSmithKline Biologicals SA | |

| RXA-17.3 | Name of Coding System | MVX | |
|----------|---------------------------------------|-----|--|
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-20 | Completion Status | СР | |
| RXA-21 | Action Code - RXA | A | |

RXA: Pharmacy/Treatment Administration

| Location | Data Element | Data | Categorization |
|------------|--------------------------------------|--|----------------|
| RXA-1 | Give Sub-ID Counter | 0 | |
| RXA-2 | Administration Sub- ID Counter | 1 | |
| RXA-3 | Date/Time Start of Administration | | |
| RXA-3.1 | Time | 20151031 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 45 | |
| RXA-5.2 | Text | hepatitis B vaccine, unspecified formulation | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-6 | Administered Amount | 999 | |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.3 | Given Name | | |
| RXA-10.4 | Second and Further Given Names or | | |

| | Initials Thereof | | |
|------------|---------------------------------------|----|--|
| RXA-10.9 | Assigning Authority | | |
| RXA-10.9.1 | Namespace ID | | |
| RXA-10.9.2 | Universal ID | | |
| RXA-10.9.3 | Universal ID Type | | |
| RXA-10.10 | Name Type Code | | |
| RXA-10.13 | Identifier Type Code | | |
| RXA-11 | Administered-at Location | | |
| RXA-11.4 | Facility | | |
| RXA-11.4.1 | Namespace ID | | |
| RXA-11.4.2 | Universal ID | | |
| RXA-11.4.3 | Universal ID Type | | |
| RXA-15 | Substance Lot Number | | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | | |
| RXA-17.2 | Text | | |
| RXA-17.3 | Name of Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-20 | Completion Status | NA | |
| RXA-21 | Action Code - RXA | A | |

-RXA: Pharmacy/Treatment Administration -

| | an i i mai maey, i i c | | |
|----------|-----------------------------------|----------|----------------|
| Location | Data Element | Data | Categorization |
| RXA-1 | Give Sub-ID Counter | 0 | |
| RXA-2 | Administration Sub- ID Counter | 1 | |
| RXA-3 | Date/Time Start of Administration | | |
| RXA-3.1 | Time | 20151031 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 107 | |

| RXA-5.2 | Text | DTaP, unspecified formulation | |
|------------|--|-------------------------------|--|
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-6 | Administered Amount | 999 | |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.3 | Given Name | | |
| RXA-10.4 | Second and Further Given Names or Initials Thereof | | |
| RXA-10.9 | Assigning Authority | | |
| RXA-10.9.1 | Namespace ID | | |
| RXA-10.9.2 | Universal ID | | |
| RXA-10.9.3 | Universal ID Type | | |
| RXA-10.10 | Name Type Code | | |
| RXA-10.13 | Identifier Type Code | | |
| RXA-11 | Administered-at Location | | |
| RXA-11.4 | Facility | | |
| RXA-11.4.1 | Namespace ID | | |
| RXA-11.4.2 | Universal ID | | |
| RXA-11.4.3 | Universal ID Type | | |
| RXA-15 | Substance Lot Number | | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | | |
| RXA-17 | Substance | | |

| | Manufacturer Name | | |
|----------|---------------------------------------|----|--|
| RXA-17.1 | Identifier | | |
| RXA-17.2 | Text | | |
| RXA-17.3 | Name of Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-20 | Completion Status | NA | |
| RXA-21 | Action Code - RXA | A | |

RXA: Pharmacy/Treatment Administration -

| Location | Data Element | Data | Categorization |
|------------|-----------------------------------|----------|----------------|
| RXA-1 | Give Sub-ID Counter | 0 | |
| RXA-2 | Administration Sub- ID Counter | 1 | |
| RXA-3 | Date/Time Start of Administration | | |
| RXA-3.1 | Time | 20151031 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 08 | |
| RXA-5.2 | Text | Hib | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-6 | Administered Amount | 999 | |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.3 | Given Name | | |
| | Second and Further | | |

