

2015-10-26 10:15:46

1. 1. Initial Data Load

- 1. 1.1. Juana Mariana Gonzales Initial Data Load**
 - 1. 1.1.1. Enter Initial Demographic Data for New Patient Juana Mariana Gonzales, 6-year old**
 - 2. 1.1.2. Enter Initial Immunization Data for Juana Mariana Gonzales: Immunizations from practice**
 - 3. 1.1.3. Enter Initial Immunization Data for Juana Mariana Gonzales from Another Practice**
 - 4. 1.1.4. Enter Initial Immunization Data for Juana Mariana Gonzales Reported by Parent**
 - 5. 1.1.5. Enter Adverse Reaction to the Polio Vaccine**
 - 6. 1.1.6. Enter allergy to egg albumin**
 - 7. 1.1.7. Enter HepB Dose1 and 3 of 3**
 - 8. 1.1.8. Enter DTaP Doses 1, 2, 3 and 4 of 5**
 - 9. 1.1.9. Enter Hib Doses 1-4 of 4**
 - 10. 1.1.10. Enter Polio Dose1 and 2 of 4**
 - 11. 1.1.11. Enter Pneumococcal,Doses 1-4 of 4**
 - 12. 1.1.12. Enter Rotavirus Dose1 and 2 of 3**
 - 13. 1.1.13. Enter Influenza History Doses**
 - 14. 1.1.14. Enter HepA Dose1 and 2 of 2**
 - 15. 1.1.15. Enter MMRV Dose1 and 2 of 3**
- 2. 1.2. Juan Marcel Gonzales Initial Data Load**
 - 1. 1.2.1. Enter Initial Demographic Data for New Patient Juan Marcel Gonzales**
 - 2. 1.2.2. Enter Clinical History for Juan Marcel Gonzales**
 - 3. 1.2.3. Enter HepB Dose1 and 2 of 3**
 - 4. 1.2.4. Enter DTaP Doses 1-4 of 5 Juan Marcel**
 - 5. 1.2.5. Enter Hib Doses 1-4 of 4 Juan Marcel**
 - 6. 1.2.6. Enter Polio Dose1-3 of 4 Juan Marcel**
 - 7. 1.2.7. Enter Pneumococcal,Doses 1-4 of 4 Juan Marcel**
 - 8. 1.2.8. Enter Rotavirus Dose1 and 2 of 3 Juan Marcel**
 - 9. 1.2.9. Enter Influenza History Doses Juan Marcel**
 - 10. 1.2.10. Enter HepA Dose1 and 2 of 2 Juan Marcel**
 - 11. 1.2.11. Enter MMRV Dose1 of 3 Juan Marcel**
- 3. 1.3. Mariela Gonzales Morales Initial Data Load**
 - 1. 1.3.1. Enter Initial Demographic Data for Mariela Gonzales Morales**
 - 2. 1.3.2. Enter Initial Clinical Information for Mariela**
 - 3. 1.3.3. Enter HepB Dose1 of 3 Mariella**
- 4. 1.4. Juana Maria Gonzales Morales Initial Data Load**
 - 1. 1.4.1. Enter Initial Demographic Data for Juana Maria Gonzales Morales**
 - 2. 1.4.2. Enter HepB Dose1 of 3 Juana Maria**

2. 2. Display Immunization History and Forecast

- 1. 2.1. Juana Mariana Gonzales Display Immunization History and Forecast**
 - 1. 2.1.1. Display the Evaluated Immunization History**
 - 2. 2.1.2. View the vaccination forecast for Juana Mariana Gonzales**
- 2. 2.2. Juan Marcel Gonzales Display Immunization History and Forecast**
 - 1. 2.2.1. Display the Evaluated Immunization History for Juan Marcel Gonzales**
 - 2. 2.2.2. View the vaccination forecast for Juan Marcel Gonzales**
- 3. 2.3. Mariela Gonzales Morales Display Immunization History and Forecast**
 - 1. 2.3.1. Display the Evaluated Immunization History for Mariela Gonzales Morales**
 - 2. 2.3.2. View the vaccination forecast for Mariela Gonzales Morales**
- 4. 2.4. Juana Maria Gonzales Morales Display Immunization History and Forecast**
 - 1. 2.4.1. Display the Evaluated Immunization History for Juana Maria Gonzales Morales**
 - 2. 2.4.2. View the vaccination forecast for Juana Maria Gonzales Morales**

3. 3. Order and Immunize patient

- 1. 3.1. Juana Mariana Gonzales, Enter Orders and Immunizations**
 - 1. 3.1.1. Order IPV and view prior reaction**
 - 2. 3.1.2. IPV Parental Refusal**
 - 3. 3.1.3. Order Influenza vaccine and view allergy alert**
 - 4. 3.1.4. Order MMRV Vaccine**
 - 5. 3.1.5. Records Influenza Vaccine administration route with data validation checking**
 - 6. 3.1.6. Record Influenza Vaccine administration**

7. [**3.1.7. Records MMRV Vaccine administration route with data validation checking**](#)
8. [**3.1.8. Record MMRV Vaccine administration**](#)
2. [**3.2. Juan Marcel Gonzales, Enter Orders and Immunizations**](#)
 1. [**3.2.1. Order intranasal, live virus influenza vaccine and view asthma contraindication**](#)
 2. [**3.2.2. Orders administration of Hepatitis B vaccine**](#)
 3. [**3.2.3. Orders administration of DTaP vaccine and alerted that the dose is too early**](#)
 4. [**3.2.4. Records Hepatitis B Vaccine lot number with expired lot alert**](#)
 5. [**3.2.5. Record Hepatitis B Vaccine administration**](#)
 6. [**3.2.6. Records Influenza Vaccine administration with VFC eligibility checking**](#)
 7. [**3.2.7. Record Influenza Vaccine administration for Juan Marcel Gonzales**](#)
3. [**3.3. Mariela Morales, Enter Orders and Immunizations**](#)
 1. [**3.3.1. Enters a deferral for the vaccines due**](#)
4. [**4. Transmit Immunization Report**](#)
 1. [**4.1. Juana Mariana Gonzales Transmit Immunization Report**](#)
 1. [**4.1.1. Transmit the immunization report to the Immunization Registry**](#)
 2. [**4.1.2. Record an adverse reaction**](#)
 3. [**4.1.3. Transmit the updated vaccination report with adverse reaction to the registry**](#)
 2. [**4.2. Juan Marcel Gonzales Transmit Immunization Report**](#)
 1. [**4.2.1. Transmit the Immunization Report for Juan Marcel Gonzales**](#)
 3. [**4.3. Mariela Morales Transmit Immunization Report**](#)
 1. [**4.3.1. Transmit the Immunization Report for Mariela Morales**](#)
5. [**5. Display Immunization Report**](#)
 1. [**5.1. Juana Mariana Gonzales Display Immunization Report**](#)
 1. [**5.1.1. Produce an immunization report for Juana Mariana Gonzales including all history**](#)
 2. [**5.2. Juan Marcel Gonzales Display Immunization Report**](#)
 1. [**5.2.1. Produce an immunization report for Juan Marcel Gonzales including all history**](#)
 3. [**5.3. Mariela Morales Display Immunization Report**](#)
 1. [**5.3.1. Produce an immunization report for Juan Marcel Gonzales including all history**](#)
6. [**6. Cohort Report**](#)
 1. [**6.1. Overdue Immunizations**](#)
 1. [**6.1.1. Produce Overdue Immunizations Cohort Report**](#)

1. Initial Data Load

The initial Data load will consist of the vendor entering data during live interactive testing for 4 patients with various scenarios. The data entry will include demographic data, Immunization histories and specific conditions for each patient.

1.1. Juana Mariana Gonzales Initial Data Load

Demonstrates the ability to record pediatric demographic data, historical vaccinations, and clinical conditions for 6-year old Juana Mariana Gonzales. There are no transactions associated with this test case.

Test Story

Description

The practice site for the scenario is Shoreline Pediatrics. The EHR vendor loads demographic data and clinical history for Juana Mariana Gonzales. The data includes immunizations provided by the practice.

The vendor also enters:

??? Two vaccines administered at other sites

?? ??o an influenza vaccine given at a local pharmacy

?? ??o an inactivated polio vaccine given elsewhere and not reported to the registry ??? the history includes an adverse reaction (febrile seizure) 8 hours after the vaccine was administered

??? Adverse reaction to inactivated polio vaccine (febrile seizure) and the date and source of information

??? Allergy to egg albumin administered at this site (the registry has different CVX date and lot number information for this vaccine)

NOTE: the historical vaccines will be imported during the Registry query ??(e.g. from another practice)

Comments

Set-up step evaluating EMR functions for capturing and storing patient pediatric demographic data, historical immunizations, and clinical conditions. There is no transaction associated with this test step.

Pre Condition

No PreCondition

Post Condition

The EMR has recorded all of the pediatric demographic data, historical immunizations, and clinical conditions ??in the record created for Juana Mariana Gonzales??using the test data provided

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

1.1.1. Enter Initial Demographic Data for New Patient Juana Mariana Gonzales, 6-year old

Test Step Type: SUT_MANUAL

Juana Mariana Gonzales is entered as a patient in the EMR, including all pediatric demographic information.

Test Story

Description

The EHR vendor loads demographic data for Juana Mariana Gonzales.

Comments

Set-up step evaluating EMR functions for capturing and storing patient pediatric demographic data. There is no transaction associated with this test step.

Pre Condition

No PreCondition

Post Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Test Objectives

Register New Patients: The system must allow a user to enter distinguishing information about patients so that providers can uniquely identify patients who have similar sounding names or other similar identifying information. For example, twins living in the same household will have similar dates of birth, addresses, and may have similar names. EHRs or other clinical software must be able to store information to successfully match with patients in immunization registries, if the information is available. The information includes the mother's maiden name, whether the patient was part of a multiple birth, and the order of the multiple birth. This information allows the provider to correctly identify the patient and also helps assure a match when the EHR sends the patient's information to external systems such as an immunization registry.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all demographic data provided, and in particular (Mother's maiden name, multiple birth, birth order), with all required attributes indicated by [Y]:

| | | |
|--|----------------------|---|
| Patient ID (previously listed as "Medicaid Number") | Vendor supplied | Y |
| Patient ID: Assigning Authority ID (i.e., owning source)/Facility Name | Shoreline Pediatrics | Y |
| Patient ID: Type (e.g., medical record number, IIS ID) | Vendor supplied | Y |
| Patient Name: First | Juana | Y |
| Patient Name: Middle | Mariana | Y |
| Patient Name: Last | Gonzales | Y |
| Patient Date of Birth | 12/23/2009 | Y |
| Birth Time | 11:05 | N |
| Patient Gender (Administrative Sex) | F | Y |
| Patient Multiple Birth Indicator | No | Y |
| Patient Birth Order | NA | C |
| Responsible Person Name: First | Joanna | Y |
| Responsible Person Name: Middle | Merida | Y |
| Responsible Person Name: Last | Gonzales | Y |
| Responsible Person Name: Relationship to Patient | Grandmother | Y |
| Mother's Name: First | Maria | Y |
| Mother's Name: Middle | Merida | Y |
| Mother's Name: Last | Gonzales | Y |
| Mother's Name: Maiden Last | Acosta | Y |
| Patient Address: Street | 4345 Standish Way | Y |
| Patient Address: City | Stamford | Y |
| Patient Address: State | CT | Y |
| Patient Address: Country | USA | Y |
| Patient Address: Zipcode | 06903 | Y |

| | | |
|--|---|---|
| Patient Address: County of Residence | Fairfield | N |
| Race | Other | Y |
| Ethnicity | Hispanic or Latino | Y |
| Birthing Facility Name (Birth Delivery Location Address BDL) | Shoreline Hospital 325 Shoreline Drive, Stamford Connecticut 06901 | [Y - birthing facility name, not address] |
| Patient Birth State | CT | Y |
| Patient Primary Language | English | Y |
| Patient Telephone Number | (203) 555-1212 | Y |
| Patient Telephone Number Type (e.g., home, cell) | home | Y |
| Patient E-mail Address | jmg@gmail.com | N |
| Publicity Code | | N |
| Protection Indicator | | N |
| Protection Indicator Effective Date | | N |
| Immunization Registry Status | | N |
| Preferred Contact Method | Phone | Y |

Notes for Testers

No Note

1.1.2. Enter Initial Immunization Data for Juana Mariana Gonzales: Immunizations from practice

Test Step Type: SUT_MANUAL

Patient History from the local practice is entered into the EMR.