| RXA-10.4 | Given Names or Initials Thereof | | |
|------------|---------------------------------------|----|--|
| RXA-10.9 | Assigning Authority | | |
| RXA-10.9.1 | Namespace ID | | |
| RXA-10.9.2 | Universal ID | | |
| RXA-10.9.3 | Universal ID Type | | |
| RXA-10.10 | Name Type Code | | |
| RXA-10.13 | Identifier Type Code | | |
| RXA-11 | Administered-at Location | | |
| RXA-11.4 | Facility | | |
| RXA-11.4.1 | Namespace ID | | |
| RXA-11.4.2 | Universal ID | | |
| RXA-11.4.3 | Universal ID Type | | |
| RXA-15 | Substance Lot Number | | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | | |
| RXA-17.2 | Text | | |
| RXA-17.3 | Name of Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-20 | Completion Status | NA | |
| RXA-21 | Action Code - RXA | A | |

RXA: Pharmacy/Treatment Administration -

| Location | Data Element | Data | Categorization |
|----------|-----------------------------------|----------|----------------|
| RXA-1 | Give Sub-ID Counter | 0 | |
| RXA-2 | Administration Sub- ID Counter | 1 | |
| RXA-3 | Date/Time Start of Administration | | |
| RXA-3.1 | Time | 20151031 | |
| RXA-5 | Administered Code | | |

| RXA-5.1 | Identifier | 152 | |
|------------|--|--|--|
| RXA-5.2 | Text | Pneumococcal Conjugate, unspecified formulation | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-6 | Administered Amount | 999 | |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.3 | Given Name | | |
| RXA-10.4 | Second and Further Given Names or Initials Thereof | | |
| RXA-10.9 | Assigning Authority | | |
| RXA-10.9.1 | Namespace ID | | |
| RXA-10.9.2 | Universal ID | | |
| RXA-10.9.3 | Universal ID Type | | |
| RXA-10.10 | Name Type Code | | |
| RXA-10.13 | Identifier Type Code | | |
| RXA-11 | Administered-at Location | | |
| RXA-11.4 | Facility | | |
| RXA-11.4.1 | Namespace ID | | |
| RXA-11.4.2 | Universal ID | | |
| RXA-11.4.3 | Universal ID Type | | |
| RXA-15 | Substance Lot Number | | |
| RXA-16 | Substance Expiration Date | | |

| RXA-16.1 | Time | | |
|----------|---------------------------------------|----|--|
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | | |
| RXA-17.2 | Text | | |
| RXA-17.3 | Name of Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-20 | Completion Status | NA | |
| RXA-21 | Action Code - RXA | A | |

-RXA: Pharmacy/Treatment Administration -

| Location | Data Element | Data | Categorization |
|----------|-----------------------------------|------------------------------------|----------------|
| RXA-1 | Give Sub-ID Counter | 0 | |
| RXA-2 | Administration Sub- ID Counter | 1 | |
| RXA-3 | Date/Time Start of Administration | | |
| RXA-3.1 | Time | 20151031 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 122 | |
| RXA-5.2 | Text | rotavirus, unspecified formulation | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-6 | Administered Amount | 999 | |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| | | | |

| RXA-10.2.1 | Surname | |
|------------|--|----|
| RXA-10.3 | Given Name | |
| RXA-10.4 | Second and Further Given Names or Initials Thereof | |
| RXA-10.9 | Assigning Authority | |
| RXA-10.9.1 | Namespace ID | |
| RXA-10.9.2 | Universal ID | |
| RXA-10.9.3 | Universal ID Type | |
| RXA-10.10 | Name Type Code | |
| RXA-10.13 | Identifier Type Code | |
| RXA-11 | Administered-at Location | |
| RXA-11.4 | Facility | |
| RXA-11.4.1 | Namespace ID | |
| RXA-11.4.2 | Universal ID | |
| RXA-11.4.3 | Universal ID Type | |
| RXA-15 | Substance Lot Number | |
| RXA-16 | Substance Expiration Date | |
| RXA-16.1 | Time | |
| RXA-17 | Substance Manufacturer Name | |
| RXA-17.1 | Identifier | |
| RXA-17.2 | Text | |
| RXA-17.3 | Name of Coding System | |
| RXA-18 | Substance/Treatment Refusal Reason | |
| RXA-18.1 | Identifier | |
| RXA-18.2 | Text | |
| RXA-18.3 | Name of Coding System | |
| RXA-20 | Completion Status | NA |
| RXA-21 | Action Code - RXA | A |