Test Story

Description

The EHR vendor loads immunization history data from the local practice for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history the known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria:&nbs;p;Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|---|---------|
| Vaccine from Practice HepB | &nbs;p; | &nbs;p; |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Frank Smith | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | New immunization record (NIP001 00) | Y |
| Date/Time of Start of Administration | 1/15/2010 | Y |
| Vaccine Administered | hepatitis B vaccine, pediatric or pediatric/adolescent dosage&nbs;p; (CVX 08) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Sandra Molina | Y |
| Administered-at Location | 400 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | 6352FK1 | Y |
| Substance Expiration Date | 10/1/2010 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | CP | Y |
| Route of Administration | IM | Y |
| Administration Site | Right Thigh | Y |
| &nbs;p; | &nbs;p; | &nbs;p; |
| Vaccine from Practice MMRV | &nbs;p; | &nbs;p; |
| a. Entered BY | J. Martinez | Y |
| b. Ordering Provider | Frank Smith | Y |
| c. Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | New immunization record (NIP001 00) | Y |
| Value/Text for Vaccine Type&nbs;p; | MMRV | Y |
| Date/Time of Start of Administration | 10/23/2010 | Y |
| Vaccine Administered | measles, mumps, rubella, and varicella virus vaccine | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Sandra Molina | Y |
| Administered-at Location | 400 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | 7W27V7491 | Y |

| | | |
|-----------------------------|------------------------------------|--------|
| Substance Expiration Date | 12/15/2010 | Y |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT IM) | Y |
| Administration Site | Right Thigh (HL70163 RT) | |

Notes for Testers

No Note

1.1.3. Enter Initial Immunization Data for Juana Mariana Gonzales from Another Practice

Test Step Type: SUT_MANUAL

Patient History from another practice is entered into the EMR.

Test Story

Description

The EHR vendor loads immunization history data from another practice into the record for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history from another practice is loaded into the&nbs;record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria:&nbs;Vendor successfully records all immunization history data from another practice as provided, with all required attributes indicated by [Y]:

| | | |
|--|---|-------|
| Historical Vaccine from Another Practice - Dtap Entered BY | &nbs; | &nbs; |
| Ordering Provider | Sandra Molina | Y |
| Entering Organization | J. Rodriguez | Y |
| Vaccine Event information source (Administration Notes) | Shoreline Pediatrics | Y |
| Value/Text for Vaccine Type&nbs; | Historical information - from parent’s written record (NIP001 03) | Y |
| Date/Time of Start of Administration | DTaP | Y |
| Vaccine Administered | 8/31/2014 | Y |
| Administered Amount (of Vaccine) | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) | Y |
| Administered Units (of Measure) | 0.5 | Y |
| Administering Provider | mL | Y |
| Administered-at Location | Linda Casera | Y |
| Lot Number | 4253 Standish Way, Stamford Connecticut 06903 | Y |
| Substance Expiration Date | D643QS8243 | Y |
| Substance Manufacturer Name | 9/1/2014 | Y |
| Completion Status | Sanofi Pasteur Inc (MVX PMC) | Y |
| Route of Administration | CP | Y |
| Administration Site | Intramuscular (NCIT IM) | Y |
| &nbs; | Left Deltoid (HL70163 LD) | Y |
| Historical Vaccine from Another Practice - Polio Entered BY | &nbs; | &nbs; |
| Ordering Provider | Sandra Molina | Y |
| Entering Organization | J. Rodriguez | Y |
| Vaccine Event information source | Shoreline Pediatrics | Y |
| Value/Text for Vaccine Type&nbs; | Historical information - from parent’s written record (NIP001 03) | Y |
| Date/Time of Start of Administration | poliovirus vaccine, inactivated (CVX 10) | Y |
| Vaccine Administered | 2/21/2011 | Y |
| Administered Amount (of Vaccine) | poliovirus vaccine, inactivated (CVX 10) | Y |
| Administered Units (of Measure) | 0.5 | Y |
| Administering Provider | mL | Y |
| Administered-at Location | Linda Casera | Y |
| Lot Number | 4253 Standish Way, Stamford Connecticut 06903 | Y |
| Substance Expiration Date | D335PV9644 | Y |
| | 2/22/2011 | Y |

| | | |
|-----------------------------|--|---|
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT IM) | Y |
| Administration Site | Left Deltoid (HL70163 LD) | Y |
| Reaction | VXC12^fever of >40.5C (105F) within 48 hours of dose^CDCPHINVS | Y |

Notes for Testers

No Note

1.1.4. Enter Initial Immunization Data for Juana Mariana Gonzales Reported by Parent

Test Step Type: SUT_MANUAL

Patient History from a pharmacy as reported by the parent is entered into the EMR.

Test Story

Description

The provider enters immunization data from a pharmacy as reported by the parent for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic data in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history from the pharmacy as reported by the parent is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization history data from the pharmacy as provided by the parent with all required attributes indicated by [Y]:

| | | |
|---|--|-------------|
| Historical Vaccine from Pharmacy Reported by Parent Entered BY | Sandra Molina | Y |
| Ordering Provider | Gina Ricci | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source (Administration Notes) | Historical information - from other provider (NIP001 02) | Y |
| Value/Text for Vaccine Type | Influenza vaccine | Y |
| Date/Time of Start of Administration | 10/15/2013 | Y |
| Vaccine Administered | influenza, live, intranasal, quadrivalent (CVX 149) FluMist Quadrivalent (NDC 66019-0301-10)) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Gina Ricci | Y |
| Administered-at Location | Oceanview Pharmacy, 15 Post Road, Stamford Connecticut 06901 | Y |
| Lot Number | 8L4B3423 | Y |
| Substance Expiration Date | 7/1/2014 | Y |
| Substance Manufacturer Name | MedImmune, LLC (MVX MED) | Y |
| Completion Status | CP | Y |
| Route of Administration | Nasal (NCIT NS) | Y |
| Administration Site | | Y |

Notes for Testers

No Note

1.1.5. Enter Adverse Reaction to the Polio Vaccine

Test Step Type: SUT_MANUAL

The EHR captures structured data regarding adverse events as part of the clinical history.

Test Story

Description

The provider documents in the EMR the clinical history of an adverse reaction to the polio vaccine.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The clinical history of the adverse reaction to the Polio vaccine is documented in the the record created for Juana Mariana Gonzales.

Test Objectives

Identify Adverse Event: The EHR or other clinical software system enables capture of structured data regarding adverse events.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all demographic data provided with all required attributes indicated by [Y]:

| | | |
|----------------------------------|--|---|
| Adverse Reaction Substance/Agent | inactivated polio vaccine (e.g. Poliomyelitis vaccine adverse reaction (disorder) 293117006) | Y |
| Reaction | febrile seizure (e.g. Simple febrile seizure (finding) 432354000) VXC11^convulsions (fits, seizures) within 72 hours of dose^ | Y |
| Date (of the reaction) | 8/31/2014 | Y |

Notes for Testers

No Note

1.1.6. Enter allergy to egg albumin

Test Step Type: SUT MANUAL

The EHR captures structured data regarding allergies as part of the clinical history.

Test Story

Description

The provider documents in the EMR the clinical history of an allergy to egg albumin.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The clinical history of the allergy to egg albumin is documented in the record created for Juana Mariana Gonzales

Test Objectives

Supporting data for: *Modify Antigen Recommendations Based on Allergy History*: The system notifies the provider of any conflicts between recommended vaccines in the updated forecast and the patient's active allergies.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all clinical allergy data provided with all required attributes indicated by [Y]:

| | | |
|--|--|---|
| Allergy Substance/Agent | Egg Albumin Allergy (e.g. 213020009 Egg protein allergy (disorder), Allergy to eggs (disorder) 91930004) | Y |
| Date (allergy status known - e.g. thru testing or date of the allergy) | 8/31/2014 | Y |

Notes for Testers

No Note

1.1.7. Enter HepB Dose1 and 3 of 3

Test Step Type: SUT_MANUAL

Patient History for HepB is entered into the EMR.

Test Story

Description

The EHR vendor loads HepB immunization history data for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history for HepB known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|---|--------|
| HepB Dose 1 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Jane Carter | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 12/23/2009 | Y |
| Vaccine Administered | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 325 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | 6332FK33 | Y |
| Substance Expiration Date | 12/14/2010 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| HepB Dose 3 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) | Y |
| Date/Time of Start of Administration | 10/30/2010 | Y |
| Vaccine Administered | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGERIX-B (NDC 58160-0820-11) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 6352FK24 | Y |
| Substance Expiration Date | 8/31/2012 | Y |

| | | |
|-----------------------------|--|--------|
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | Left Thigh (HL7 LT) | |

Notes for Testers

No Note

1.1.8. Enter DTaP Doses 1, 2, 3 and 4 of 5

Test Step Type: SUT_MANUAL

Patient History for DTaP is entered into the EMR.

Test Story

Description

The EHR vendor loads DTaP immunization history data for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history for DTaP known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| DTaP Dose 1 of 5 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 1/22/2010 | Y |
| Vaccine Administered | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Y | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | D409QS2341 | Y |
| Substance Expiration Date | 11/30/2011 | Y |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| DTaP Dose 2 of 5 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) | Y |
| Date/Time of Start of Administration | 3/23/2010 | Y |
| Vaccine Administered | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) ENGERIX-B (NDC 58160-0820-11) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | D409QS2433 | Y |
| Substance Expiration Date | 9/4/2011 | Y |

| | | |
|--------------------------------------|---|--------|
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT IM) | Y |
| Administration Site | Right Thigh (HL7 RT) | |
| Adverse Reaction | 31044-1 Reaction, VXC12^fever of >40.5C (105F) within 48 hours of dose | |
| | | |
| DTaP Dose 3 of 5 | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) | |
| Date/Time of Start of Administration | DAPTACEL (NDC 49281-0286-01) | |
| Vaccine Administered | 5/22/2010 | |
| Administered Amount (of Vaccine) | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) | |
| Administered Units (of Measure) | DAPTACEL (NDC 49281-0286-01) | |
| Administering Provider | ENGERIX-B (NDC 58160-0820-11) | |
| Administered-at Location | 0.5 | |
| Lot Number | mL | |
| Substance Expiration Date | J. Martinez | |
| Substance Manufacturer Name | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Completion Status | D409QS3255 | |
| Route of Administration | 12/1/2010 | |
| Administration Site | Sanofi Pasteur Inc (MVX PMC) | |
| DTaP Dose 4 of 5 | CP | |
| Entered BY | Intramuscular (NCIT IM) | |
| Ordering Provider | Left Thigh (HL7 LT) | |
| Entering Organization | | |
| Vaccine Event information source | Sandra Molina | |
| Value/Text for Vaccine Type | Carlos Herrera | |
| Date/Time of Start of Administration | Shoreline Pediatrics | |
| Vaccine Administered | Historical Immunization (NIP001 01) | |
| Administered Amount (of Vaccine) | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) | |
| Administered Units (of Measure) | DAPTACEL (NDC 49281-0286-01) | |
| Administering Provider | 2/21/2011 | |
| Administered-at Location | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) | |
| Lot Number | DAPTACEL (NDC 49281-0286-01) | |
| Substance Expiration Date | ENGERIX-B (NDC 58160-0820-11) | |
| Substance Manufacturer Name | 0.5 | |
| Completion Status | mL | |
| Route of Administration | J. Martinez | |
| Administration Site | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| | D409QS249 | |
| | 3/1/2011 | |
| | Sanofi Pasteur Inc (MVX PMC) | |
| | CP | |
| | Intramuscular (NCIT IM) | |
| | Left Deltoid (HL7 LD) | |

Notes for Testers

No Note

1.1.9. Enter Hib Doses 1-4 of 4

Test Step Type: SUT_MANUAL

Patient History for Hib is entered into the EMR.

Test Story

Description

The EHR vendor loads Hib immunization history data; for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history for Hib known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|---|--------|
| Hib Dose 1 of 4 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 1/22/2010 | Y |
| Vaccine Administered | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Y | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 7M54K9245 | Y |
| Substance Expiration Date | 3/24/2010 | Y |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Right Thigh (HL7 RT) | Y |
| | | |
| Hib Dose 2 of 4 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) | Y |
| Date/Time of Start of Administration | 3/23/2010 | Y |
| Vaccine Administered | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) ENGERIX-B (NDC 58160-0820-11) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 7M55K3342 | Y |
| Substance Expiration Date | 10/30/2010 | Y |

| | | |
|--------------------------------------|---|--------|
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | |
| | | |
| Hib Dose 3 of 4 | Sandra Molina | |
| Entered BY | Carlos Herrera | |
| Ordering Provider | Shoreline Pediatrics | |
| Entering Organization | Historical Immunization (NIP001 01) | |
| Vaccine Event information source | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) | |
| Value/Text for Vaccine Type | PedvaxHIB (NDC 00006-4897-00) | |
| Date/Time of Start of Administration | 5/22/2010 | |
| Vaccine Administered | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) | |
| Administered Amount (of Vaccine) | PedvaxHIB (NDC 00006-4897-00) | |
| Administered Units (of Measure) | ENGERIX-B (NDC 58160-0820-11) | |
| Administering Provider | J. Martinez | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Lot Number | 7M75K4566 | |
| Substance Expiration Date | 5/23/2010 | |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | RightThigh (HL7 RT) | |
| Hib Dose 4 of 4 | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) | |
| Date/Time of Start of Administration | PedvaxHIB (NDC 00006-4897-00) | |
| Vaccine Administered | 2/21/2011 | |
| Administered Amount (of Vaccine) | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) | |
| Administered Units (of Measure) | PedvaxHIB (NDC 00006-4897-00) | |
| Administering Provider | 0.5 | |
| Administered-at Location | mL | |
| Lot Number | J. Martinez | |
| Substance Expiration Date | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Substance Manufacturer Name | 7M53K5534 | |
| Completion Status | 2/22/2011 | |
| Route of Administration | Merck Sharp & Dohme Corp (MVX MSD) | |
| Administration Site | CP | |
| | Intramuscular (NCIT IM) | |
| | Left Deltoid (HL7 LD) | |

Notes for Testers

No Note

1.1.10. Enter Polio Dose1 and 2 of 4

Test Step Type: SUT_MANUAL

Patient History for Polio is entered into the EMR.

Test Story

Description

The EHR vendor loads Polio immunization history data for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history for Polio known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| Polio Dose 1 of 2 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Jane Carter | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 1/22/2010 | Y |
| Vaccine Administered | poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 325 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | D333PV2431 | Y |
| Substance Expiration Date | 10/4/2010 | Y |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | Y |
| Route of Administration | Subcutaneous (NCIT C38299, HL70162: SC) | Y |
| Administration Site | Left Deltoid (HL7 LD) | Y |
| | | |
| Polio Dose 2 of 2 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | poliovirus vaccine, inactivated (CVX 10) | Y |
| Date/Time of Start of Administration | 3/23/2010 | Y |
| Vaccine Administered | poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | D333PV4344 | Y |
| Substance Expiration Date | 3/23/2010 | Y |

| | | |
|-----------------------------|---|--------|
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | |
| Route of Administration | Subcutaneous (NCIT C38299, HL70162: SC) | Y |
| Administration Site | Left Deltoid (HL7 LD) | |

Notes for Testers

No Note

1.1.11. Enter Pneumococcal,Doses 1-4 of 4

Test Step Type: SUT_MANUAL

Patient History for Pneumococcal is entered into the EMR.

Test Story

Description

The EHR vendor loads Pneumococcal immunization history data; for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history for Pneumococcal known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|---|--------|
| Pneumococcal Dose 1 of 4 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 1/22/2010 | Y |
| Vaccine Administered | pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-05) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Y | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | P243V3281 | Y |
| Substance Expiration Date | 1/30/2010 | Y |
| Substance Manufacturer Name | Pfizer, Inc (MVX PFR) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| Pneumococcal Dose 2 of 4 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | pneumococcal conjugate vaccine, 13 valent (CVX 133) | Y |
| Date/Time of Start of Administration | 3/23/2010 | Y |
| Vaccine Administered | pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-05) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | P343V8321 | Y |
| Substance Expiration Date | 3/30/2010 | Y |
| Substance Manufacturer Name | Pfizer, Inc (MVX PFR) | Y |
| Completion Status | CP | Y |

| | | |
|--------------------------------------|---|--------|
| Route of Administration | Intramuscular (NCIT IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | |
| | | |
| Pneumococcal Dose 3 of 4 | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | pneumococcal conjugate vaccine, 13 valent (CVX 133) | |
| Date/Time of Start of Administration | 5/22/2010 | |
| Vaccine Administered | pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-05) | |
| Administered Amount (of Vaccine) | 0.5 | |
| Administered Units (of Measure) | mL | |
| Administering Provider | J. Martinez | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Lot Number | P853V2164 | |
| Substance Expiration Date | 8/30/2010 | |
| Substance Manufacturer Name | Pfizer, Inc (MVX PFR) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | RightThigh (HL7 RT) | |
| Pneumococcal Dose 4 of 4 | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | pneumococcal conjugate vaccine, 13 valent (CVX 133) | |
| Date/Time of Start of Administration | 2/21/2011 | |
| Vaccine Administered | pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-05) | |
| Administered Amount (of Vaccine) | 0.5 | |
| Administered Units (of Measure) | mL | |
| Administering Provider | J. Martinez | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Lot Number | P853V58532 | |
| Substance Expiration Date | 4/18/2011 | |
| Substance Manufacturer Name | Pfizer, Inc (MVX PFR) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | Left Deltoid (HL7 LD) | |

Notes for Testers

No Note

1.1.12. Enter Rotavirus Dose1 and 2 of 3

Test Step Type: SUT_MANUAL

Patient History for Rotavirus is entered into the EMR.

Test Story

Description

The EHR vendor loads Rotavirus immunization history data for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history for Rotavirus known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| Rotavirus Dose 1 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Jane Carter | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 1/22/2010 | Y |
| Vaccine Administered | rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0854-52) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 325 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | 6359RV533 | Y |
| Substance Expiration Date | 2/15/2010 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| Rotavirus Dose 2 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | rotavirus, live, monovalent vaccine (CVX 119) | Y |
| Date/Time of Start of Administration | 3/23/2010 | Y |
| Vaccine Administered | rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0854-52) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 6359RV932 | Y |
| Substance Expiration Date | 5/10/2011 | Y |

| | | | |
|-----------------------------|---|---|--------|
| Substance Manufacturer Name | G | laxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | | | |
| Route of Administration | | Intramuscular (NCIT IM) | Y |
| Administration Site | | Right Thigh (HL7 RT) | |

Notes for Testers

No Note

1.1.13. Enter Influenza History Doses

Test Step Type: SUT_MANUAL

Patient History for Influenza is entered into the EMR.

Test Story

Description

The EHR vendor loads Influenza immunization history data for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history for Influenza known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|---|--------|
| Influenza Dose 1 of 2 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 9/25/2010 | Y |
| Vaccine Administered | Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0514-25) | Y |
| Administered Amount (of Vaccine) | 0.25 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Y | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | D8043IN8734 | Y |
| Substance Expiration Date | 3/12/2011 | Y |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| Influenza Dose 2 of 2 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) | Y |
| Date/Time of Start of Administration | 10/27/2010 | Y |
| Vaccine Administered | Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0514-25) | Y |
| Administered Amount (of Vaccine) | 0.25 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | D8043IN8734 | Y |
| Substance Expiration Date | 3/12/2011 | Y |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |

| | | |
|--------------------------------------|--|--------|
| Completion Status | CP | ¥ |
| Administration Site | Intramuscular (NCIT IM) | |
| | Right Thigh (HL7 RT) | |
| Influenza Annual Dose | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) | |
| Date/Time of Start of Administration | 10/2/2011 | |
| Vaccine Administered | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0514-25) | |
| Administered Amount (of Vaccine) | 0.25 | |
| Administered Units (of Measure) | mL | |
| Administering Provider | J. Martinez | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Lot Number | D9334IN9333 | |
| Substance Expiration Date | 5/22/2012 | |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | Left Deltoid (HL7 LD) | |
| Influenza Annual Dose | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) | |
| Date/Time of Start of Administration | 2/21/2011 | |
| Vaccine Administered | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0514-25) | |
| Administered Amount (of Vaccine) | 0.25 | |
| Administered Units (of Measure) | mL | |
| Administering Provider | J. Martinez | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Lot Number | D9553IN2243 | |
| Substance Expiration Date | 4/30/2012 | |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | Left Deltoid (HL7 LD) | |

Notes for Testers

No Note

1.1.14. Enter HepA Dose1 and 2 of 2

Test Step Type: SUT_MANUAL

Patient History for HepA is entered into the EMR.

Test Story

Description

The EHR vendor loads HepA immunization history data for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history for HepA known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| HepA Dose 1 of 2 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Jane Carter | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 11/23/2011 | Y |
| Vaccine Administered | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-52) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 325 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | 6359RT33 | Y |
| Substance Expiration Date | 1/4/2012 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Right Deltoid (HL7 RD) | Y |
| | | |
| HepA Dose 2 of 2 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) | Y |
| Date/Time of Start of Administration | 5/23/2012 | Y |
| Vaccine Administered | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-52) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 6359RT48 | Y |
| Substance Expiration Date | 9/11/2012 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |

Completion Status
Route of Administration
Administration Site

CP
Intramuscular (NCIT C28161, HL70162: IM)
Left Deltoid (HL7 LD)

Y

Notes for Testers

No Note

1.1.15. Enter MMRV Dose1 and 2 of 3

Test Step Type: SUT_MANUAL

Patient History for MMRV is entered into the EMR.