-RXR : Pharmacy/Treatment Route -

| Location | Data Element | Data | Categorization |
|----------|---------------------|--------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C28161 | |
| RXR-1.2 | Text | IM | |
| | | | |

| RXR-1.3 | Name of Coding System | NCIT | |
|---------|--------------------------|------------|--|
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |

OBX[*]-

| Location | Data Element | Data | Categorization |
|----------|------------------------------|---|----------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30945-0 | |
| OBX-3.2 | Text | Vaccination contraindication | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | VXC23 | |
| OBX-5.2 | Text | current fever with moderate-to-severe illness | |
| OBX-5.3 | Name of Coding System | CDCPHINVS | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

| $\mathbf{O}\mathbf{D}\mathbf{V}$ | $\cdot \cap \mathbf{h}$ | 4 | · /D 14 | |
|----------------------------------|-------------------------|-----------|---------|---|
| •UBX | : ODS | servation | ı/Kesun | J |

| Eccusion Duta Element Duta Categorization | Location | Data Element | Data | Categorization |
|---|----------|--------------|------|----------------|
|---|----------|--------------|------|----------------|

| OBX-1 | Set ID - OBX | 2 | |
|----------|------------------------------|---|-------|
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30946-8 | |
| OBX-3.2 | Text | Vaccination contraindication/preca effective date | ution |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20150715 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

| Location | Data Element | Data | Categorization |
|----------|--------------------------|---|----------------|
| OBX-1 | Set ID - OBX | 3 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30944-3 | |
| OBX-3.2 | Text | Vaccination temporary contraindication/preca expiration date | aution |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20151201 | |
| OBX-6 | Units | | |
| | | | |

| OBX-6.1 | Identifier | | |
|----------|------------------------------|----------|--|
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

| Location | Data Element | Data | Categorization |
|----------|------------------------------|---|----------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30945-0 | |
| OBX-3.2 | Text | Vaccination contraindication | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | VXC23 | |
| OBX-5.2 | Text | current fever with moderate-to-severe illness | |
| OBX-5.3 | Name of Coding System | CDCPHINVS | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |

| OBX-17.3 | Name of Coding | |
|----------|----------------|--|
| OBA 17.5 | System | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization | | |
|----------|------------------------------|---|----------------|--|--|
| OBX-1 | Set ID - OBX | 2 | | | |
| OBX-2 | Value Type | TS | | | |
| OBX-3 | Observation Identifier | | | | |
| OBX-3.1 | Identifier | 30946-8 | | | |
| OBX-3.2 | Text | Vaccination contraindication/preca effective date | aution | | |
| OBX-3.3 | Name of Coding System | LN | | | |
| OBX-4 | Observation Sub-ID | 1 | | | |
| OBX-5 | Observation Value | | | | |
| OBX-5.1 | Time | 20150715 | | | |
| OBX-6 | Units | | | | |
| OBX-6.1 | Identifier | | | | |
| OBX-6.2 | Text | | | | |
| OBX-6.3 | Name of Coding System | | | | |
| OBX-11 | Observation Result Status | F | | | |
| OBX-14 | Date/Time of the Observation | | | | |
| OBX-14.1 | Time | 20151031 | | | |
| OBX-17 | Observation Method | | | | |
| OBX-17.1 | Identifier | | | | |
| OBX-17.2 | Text | | | | |
| OBX-17.3 | Name of Coding System | | | | |

| Location | Data Element | Data | Categorization |
|----------|---------------------------|---|----------------|
| OBX-1 | Set ID - OBX | 3 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30944-3 | |
| OBX-3.2 | Text | Vaccination temporary contraindication/preca expiration date | aution |
| OBX-3.3 | Name of Coding | LN | |

| | System | | |
|----------|------------------------------|----------|--|
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20151201 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

| Location | Data Element | Data | Categorization |
|----------|------------------------------|---|----------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30945-0 | |
| OBX-3.2 | Text | Vaccination contraindication | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | VXC23 | |
| OBX-5.2 | Text | current fever with moderate-to-severe illness | |
| OBX-5.3 | Name of Coding System | CDCPHINVS | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| | | | |

| OBX-14 | Date/Time of the Observation | | |
|----------|------------------------------|----------|--|
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