Test Story

Description

The EHR vendor loads MMRV immunization history data for Juana Mariana Gonzales.

Comments

The first dose is administered too early and will be invalid for the dose series

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history for MMRV known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| MMRV Dose 1 of 3 [dose is invalid] | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Jane Carter | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 10/23/2010 | Y |
| Vaccine Administered | measles, mumps, rubella, and varicella virus vaccine (CVX 94) ProQuad (NDC 00006-4999-00) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 325 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | 7W27V7491 | Y |
| Substance Expiration Date | 12/15/2010 | Y |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | Y |
| Completion Status | CP | Y |
| Route of Administration | Subcutaneous (NCIT C38299, HL70162: SC) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| MMRV Dose 2 of 3 [first dose is invalid] | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | measles, mumps, rubella, and varicella virus vaccine (CVX 94) | Y |
| Date/Time of Start of Administration | 11/22/2012 | Y |
| Vaccine Administered | measles, mumps, rubella, and varicella virus vaccine (CVX 94) ProQuad (NDC 00006-4999-00) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 7W87V3452 | Y |
| Substance Expiration Date | 4/13/2013 | Y |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | Y |

Completion Status
Route of Administration
Administration Site

CP
Subcutaneous (NCIT C38299, HL70162: SC)
Left Deltoid (HL7 LD)

Y

Notes for Testers

No Note

1.2. Juan Marcel Gonzales Initial Data Load

Demonstrates the ability to record pediatric demographic data, historical vaccinations, and clinical conditions for 3 1/2-year old Juan Marcel Gonzales. There are no transactions associated with this test case.

Test Story

Description

No Description

Comments

No Comments

Pre Condition

No PreCondition

Post Condition

No PostCondition

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

1.2.1. Enter Initial Demographic Data for New Patient Juan Marcel Gonzales

Test Step Type: SUT_MANUAL

Juan Marcel Gonzales is entered as a patient in the EMR, including all pediatric demographic information.

Test Story

Description

The EHR vendor loads demographic data for Juan Marcel Gonzales.

Comments

Set-up step evaluating EMR functions for capturing and storing patient pediatric demographic data. There is no transaction associated with this test step.

Pre Condition

No PreCondition

Post Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Test Objectives

Register New Patients: The system must allow a user to enter distinguishing information about patients so that providers can uniquely identify patients who have similar sounding names or other similar identifying information. For example, twins living in the same household will have similar dates of birth, addresses, and may have similar names. EHRs or other clinical software must be able to store information to successfully match with patients in immunization registries, if the information is available. The information includes the mother's maiden name, whether the patient was part of a multiple birth, and the order of the multiple birth. This information allows the provider to correctly identify the patient and also helps assure a match when the EHR sends the patient's information to external systems such as an immunization registry.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all demographic data provided, and in particular (Mother's maiden name, multiple birth, birth order), with all required attributes indicated by [Y]:

| | | |
|--|----------------------|---|
| Patient ID (previously listed as "Medicaid Number") | Vendor supplied | Y |
| Patient ID: Assigning Authority ID (i.e., owning source)/Facility Name | Shoreline Pediatrics | Y |
| Patient ID: Type (e.g., medical record number, IIS ID) | Vendor supplied | Y |
| Patient Name: First | Juan | Y |
| Patient Name: Middle | Marcel | Y |
| Patient Name: Last | Gonzales | Y |
| Patient Date of Birth | 11/23/2011 | Y |
| Birth Time | 11 am | N |
| Patient Gender (Administrative Sex) | M | Y |
| Patient Multiple Birth Indicator | N | Y |
| Patient Birth Order | NA | C |
| Responsible Person Name: First | Manuel | Y |
| Responsible Person Name: Middle | Marcel | Y |
| Responsible Person Name: Last | Gonzales | Y |
| Responsible Person Name: Relationship to Patient | Father | Y |
| Mother's Name: First | Anita | Y |
| Mother's Name: Middle | Francesca | Y |
| Mother's Name: Last | Gonzales | Y |
| Mother's Name: Maiden Last | Morales | Y |
| Patient Address: Street | 4623 Standish Way | Y |
| Patient Address: City | Stamford | Y |
| Patient Address: State | CT | Y |
| Patient Address: Country | USA | Y |
| Patient Address: Zipcode | 06903 | Y |
| Patient Address: County of Residence | Fairfield | N |

| | | |
|--|---|---|
| Race | Other | Y |
| Ethnicity | Hispanic or Latino | Y |
| Birthing Facility Name (Birth Delivery Location Address BDL) | Shoreline Hospital 325 Shoreline Drive, Stamford Connecticut 06901 | [Y – birthing facility name, not address] |
| Patient Birth State | CT | Y |
| Patient Primary Language | English | Y |
| Patient Telephone Number | (203) 555-1213 | Y |
| Patient Telephone Number Type (e.g., home, cell) | Home | Y |
| Patient E-mail Address | None | N |
| Publicity Code | | N |
| Protection Indicator | | N |
| Protection Indicator Effective Date | | N |
| Immunization Registry Status | | N |
| Preferred Contact Method | Phone | |

Notes for Testers

No Note

1.2.2. Enter Clinical History for Juan Marcel Gonzales

Test Step Type: SUT_MANUAL

The EHR captures structured data regarding a problem of Asthma as part of the clinical history.

Test Story

Description

The clinical history of Moderate Persistent Asthma is documented in the record created for Juan Marcel Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Post Condition

The clinical history of the Moderate Persistent Asthma is documented in the record created for Juan Marcel Gonzales.

Test Objectives

Supporting data for testing contraindications.

Evaluation Criteria

Evaluation Criteria:&nbs;Vendor successfully records all clinical history data provided with all required attributes indicated by [Y]:

| | | | |
|---------------------------|--|-------|---|
| Adverse History of Asthma | &nbs; | &nbs; | &nbs; |
| Problems | Moderate Persistent Asthma (e.g. Moderate persistent asthma – SNOMED-CT 427295004) | Y | Coded value expected using SNOMED-CT or ICD |

Notes for Testers

No Note

1.2.3. Enter HepB Dose1 and 2 of 3

Test Step Type: SUT_MANUAL

Patient History for HepB is entered into the EMR for Juan Marcel.

Test Story

Description

The EHR vendor loads HepB immunization history data for Juan Marcel Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Post Condition

The immunization history for HepB known to the local practice is loaded into the record created for Juan Marcel Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|---|--------|
| HepB Dose 1 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Jane Carter | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 11/23/2011 | Y |
| Vaccine Administered | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 325 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | 6332FK34 | Y |
| Substance Expiration Date | 12/14/2011 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| HepB Dose 3 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) | Y |
| Date/Time of Start of Administration | 12/23/2013 | Y |
| Vaccine Administered | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGERIX-B (NDC 58160-0820-11) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 6352FK2 | Y |
| Substance Expiration Date | 1/1/2014 | Y |

| | | |
|-----------------------------|--|--------|
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | | |
| Route of Administration | Intramuscular (NCIT IM) | Y |
| Administration Site | Right Thigh (HL7 RT) | |

Notes for Testers

No Note

1.2.4. Enter DTaP Doses 1-4 of 5 Juan Marcel

Test Step Type: SUT_MANUAL

Patient History for DTaP is entered into the EMR for Juan Marcel Gonzales.

Test Story

Description

The EHR vendor loads DTaP immunization history data for Juan Marcel Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Post Condition

The immunization history for DTaP known to the local practice is loaded into the record created for Juan Marcel Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| DTaP Dose 1 of 5 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 1/22/2012 | Y |
| Vaccine Administered | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Y | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | D409QS2342 | Y |
| Substance Expiration Date | 11/30/2012 | Y |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| DTaP Dose 2 of 5 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) | Y |
| Date/Time of Start of Administration | 3/22/2012 | Y |
| Vaccine Administered | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) ENGERIX-B (NDC 58160-0820-11) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | D409QS2434 | Y |
| Substance Expiration Date | 9/4/2012 | Y |

| | | |
|--------------------------------------|--|--------|
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT IM) | Y |
| Administration Site | Right Thigh (HL7 RT) | |
| | | |
| DTaP Dose 3 of 5 | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) | |
| Date/Time of Start of Administration | 5/21/2012 | |
| Vaccine Administered | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) | |
| Administered Amount (of Vaccine) | 0.5 | |
| Administered Units (of Measure) | mL | |
| Administering Provider | J. Martinez | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Lot Number | D409QS3256 | |
| Substance Expiration Date | 12/1/2012 | |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | Left Thigh (HL7 LT) | |
| DTaP Dose 4 of 5 | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) | |
| Date/Time of Start of Administration | 2/20/2013 | |
| Vaccine Administered | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) | |
| Administered Amount (of Vaccine) | 0.5 | |
| Administered Units (of Measure) | mL | |
| Administering Provider | J. Martinez | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Lot Number | D409QS250 | |
| Substance Expiration Date | 3/1/2014 | |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | Left Deltoid (HL7 LD) | |

Notes for Testers

No Note

1.2.5. Enter Hib Doses 1-4 of 4 Juan Marcel

Test Step Type: SUT_MANUAL

Patient History for Hib is entered into the EMR for Juan Marcel Gonzales.

Test Story

Description

The EHR vendor loads Hib immunization history data; for Juan Marcel Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Macel Gonzales.

Post Condition

The immunization history for Hib known to the local practice is loaded into the record created for Juan Marcel Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes:

| | | |
|---|---|--------|
| Hib Dose 1 of 4 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 1/22/2012 | Y |
| Vaccine Administered | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Y | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 7M54K9255 | Y |
| Substance Expiration Date | 3/24/2012 | Y |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Right Thigh (HL7 RT) | Y |
| | | |
| Hib Dose 2 of 4 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) | Y |
| Date/Time of Start of Administration | 3/22/2012 | Y |
| Vaccine Administered | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) ENGERIX-B (NDC 58160-0820-11) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 7M55K3343 | Y |
| Substance Expiration Date | 10/30/2012 | Y |

| | | |
|--------------------------------------|---|--------|
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | |
| | | |
| Hib Dose 3 of 4 | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) | |
| Date/Time of Start of Administration | PedvaxHIB (NDC 00006-4897-00) | |
| | 5/21/2012 | |
| Vaccine Administered | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) | |
| | PedvaxHIB (NDC 00006-4897-00) | |
| Administered Amount (of Vaccine) | ENGERIX-B (NDC 58160-0820-11) | |
| Administered Units (of Measure) | 0.5 | |
| Administering Provider | mL | |
| Administered-at Location | J. Martinez | |
| Lot Number | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Substance Expiration Date | 7M75K4577 | |
| Substance Manufacturer Name | 5/23/2012 | |
| Completion Status | Merck Sharp & Dohme Corp (MVX MSD) | |
| Route of Administration | CP | |
| Administration Site | Intramuscular (NCIT IM) | |
| Hib Dose 4 of 4 | RightThigh (HL7 RT) | |
| Entered BY | | |
| Ordering Provider | Sandra Molina | |
| Entering Organization | Carlos Herrera | |
| Vaccine Event information source | Shoreline Pediatrics | |
| Value/Text for Vaccine Type | Historical Immunization (NIP001 01) | |
| Date/Time of Start of Administration | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) | |
| Vaccine Administered | PedvaxHIB (NDC 00006-4897-00) | |
| Administered Amount (of Vaccine) | 11/22/2012 | |
| Administered Units (of Measure) | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) | |
| Administering Provider | PedvaxHIB (NDC 00006-4897-00) | |
| Administered-at Location | 0.5 | |
| Lot Number | mL | |
| Substance Expiration Date | J. Martinez | |
| Substance Manufacturer Name | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Completion Status | 7M53K5535 | |
| Route of Administration | 2/22/2012 | |
| Administration Site | Merck Sharp & Dohme Corp (MVX MSD) | |
| | CP | |
| | Intramuscular (NCIT IM) | |
| | Left Deltoid (HL7 LD) | |

Notes for Testers

No Note

1.2.6. Enter Polio Dose1-3 of 4 Juan Marcel

Test Step Type: SUT_MANUAL

Patient History for Polio is entered into the EMR for Juan Marcel Gonzales.

Test Story

Description

The EHR vendor loads Polio immunization history data for Juan Marcel Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Post Condition

The immunization history for Polio known to the local practice is loaded into the record created for Juan Marcel Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| Polio Dose 1 of 4 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Jane Carter | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 1/22/2012 | Y |
| Vaccine Administered | poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 325 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | D333PV2444 | Y |
| Substance Expiration Date | 10/4/2012 | Y |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | Y |
| Route of Administration | Subcutaneous (NCIT C38299, HL70162: SC) | Y |
| Administration Site | Left Deltoid (HL7 LD) | Y |
| | | |
| Polio Dose 2 of 4 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | poliovirus vaccine, inactivated (CVX 10) | Y |
| Date/Time of Start of Administration | 3/22/2012 | Y |
| Vaccine Administered | poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | D333PV4343 | Y |
| Substance Expiration Date | 3/23/2012 | Y |

| | | |
|--------------------------------------|--|--------|
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | Y |
| Route of Administration | Subcutaneous (NCIT C38299, HL70162: SC) | |
| Administration Site | Left Deltoid (HL7 LD) | |
| Polio Dose 3 of 4 | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | poliovirus vaccine, inactivated (CVX 10) | |
| Date/Time of Start of Administration | 5/21/2012 | |
| Vaccine Administered | poliovirus vaccine, inactivated (CVX 10) | |
| Administered Amount (of Vaccine) | IPOL (NDC 49281-0860-55) | |
| Administered Units (of Measure) | 0.5 | |
| Administering Provider | mL | |
| Administered-at Location | J. Martinez | |
| Lot Number | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Substance Expiration Date | D335PV9654 | |
| Substance Manufacturer Name | 2/22/2013 | |
| Completion Status | Sanofi Pasteur Inc (MVX PMC) | |
| Route of Administration | CP | |
| Administration Site | Subcutaneous (NCIT C38299, HL70162: SC) | |
| | Left Deltoid (HL7 LD) | |

Notes for Testers

No Note

1.2.7. Enter Pneumococcal,Doses 1-4 of 4 Juan Marcel

Test Step Type: SUT_MANUAL

Patient History for Pneumococcal is entered into the EMR for Juan Marcel Gonzales.

Test Story

Description

The EHR vendor loads Pneumococcal immunization history data for Juan Marcel Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Post Condition

The immunization history for Pneumococcal known to the local practice is loaded into the record created for Juan Marcel Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| Pneumococcal Dose 1 of 4 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 1/22/2012 | Y |
| Vaccine Administered | pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-05) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Y | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | P243V3321 | Y |
| Substance Expiration Date | 1/30/2012 | Y |
| Substance Manufacturer Name | Pfizer, Inc (MVX PFR) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| Pneumococcal Dose 2 of 4 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | pneumococcal conjugate vaccine, 13 valent (CVX 133) | Y |
| Date/Time of Start of Administration | 3/22/2012 | Y |
| Vaccine Administered | pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-05) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | P343V8445 | Y |
| Substance Expiration Date | 3/30/2012 | Y |
| Substance Manufacturer Name | Pfizer, Inc (MVX PFR) | Y |
| Completion Status | CP | Y |

| | | |
|--------------------------------------|---|--------|
| Route of Administration | Intramuscular (NCIT IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | |
| | | |
| Pneumococcal Dose 3 of 4 | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | pneumococcal conjugate vaccine, 13 valent (CVX 133) | |
| Date/Time of Start of Administration | 5/21/2012 | |
| Vaccine Administered | pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-05) | |
| Administered Amount (of Vaccine) | 0.5 | |
| Administered Units (of Measure) | mL | |
| Administering Provider | J. Martinez | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Lot Number | P853V2175 | |
| Substance Expiration Date | 8/30/2012 | |
| Substance Manufacturer Name | Pfizer, Inc (MVX PFR) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | RightThigh (HL7 RT) | |
| Pneumococcal Dose 4 of 4 | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | pneumococcal conjugate vaccine, 13 valent (CVX 133) | |
| Date/Time of Start of Administration | 11/22/2012 | |
| Vaccine Administered | pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-05) | |
| Administered Amount (of Vaccine) | 0.5 | |
| Administered Units (of Measure) | mL | |
| Administering Provider | J. Martinez | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Lot Number | P853V58544 | |
| Substance Expiration Date | 4/18/2013 | |
| Substance Manufacturer Name | Pfizer, Inc (MVX PFR) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | Left Deltoid (HL7 LD) | |

Notes for Testers

No Note

1.2.8. Enter Rotavirus Dose1 and 2 of 3 Juan Marcel

Test Step Type: SUT_MANUAL

Patient History for Rotavirus is entered into the EMR for Juan Marcel Gonzales.

Test Story

Description

The EHR vendor loads Rotavirus immunization history data for Juan Marcel Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Post Condition

The immunization history for Rotavirus known to the local practice is loaded into the record created for Juan Marcel Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| Rotavirus Dose 1 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Jane Carter | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 1/22/2012 | Y |
| Vaccine Administered | rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0854-52) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 325 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | 6359RV533 | Y |
| Substance Expiration Date | 2/15/2010 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| Rotavirus Dose 2 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | rotavirus, live, monovalent vaccine (CVX 119) | Y |
| Date/Time of Start of Administration | 3/22/2012 | Y |
| Vaccine Administered | rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0854-52) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 6359RV932 | Y |
| Substance Expiration Date | 5/10/2011 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |

Completion Status
Route of Administration
Administration Site

CP
Intramuscular (NCIT IM)
Right Thigh (HL7 RT)

Y

Notes for Testers

No Note

1.2.9. Enter Influenza History Doses Juan Marcel

Test Step Type: SUT_MANUAL

Patient History for Influenza is entered into the EMR for Juan Marcel.

Test Story

Description

The EHR vendor loads Influenza immunization history data for Juan Marcel Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Post Condition

The immunization history for Influenza known to the local practice is loaded into the record created for Juan Marcel Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| Influenza Dose 1 of 2 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 9/22/2012 | Y |
| Vaccine Administered | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0514-25) | Y |
| Administered Amount (of Vaccine) | 0.25 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Y | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | D8043IN8734 | Y |
| Substance Expiration Date | 3/12/2013 | Y |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |
| | | |
| Influenza Dose 2 of 2 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) | Y |
| Date/Time of Start of Administration | 10/20/2012 | Y |
| Vaccine Administered | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0514-25) | Y |
| Administered Amount (of Vaccine) | 0.25 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | D8043IN8798 | Y |
| Substance Expiration Date | 3/12/2013 | Y |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | Y |

| | | |
|--------------------------------------|---|--------|
| Completion Status | CP | ¥ |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | Right Thigh (HL7 RT) | |
| | | |
| Influenza Annual Dose | | |
| Entered BY | Sandra Molina | |
| Ordering Provider | Carlos Herrera | |
| Entering Organization | Shoreline Pediatrics | |
| Vaccine Event information source | Historical Immunization (NIP001 01) | |
| Value/Text for Vaccine Type | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) | |
| Date/Time of Start of Administration | 10/30/2013 | |
| Vaccine Administered | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0514-25) | |
| Administered Amount (of Vaccine) | 0.25 | |
| Administered Units (of Measure) | mL | |
| Administering Provider | J. Martinez | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | |
| Lot Number | D8043IN8734 | |
| Substance Expiration Date | 5/22/2014 | |
| Substance Manufacturer Name | Sanofi Pasteur Inc (MVX PMC) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | Left Deltoid (HL7 LD) | |

Notes for Testers

No Note

1.2.10. Enter HepA Dose1 and 2 of 2 Juan Marcel

Test Step Type: SUT_MANUAL

Patient History for HepA is entered into the EMR for Juan Marcel Gonzales.

Test Story

Description

The EHR vendor loads HepA immunization history data for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

Post Condition

The immunization history for HepA known to the local practice is loaded into the record created for Juana Mariana Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| HepA Dose 1 of 2 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Jane Carter | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 11/23/2011 | Y |
| Vaccine Administered | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-52) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 325 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | 6359RT33 | Y |
| Substance Expiration Date | 1/4/2012 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | CP | Y |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Right Deltoid (HL7 RD) | Y |
| | | |
| HepA Dose 2 of 2 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Carlos Herrera | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Vaccine Event information source | Historical Immunization (NIP001 01) | Y |
| Value/Text for Vaccine Type | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) | Y |
| Date/Time of Start of Administration | 5/23/2012 | Y |
| Vaccine Administered | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-52) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | J. Martinez | Y |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y |
| Lot Number | 6359RT48 | Y |
| Substance Expiration Date | 9/11/2012 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |

Completion Status
Route of Administration
Administration Site

CP
Intramuscular (NCIT C28161, HL70162: IM)
Left Deltoid (HL7 LD)

Y
Y

Notes for Testers

No Note

1.2.11. Enter MMRV Dose1 of 3 Juan Marcel

Test Step Type: SUT_MANUAL

Patient History for MMRV is entered into the EMR for Juan Marcel Gonzales.

Test Story

Description

The EHR vendor loads MMRV immunization history data for Juan Marcel Gonzales.

Comments

None

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Post Condition

The immunization history for MMRV known to the local practice is loaded into the record created for Juan Marcel Gonzales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| MMRV Dose 1 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Jane Carter | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 11/22/2012 | Y |
| Vaccine Administered | measles, mumps, rubella, and varicella virus vaccine (CVX 94) ProQuad (NDC 00006-4999-00) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 325 Shoreline Drive, Stamford Connecticut 06901 | Y |
| Lot Number | 7W27V7632 | Y |
| Substance Expiration Date | 12/15/2016 | Y |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | Y |
| Completion Status | CP | Y |

| | | |
|-------------------------|---|---|
| Route of Administration | Subcutaneous (NCIT C38299, HL70162: SC) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |

Notes for Testers

No Note

1.3. Mariela Gonzales Morales Initial Data Load

Demonstrates the ability to record pediatric demographic data, historical vaccinations, and clinical conditions for infant twin Mariela Gonzales Morales. There are no transactions associated with this test case.