OBX : Observation/Result -

| Location | Data Element | Data | Categorization |
|----------|------------------------------|------------------------------------|----------------|
| OBX-1 | Set ID - OBX | 2 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30946-8 | |
| OBX-3.2 | Text | Vaccination contraindication/preca | aution |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20150715 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

| Location | Data Element | Data | Categorization |
|----------|------------------------|------|----------------|
| OBX-1 | Set ID - OBX | 3 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |

| OBX-3.1 | Identifier | 30944-3 | |
|----------|------------------------------|---|--------|
| OBX-3.2 | Text | Vaccination temporary contraindication/preca expiration date | aution |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20151201 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

| Location | Data Element | Data | Categorization |
|----------|--------------------------|---|----------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30945-0 | |
| OBX-3.2 | Text | Vaccination contraindication | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | VXC23 | |
| OBX-5.2 | Text | current fever with moderate-to-severe illness | |
| OBX-5.3 | Name of Coding System | CDCPHINVS | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |

| OBX-6.2 | Text | | |
|----------|------------------------------|----------|--|
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|------------------------------|------------------------------------|----------------|
| OBX-1 | Set ID - OBX | 2 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30946-8 | |
| OBX-3.2 | Text | Vaccination contraindication/preca | aution |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20150715 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

| Location | Data Element | Data | Categorization |
|----------|------------------------------|---|----------------|
| OBX-1 | Set ID - OBX | 3 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30944-3 | |
| OBX-3.2 | Text | Vaccination temporary contraindication/preca expiration date | nution |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20151201 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

| Location | Data Element | Data | Categorization |
|----------|---------------------------|------------------------------|----------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30945-0 | |
| OBX-3.2 | Text | Vaccination contraindication | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | VXC23 | |
| | | current fever with | |

| OBX-5.2 | Text | moderate-to-severe illness | |
|----------|------------------------------|----------------------------|--|
| OBX-5.3 | Name of Coding System | CDCPHINVS | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |

| Location | Data Element | Data | Categorization |
|----------|------------------------------|------------------------------------|----------------|
| OBX-1 | Set ID - OBX | 2 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 30946-8 | |
| OBX-3.2 | Text | Vaccination contraindication/preca | ution |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20150715 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20151031 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |

| OBX-17.2 | Text | |
|----------|--------------------------|--|
| OBX-17.3 | Name of Coding System | |

| Location | Data Element | Data | Categorization | | | |
|----------|------------------------------|---|----------------|--|--|--|
| OBX-1 | Set ID - OBX | 3 | | | | |
| OBX-2 | Value Type | TS | | | | |
| OBX-3 | Observation Identifier | | | | | |
| OBX-3.1 | Identifier | 30944-3 | | | | |
| OBX-3.2 | Text | Vaccination temporary contraindication/preca expiration date | aution | | | |
| OBX-3.3 | Name of Coding System | LN | | | | |
| OBX-4 | Observation Sub-ID | 1 | | | | |
| OBX-5 | Observation Value | | | | | |
| OBX-5.1 | Time | 20151201 | | | | |
| OBX-6 | Units | | | | | |
| OBX-6.1 | Identifier | | | | | |
| OBX-6.2 | Text | | | | | |
| OBX-6.3 | Name of Coding System | | | | | |
| OBX-11 | Observation Result Status | F | | | | |
| OBX-14 | Date/Time of the Observation | | | | | |
| OBX-14.1 | Time | 20151031 | | | | |
| OBX-17 | Observation Method | | | | | |
| OBX-17.1 | Identifier | | | | | |
| OBX-17.2 | Text | | | | | |
| OBX-17.3 | Name of Coding System | | | | | |