Test Story

| | |
|----------------------------|------------------------|
| Description | No Description |
| Comments | No Comments |
| Pre Condition | No PreCondition |
| Post Condition | No PostCondition |
| Test Objectives | No Test Objectives |
| Evaluation Criteria | No evaluation criteria |
| Notes for Testers | No Note |

1.3.1. Enter Initial Demographic Data for Mariela Gonzales Morales

Test Step Type: SUT_MANUAL

Mariela Gonzales Morales, infant twin, is entered as a new patient in the EMR, including all pediatric demographic information.

Test Story

Description

The EHR vendor loads demographic data for Mariela Gonzales Morales.

Comments

Set-up step evaluating EMR functions for capturing and storing patient pediatric demographic data. There is no transaction associated with this test step.

Pre Condition

No PreCondition

Post Condition

The EMR has recorded all of the pediatric demographic in the record created for Mariela Gonzales Morales.

Test Objectives

Register New Patients: The system must allow a user to enter distinguishing information about patients so that providers can uniquely identify patients who have similar sounding names or other similar identifying information. For example, twins living in the same household will have similar dates of birth, addresses, and may have similar names. EHRs or other clinical software must be able to store information to successfully match with patients in immunization registries, if the information is available. The information includes the mother’s maiden name, whether the patient was part of a multiple birth, and the order of the multiple birth. This information allows the provider to correctly identify the patient and also helps assure a match when the EHR send the patient’s information to external systems such as an immunization registry.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all demographic data provided, and in particular (Mother's maiden name, multiple birth, birth order), with all required attributes indicated by [Y]:

| | | |
|--|----------------------|---|
| Patient ID (previously listed as “Medicaid Number”) | Vendor supplied | Y |
| Patient ID: Assigning Authority ID (i.e., owning source)/Facility Name | Shoreline Pediatrics | Y |
| Patient ID: Type (e.g., medical record number, IIS ID) | Vendor supplied | Y |
| Patient Name: First | Mariela | Y |
| Patient Name: Middle | Gonzales | Y |
| Patient Name: Last | Morales | Y |
| Patient Date of Birth | 5/30/2015 | Y |
| Birth Time | 11am | N |
| Patient Gender (Administrative Sex) | F | Y |
| Patient Multiple Birth Indicator | Yes | Y |
| Patient Birth Order | 1 | C |
| Responsible Person Name: First | Joanna | Y |
| Responsible Person Name: Middle | Elena | Y |
| Responsible Person Name: Last | Morales | Y |
| Responsible Person Name: Relationship to Patient | Mother | Y |
| Mother’s Name: First | Joanna | Y |
| Mother’s Name: Middle | Elena | Y |
| Mother’s Name: Last | Morales | Y |
| Mother’s Name: Maiden Last | Gonzales | Y |
| Patient Address: Street | 3321 Standish Way | Y |
| Patient Address: City | Stamford | Y |
| Patient Address: State | CT | Y |
| Patient Address: Country | USA | Y |
| Patient Address: Zipcode | 06903 | Y |
| Patient Address: County of Residence | Fairfield | N |
| Race | Other | Y |

| | | |
|--|---|---|
| Ethnicity | Hispanic or Latino | Y |
| Birthing Facility Name (Birth Delivery Location Address BDL) | Stamford Regional Hospital 15 Atlantic Avenue, Stamford Connecticut 06903 | [Y – birthing facility name, not address] |
| Patient Birth State | CT | Y |
| Patient Primary Language | English | Y |
| Patient Telephone Number | (203) 555-1214 | Y |
| Patient Telephone Number Type (e.g., home, cell) | home | Y |
| Patient E-mail Address | none | N |
| Publicity Code | | N |
| Protection Indicator | | N |
| Protection Indicator Effective Date | | N |
| Immunization Registry Status | | N |
| Preferred Contact Method | none | |

Notes for Testers

No Note

1.3.2. Enter Initial Clinical Information for Mariela

Test Step Type: SUT_MANUAL

The EHR captures structured data indicating that Mariela has a fever in the current visit.

Test Story

Description

The triage nurse enters basic information on Mariela Gonzales Morales – she has a fever (Temperature of 100.8o F).

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Mariela Gonzales Morales.

Post Condition

The clinical record for Mariela Gonzales Morales indicates that she currently has a fever (temperature 100.8oF)..

Test Objectives

Supporting data for documenting contraindications (it could also trigger an alert as a locally configured alert rule): **Modify Antigen Recommendations Based on Active Diagnoses:** The system notifies the provider of any conflicts between recommended vaccines in the updated forecast and the patient’s current or historical diagnoses.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all clinical data provided with all required attributes indicated by [Y]:

| | |
|--|--|
| Vital Signs | Fever of 100.1 (@code LOINC 8310-5 @value 100.1) |
| Vital Signs Observation Date | Date of current visit |
| Problems (If vendor uses problems for alert computations, then this should be included.) | Problem list: (Low grade pyrexia (finding) 304213008) |
| Problem Observation Date | Date of current visit |

Notes for Testers

No Note

1.3.3. Enter HepB Dose1 of 3 Mariella

Test Step Type: SUT_MANUAL

Patient History for HepB is entered into the EMR for Mariella Gonzales Morales.

Test Story

Description

The EHR vendor loads HepB immunization history data for Mariela Gonzales Morales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Mariela Gonzales Morales.

Post Condition

The immunization history for HepB known to the local practice is loaded into the record created for Mariela Gonzales Morales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| HepB Dose 1 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Justin Parker | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 5/30/2015 | Y |
| Vaccine Administered | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 15 Atlantic Avenue, Stamford, CT, 06903 | Y |
| Lot Number | 6332FK34 | Y |
| Substance Expiration Date | 12/14/2015 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | CP | Y |

Route of Administration Intramuscular (NCIT C28161, HL70162: IM)

Y

Administration Site Left Thigh (HL7 LT)

Y

Notes for Testers

No Note

1.4. Juana Maria Gonzales Morales Initial Data Load

Demonstrates the ability to record pediatric demographic data, historical vaccinations, and clinical conditions for infant twin Juana Maria Gonzales Morales. There are no transactions associated with this test case.

Test Story

| |
|----------------------------|
| Description |
| No Description |
| Comments |
| No Comments |
| Pre Condition |
| No PreCondition |
| Post Condition |
| No PostCondition |
| Test Objectives |
| No Test Objectives |
| Evaluation Criteria |
| No evaluation criteria |
| Notes for Testers |
| No Note |

1.4.1. Enter Initial Demographic Data for Juana Maria Gonzales Morales

Test Step Type: SUT_MANUAL

Juana Maria Gonzales Morales, infant twin, is entered as a new patient in the EMR, including all pediatric demographic information.

Test Story

Description

The EHR vendor loads demographic data for Juana Maria Gonzales Morales.

Comments

Set-up step evaluating EMR functions for capturing and storing patient pediatric demographic data. There is no transaction associated with this test step.

Pre Condition

No PreCondition

Post Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Maria Gonzales Morales.

Test Objectives

Register New Patients: The system must allow a user to enter distinguishing information about patients so that providers can uniquely identify patients who have similar sounding names or other similar identifying information. For example, twins living in the same household will have similar dates of birth, addresses, and may have similar names. EHRs or other clinical software must be able to store information to successfully match with patients in immunization registries, if the information is available. The information includes the mother’s maiden name, whether the patient was part of a multiple birth, and the order of the multiple birth. This information allows the provider to correctly identify the patient and also helps assure a match when the EHR send the patient’s information to external systems such as an immunization registry.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all demographic data provided, and in particular (Mother's maiden name, multiple birth, birth order), with all required attributes indicated by [Y]:

| | | |
|--|----------------------|---|
| Patient ID (previously listed as “Medicaid Number”) | Vendor supplied | Y |
| Patient ID: Assigning Authority ID (i.e., owning source)/Facility Name | Shoreline Pediatrics | Y |
| Patient ID: Type (e.g., medical record number, IIS ID) | Vendor supplied | Y |
| Patient Name: First | Juana | Y |
| Patient Name: Middle | Maria Gonzales | Y |
| Patient Name: Last | Morales | Y |
| Patient Date of Birth | 5/30/2015 | Y |
| Birth Time | 11:15am | N |
| Patient Gender (Administrative Sex) | F | Y |
| Patient Multiple Birth Indicator | Yes | Y |
| Patient Birth Order | 2 | C |
| Responsible Person Name: First | Joanna | Y |
| Responsible Person Name: Middle | Elena | Y |
| Responsible Person Name: Last | Morales | Y |
| Responsible Person Name: Relationship to Patient | Mother | Y |
| Mother’s Name: First | Joanna | Y |
| Mother’s Name: Middle | Elena | Y |
| Mother’s Name: Last | Morales | Y |
| Mother’s Name: Maiden Last | Gonzales | Y |
| Patient Address: Street | 3321 Standish Way | Y |
| Patient Address: City | Stamford | Y |
| Patient Address: State | CT | Y |
| Patient Address: Country | USA | Y |

| | | |
|--|--|---|
| Patient Address: County of Residence | Fairfield | N |
| Race | Other | Y |
| Ethnicity | Hispanic or Latino | Y |
| Birthing Facility Name (Birth Delivery Location Address BDL) | Stamford Regional Hospital 15 Atlantic Avenue, Stamford Connecticut 06903 | [Y – birthing facility name, not address] |
| Patient Birth State | CT | Y |
| Patient Primary Language | English | Y |
| Patient Telephone Number | (203) 555-1214 | Y |
| Patient Telephone Number Type (e.g., home, cell) | home | Y |
| Patient E-mail Address | none | N |
| Publicity Code | | N |
| Protection Indicator | | N |
| Protection Indicator Effective Date | | N |
| Immunization Registry Status | | N |
| Preferred Contact Method | none | |

•]

Notes for Testers

No Note

1.4.2. Enter HepB Dose1 of 3 Juana Maria

Test Step Type: SUT_MANUAL

Patient History for HepB is entered into the EMR for Juana Maria Gonzales Morales.

Test Story

Description

The EHR vendor loads HepB immunization history data for Juana Maria Gonzales Morales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juana Maria Gonzales Morales.

Post Condition

The immunization history for HepB known to the local practice is loaded into the record created for Juana Maria Gonzales Morales.

Test Objectives

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

Evaluation Criteria

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

| | | |
|---|--|--------|
| HepB Dose 1 of 3 | | |
| Entered BY | Sandra Molina | Y |
| Ordering Provider | Justin Parker | Y |
| Entering Organization | Shoreline Pediatrics | Y |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y |
| Date/Time of Start of Administration | 5/30/2015 | Y |
| Vaccine Administered | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) | Y |
| Administered Amount (of Vaccine) | 0.5 | Y |
| Administered Units (of Measure) | mL | Y |
| Administering Provider | Jane Carter | Y |
| Administered-at Location | 15 Atlantic Avenue, Stamford, CT, 06903 | Y |
| Lot Number | 6332FK34 | Y |
| Substance Expiration Date | 12/14/2015 | Y |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y |
| Completion Status | CP | Y |

| | | |
|-------------------------|--|---|
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y |
| Administration Site | Left Thigh (HL7 LT) | Y |

Notes for Testers

No Note

2. Display Immunization History and Forecast

The provider will view the immunization history and forecast in the EMR showing all data entered and the resulting forecast for the child.

2.1. Juana Mariana Gonzales Display Immunization History and Forecast

Using the data entered in the Intial Data Load,, the EMR displays an Evaluated History and Forecast to the user to inform the visit for Juana Mariana Gonzales.

Test Story

Description

No Description

Comments

No Comments

Pre Condition

No PreCondition

Post Condition

No PostCondition

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

2.1.1. Display the Evaluated Immunization History

Test Step Type: SUT_MANUAL

The Provider uses the EMR to view the immunization history in Juana Mariana Gonzales' record in the local system.

Test Story

Description

The provider views the complete Evaluated History for Juana Mariana Gonzales.

Comments

No Comments

Pre Condition

All Demographic and Immunizations have been entered from the Initial Data Load.

Post Condition

The complete Evaluated History for Juana Mariana Gonzales is displayed to the user.

Test Objectives

Review Patient Immunization History: To assist with the ordering process, the EHR or other clinical software system allows a user to specify standard views of patient immunization information for each vaccine dose administration, including patient-specific data (e.g., age on dates of administration, etc.).

Evaluation Criteria

1. The user views vaccinations as follows:

b. Vaccinations displayed:

hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)&nbs;administered&nbs;1/15/2010
hepatitis B vaccine, pediatric or pediatric/adolescent dosage&nbs;(CVX 08)&nbs;administered&nbs;10/30/2010
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)&nbs;administered&nbs;1/22/2010
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)&nbs;administered&nbs;3/23/2010,
Including adverse reaction&nbs;31044-1 Reaction, VXC12 fever of >40.5C (105F) within 48 hours of dose
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)&nbs;administered&nbs;5/22/2010
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)&nbs;administered&nbs;2/21/2011
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)&nbs;administered&nbs;1/22/2010
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)&nbs;administered&nbs;3/23/2010
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)&nbs;administered&nbs;5/22/2010
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)&nbs;administered&nbs;2/21/2011
poliovirus vaccine, inactivated (CVX 10)&nbs;administered&nbs;1/22/2010
poliovirus vaccine, inactivated (CVX 10)&nbs;administered&nbs;3/23/2010
pneumococcal conjugate vaccine, 13 valent (CVX 133)&nbs;administered&nbs;1/22/2010
pneumococcal conjugate vaccine, 13 valent (CVX 133)&nbs;administered&nbs;3/23/2010
pneumococcal conjugate vaccine, 13 valent (CVX 133)&nbs;administered&nbs;5/22/2010
pneumococcal conjugate vaccine, 13 valent (CVX 133)&nbs;administered&nbs;2/21/2011
rotavirus, live, monovalent vaccine (CVX 119)&nbs;administered&nbs;3/23/2010
Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)&nbs;administered&nbs;9/25/2010
Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)&nbs;administered&nbs;10/27/2010
Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)&nbs;administered&nbs;10/2/2011
Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)&nbs;administered&nbs;11/4/2012
hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83)&nbs;administered&nbs;11/23/2011
hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83)&nbs;administered&nbs;5/23/2012
measles, mumps, rubella, and varicella virus vaccine (CVX 94)&nbs;administered&nbs;10/23/2010--*Identified as an invalid dose*
measles, mumps, rubella, and varicella virus vaccine (CVX 94)&nbs;administered&nbs;11/22/2012
&nbs;

Notes for Testers

No Note

2.1.2. View the vaccination forecast for Juana Mariana Gonzales

Test Step Type: SUT_MANUAL

Using the vaccine history information, the EMR displays the current Immunization Forecast to the user for Juana Mariana Gonzales.

Test Story

Description

Once the vaccine history is entered in the EMR, the provider views the vaccine forecast.

Comments

No Comments

Pre Condition

Vaccine History is available in the EMR record for Juana Mariana Gonzales.

Post Condition

A vaccine forecast based upon the complete vaccine history in the EMR is available to the user.

Test Objectives

View Reconciled Immunization Forecast: The EHR or other clinical software system has the ability to re-evaluate and update the immunization forecast using a patient's newly updated immunization history, where the updated forecast results from the reconciliation of immunization data contained in the public health immunization registry with immunization data contained in the EHR. Processing the new forecast can be internal to the EHR or it can use an external forecasting service.

Evaluation Criteria

Tester verifies that the vendor can display the immunization forecast based upon the reconciled vaccination history:

- 1. Verify that the EMR does not include in reconciled vaccine forecast:
IPV due on 5/22/2010
- 2. Verify that the EMR includes in reconciled vaccine forecast:
IPV due on 11/22/2013
MMR due on 5/22/2011
Varicella due on 5/22/2011
influenza, unspecified formulation due on 10/21/2015

Notes for Testers

No Note

2.2. Juan Marcel Gonzales Display Immunization History and Forecast

Using the data entered in the Intial Data Load, the EMR displays an Evaluated History and Forecast to the user to inform the visit for Juan Marcel Gonzales.

Test Story

Description

No Description

Comments

No Comments

Pre Condition

No PreCondition

Post Condition

No PostCondition

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

2.2.1. Display the Evaluated Immunization History for Juan Marcel Gonzales

Test Step Type: SUT_MANUAL

The Provider uses the EMR to view the immunization history in Juan Marcel Gonzales ' record in the local system.

Test Story

Description

The provider views the complete Evaluated History for Juan Marcel Gonzales.

Comments

None

Pre Condition

All Demographic and Immunizations have been entered from the Initial Data Load.

Post Condition

The complete Evaluated History for Juan Marcel Gonzales is displayed to the user.

Test Objectives

Review Patient Immunization History: To assist with the ordering process, the EHR or other clinical software system allows a user to specify standard views of patient immunization information for each vaccine dose administration, including patient-specific data (e.g., age on dates of administration, etc.).

Evaluation Criteria

1. The user views vaccinations as follows:

b. Vaccinations displayed:

hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) administered 11/23/2011
hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) administered 12/23/2013
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) administered 1/22/2012
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) administered 3/22/2012
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) administered 5/21/2012
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) administered 2/20/2013
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) administered 1/22/2012
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) administered 3/22/2012
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) administered 5/21/2012
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) administered 11/22/2012
poliovirus vaccine, inactivated (CVX 10) administered 1/22/2012
poliovirus vaccine, inactivated (CVX 10) administered 3/22/2012
poliovirus vaccine, inactivated (CVX 10) administered 5/21/2012
pneumococcal conjugate vaccine, 13 valent (CVX 133) administered 1/22/2012
pneumococcal conjugate vaccine, 13 valent (CVX 133) administered 3/22/2012
pneumococcal conjugate vaccine, 13 valent (CVX 133) administered 5/21/2012
pneumococcal conjugate vaccine, 13 valent (CVX 133) administered 11/22/2012
rotavirus, live, monovalent vaccine (CVX 119) administered 3/22/2012
rotavirus, live, monovalent vaccine (CVX 119) administered 5/21/2012
Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) administered 9/22/2012
Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) administered 10/20/2012
Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161) administered 10/30/2013
hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) administered 5/21/2013
hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) administered 12/1/2013
measles, mumps, rubella, and varicella virus vaccine (CVX 94) administered 11/22/2012

Notes for Testers

No Note

2.2.2. View the vaccination forecast for Juan Marcel Gonzales

Test Step Type: SUT_MANUAL

Using the vaccine history information, the EMR displays the current Immunization Forecast to the user for Juan Marcel Gonzales.

Test Story

Description

Once the vaccine history is entered in the EMR, the provider views the vaccine forecast.

Comments

None

Pre Condition

Vaccine History is available in the EMR record for Juana Mariana Gonzales.

Post Condition

A vaccine forecast based upon the complete vaccine history in the EMR is available to the user.

Test Objectives

View Reconciled Immunization Forecast: The EHR or other clinical software system has the ability to re-evaluate and update the immunization forecast using a patient's newly updated immunization history, where the updated forecast results from the reconciliation of immunization data contained in the public health immunization registry with immunization data contained in the EHR. Processing the new forecast can be internal to the EHR or it can use an external forecasting service.

Evaluation Criteria

1. Tester verifies that the vendor can display the immunization forecast based upon the reconciled vaccination history:
2. Verify that the EMR includes in the vaccine forecast:

Hep B Peds NOS due on 5/21/2012
DTaP due on 11/22/2015
IPV due on 11/22/2015
MMR due on 11/22/2015
Varicella due on 11/22/2015
influenza, unspecified formulation due on Oct 22, 2015 or later

Notes for Testers

No Note

2.3. Mariela Gonzales Morales Display Immunization History and Forecast

Using the data entered in the Intial Data Load, the EMR displays an Evaluated History and Forecast to the user to inform the visit for Mariela Gonzales Morales.

Test Story

Description

No Description

Comments

No Comments

Pre Condition

No PreCondition

Post Condition

No PostCondition

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

2.3.1. Display the Evaluated Immunization History for Mariela Gonzales Morales

Test Step Type: SUT_MANUAL

The Provider uses the EMR to view the immunization history in Mariela Gonzales Morales ' record in the local system.

Test Story

Description

The provider views the complete Evaluated History for Mariela Gonzales Morales.

Comments

None

Pre Condition

All Demographic and Immunizations have been entered from the Initial Data Load.

Post Condition

The complete Evaluated History for Mariela Gonzales Morales is displayed to the user.

Test Objectives

Review Patient Immunization History: To assist with the ordering process, the EHR or other clinical software system allows a user to specify standard views of patient immunization information for each vaccine dose administration, including patient-specific data (e.g., age on dates of administration, etc.).

Evaluation Criteria

1. The user views vaccinations as follows:

b. Vaccinations displayed:

hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) administered
5/30/2015

Notes for Testers

No Note

2.3.2. View the vaccination forecast for Mariela Gonzales Morales

Test Step Type: SUT_MANUAL

The EMR displays the current Immunization Forecast to the user for Mariela Gonzales Morales either as returned by the IIS in prior step, or as generated thru any local means.

Test Story

Description

The physician accesses the record for Mariela Gonzales Morales and:

- • Views the vaccine forecast (either as provided by the Immunization Registry or as determined through EMR defined methods)

Comments

No Comments

Pre Condition

EMR Vaccine History is imported from the Immunization History returned from the Immunization Registry (previous step 'View and import response to request for vaccination history for Mariela Gonzales Morales)

Post Condition

A vaccine forecast based upon the imported vaccine history is available to the user.

Test Objectives

View Reconciled Immunization Forecast: The EHR or other clinical software system has the ability to re-evaluate and update the immunization forecast using a patient’s newly updated immunization history, where the updated forecast results from the reconciliation of immunization data contained in the public health immunization registry with immunization data contained in the EHR. Processing the new forecast can be internal to the EHR or it can use an external forecasting service.

Evaluation Criteria

1. Tester verifies that the vendor can display the immunization forecast based upon the reconciled vaccination history:
- 2. Verify that the EMR includes in the vaccine forecast:

Hep B Peds NOS due on 6/29/2015
DTaP due on 7/29/2015
Hib due on 7/29/2015
IPV due on 7/29/2015
Pneumococcal conjugate due on 7/29/2015
Rotavirus due on 7/29/2015
 HepA due on 5/29/2016
 MMR due on 5/29/2016
Varicella due on 5/29/2016
influenza, unspecified formulation due on Nov 26, 2015 or later

Notes for Testers

No Note

2.4. Juana Maria Gonzales Morales Display Immunization History and Forecast

Using the data entered in the Intial Data Load, the EMR displays an Evaluated History and Forecast to the user to inform the visit for Juana Maria Gonzales Morales.

Test Story

Description

No Description

Comments

No Comments

Pre Condition

No PreCondition

Post Condition

No PostCondition

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

2.4.1. Display the Evaluated Immunization History for Juana Maria Gonzales Morales

Test Step Type: SUT_MANUAL

The Provider uses the EMR to view the immunization history in Juana Maria Gonzales Morales ' record in the local system.

Test Story

Description

The provider views the complete Evaluated History for Juana Maria Gonzales Morales.

Comments

None

Pre Condition

All Demographic and Immunizations have been entered from the Initial Data Load.

Post Condition

The complete Evaluated History for Juana Maria Gonzales Morales is displayed to the user.

Test Objectives

Review Patient Immunization History: To assist with the ordering process, the EHR or other clinical software system allows a user to specify standard views of patient immunization information for each vaccine dose administration, including patient-specific data (e.g., age on dates of administration, etc.).

Evaluation Criteria

1. The user views vaccinations as follows:

b. Vaccinations displayed:

hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX
08) administered 3/30/2015

Notes for Testers

No Note

2.4.2. View the vaccination forecast for Juana Maria Gonzales Morales

Test Step Type: SUT_MANUAL

The EMR displays the current Immunization Forecast to the user for Juana Maria Gonzales Morales either as returned by the IIS in prior step, or as generated thru any local means.

Test Story

Description

The physician accesses the record for Juana Maria Gonzales Morales and:

- • Views the vaccine forecast (either as provided by the Immunization Registry or as determined through EMR defined methods)

Comments

No Comments

Pre Condition

EMR Vaccine History is imported from the Immunization History returned from the Immunization Registry (previous step 'View and import response to request for vaccination history for Juana Maria Gonzales Morales)

Post Condition

A vaccine forecast based upon the imported vaccine history is available to the user.

Test Objectives

View Reconciled Immunization Forecast: The EHR or other clinical software system has the ability to re-evaluate and update the immunization forecast using a patient’s newly updated immunization history, where the updated forecast results from the reconciliation of immunization data contained in the public health immunization registry with immunization data contained in the EHR. Processing the new forecast can be internal to the EHR or it can use an external forecasting service.

Evaluation Criteria

1. Tester verifies that the vendor can display the immunization forecast based upon the reconciled vaccination history:
- 2. Verify that the EMR includes in the vaccine forecast:

Hep B Peds NOS due on 6/29/2015
DTaP due on 7/29/2015
Hib due on 7/29/2015
IPV due on 7/29/2015
Pneumococcal conjugate due on 7/29/2015
Rotavirus due on 7/29/2015
 HepA due on 5/29/2016
 MMR due on 5/29/2016
Varicella due on 5/29/2016
influenza, unspecified formulation due on Nov 26, 2015 or later

Notes for Testers

No Note

3. Order and Immunize patient

This test will consist of ordering vaccines for the test patients, reviewing any alerts caused by specific scenarios, and documenting vaccinations administered to the patients. NOTE: There are no orders or immunizations in this test plan for Juana Maria Gonzales.

3.1. Juana Mariana Gonzales, Enter Orders and Immunizations

Orders and Immunization events, non-administrations, and alerts presented for current visit.

Test Story

Description

No Description

Comments

No Comments

Pre Condition

No PreCondition

Post Condition

No PostCondition

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

3.1.1. Order IPV and view prior reaction

Test Step Type: SUT_MANUAL

The provider selects to order IPV and views information about the prior febrile seizure post-IPV vaccine.

Test Story

Description

The physician accesses the record for Juana Mariana Gonzales and:

- • Selects order for IPV and views information about the prior febrile seizure post-IPV vaccine

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR.

Post Condition

IPV order entered in patient record. User notified of history of adverse reaction to IPV (febrile seizures).

Test Objectives

Notify of Previous Adverse Event: EHRs and other clinical software systems alert providers to previous adverse events for a specific patient, in order to inform clinical decision-making when providers view an existing immunization record.

Evaluation Criteria

EMR Records the following order information and Alert:

| | |
|--|-------------------------------------|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Value/Text for Vaccine Type | IPV (CVX 10) |
| Date/Time Vaccine Refusal was recorded | Current Date |

| | |
|-------|---|
| Alert | Alerts user to information about the prior febrile seizure post-IPV vaccine |
|-------|---|

Notes for Testers

No Note

3.1.2. IPV Parental Refusal

Test Step Type: SUT_MANUAL

Documents mother's refusal for IPV vaccine indicating the parent decision, the reason and makes it permanent.

Test Story

Description

The mother is concerned about administering the IPV due to the prior adverse reaction, and refuses to have the child immunized for IPV. The provider documents mother's refusal for IPV vaccine indicating the parent decision, the reason and makes it permanent.

Comments

No Comments

Pre Condition

Prior Immunization History loaded and reconciled from the Immunization Registry. Order is attempted for IPV. Provider has been alerted to prior adverse reaction to IPV of febrile seizures.

Post Condition

Vaccine non-administration due to parental refusal is documented in the patient record. Deferral is permanent.

Test Objectives

Record Vaccine Administration Deferral: The EHR or other clinical software system allows a user to enter a reason or reasons why a specific immunization was not given to a patient (e.g., due to contraindication, refusal, etc.). The system also stores that information in a structured way so it can be reported and analyzed as needed.

Evaluation Criteria

EMR documents the non-administration of the IPV due to the parental refusal:

| | |
|---|-------------------------------|
| Substance/Treatment Refusal Reason | Parental decision (NIP002 00) |
| Completion Status | RE |
| Date/Time Vaccine Deferral was recorded | Current Date |
| Deferral Reason | Parental decision (NIP002 00) |
| Deferral Status | Permanent |

Notes for Testers

No Note

3.1.3. Order Influenza vaccine and view allergy alert

Test Step Type: SUT MANUAL

The provider orders inactivated influenza vaccine and is notified that the patient has an allergy to egg albumin.

Test Story

Description

The provider orders inactivated influenza vaccine and is notified that the patient has an allergy to egg albumin

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR.

Post Condition

Intranasal form of the Influenza vaccine is ordered for the patient.

Test Objectives

Modify Antigen Recommendations Based on Allergy History: The system notifies the provider of any conflicts between recommended vaccines in the updated forecast and the patient's active allergies.

Evaluation Criteria

EMR Records the following order information and Alert:

| | |
|----------------------------------|---|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Order Value/Text for Vaccine | Influenza, injectable, quadrivalent, preservative free, pediatric |
| Type | (CVX161) |
| Date/Time Vaccine was recorded | Current Date |
| Alert | Alerts user to information that patient has Egg Allergy |
| & | |

Provider changes the order to modify the Vaccine type:

Vaccine Type: Influenza virus vaccine, live, attenuated, for intranasal use (CVX 111)

Notes for Testers

No Note

3.1.4. Order MMRV Vaccine

Test Step Type: SUT_MANUAL

The provider orders an MMRV vaccine as a catch-up dose.

Test Story

Description

As indicated by the vaccine forecast, the first MMRV administered was invalid as it was administered too soon. The provider orders MMRV as a catch-up dose.

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR.

Post Condition

MMRV vaccine is ordered for the patient.

Test Objectives

Enter Vaccination Order: The EHR or other clinical software system allows providers to order immunizations for a patient using filters for type of vaccine, including combination vaccines.

Evaluation Criteria

EMR Records the following order information and Alert:

| | |
|----------------------------------|--|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Order Value/Text for Vaccine | measles, mumps, rubella, and varicella virus vaccine (CVX 94) |
| Type | |
| Date/Time Vaccine was recorded | Current Date |

Notes for Testers

No Note

3.1.5. Records Influenza Vaccine administration route with data validation checking

Test Step Type: SUT_MANUAL

The provider records the vaccine administration in the EMR and is prevented from incorrectly documenting vaccine route.

Test Story

Description

The nurse documents administration route for the nasal live, attenuated influenza vaccine • Is prevented from documenting “IM” for live, attenuated influenza vaccine &nbs;

Comments

This step covers data quality checking as an informative aspect of vaccine administration

Pre Condition

Order is placed for nasal live, attenuated influenza vaccine.

Post Condition

The nasal live, attenuated influenza vaccination route has failed to be recorded as intramuscular in the EMR.

Test Objectives

Record Vaccine Administration: The EHR or other clinical software system records information about each vaccine administered.&nbs; The EHR records this information as structured data elements, including, at a minimum: date administered, administering clinician, site of administration (e.g., left arm), immunization type, product, lot number, manufacturer, Vaccine Information Statement date, and quantity of vaccine/dose size.

Sample of data quality checking for vaccine route.

Evaluation Criteria

The EMR prevents the user for entering 'Intramuscular' as a route for the the nasal live, attenuated influenza vaccine.

Notes for Testers

No Note



3.1.7. Records MMRV Vaccine administration route with data validation checking

Test Step Type: SUT_MANUAL

The provider records the vaccine administration route in the EMR and is prevented from incorrectly documenting vaccine route

Test Story

Description

The nurse documents administration route for the MMRV vaccine • Is prevented from documenting "oral" for MMRV vaccine

Comments

This step covers data quality checking as an informative aspect of vaccine administration

Pre Condition

Order is placed for MMRV vaccine.

Post Condition

The MMRV vaccination route has failed to be recorded as "oral" in the EMR.

Test Objectives

Record Vaccine Administration: The EHR or other clinical software system records information about each vaccine administered. The EHR records this information as structured data elements, including, at a minimum: date administered, administering clinician, site of administration (e.g., left arm), immunization type, product, lot number, manufacturer, Vaccine Information Statement date, and quantity of vaccine/dose size.

Sample of data quality checking for vaccine route.

Evaluation Criteria

The EMR prevents the user for entering "Oral" as a route for the the MMRV vaccine.

Notes for Testers

No Note

3.1.8. Record MMRV Vaccine administration

Test Step Type: SUT_MANUAL

The provider documents in the EMR all attributes associated with the new vaccine administration.

Test Story

Description

The nurse administers the the MMRV vaccine
• Documents all required information for each vaccine

Comments

No Comments

Pre Condition

Order is placed for MMRV vaccine.

Post Condition

The MMRV vaccination is recorded in the EMR.

Test Objectives

Record Vaccine Administration: The EHR or other clinical software system records information about each vaccine administered. The EHR records this information as structured data elements, including, at a minimum: date administered, administering clinician, site of administration (e.g., left arm), immunization type, product, lot number, manufacturer, Vaccine Information Statement date, and quantity of vaccine/dose size.

Evaluation Criteria

EMR Records the following vaccine administration information:

| | |
|---|--|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Order Value/Text for Vaccine Type | measles, mumps, rubella, and varicella virus vaccine (CVX 94), ProQuad (NDC 00006-4999-00) |
| Date/Time Vaccine was recorded | Current Date |
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Date/Time of Start of Administration | Current Date |
| Vaccine Administered | measles, mumps, rubella, and varicella virus vaccine (CVX 94), ProQuad (NDC 00006-4999-00) |
| Dose Number | 2 |
| Doses in Series | 2 |
| Administered Amount (of Vaccine) | 0.5 |
| Administered Units (of Measure) | mL |
| Administration Notes | |
| Administering Provider | Sandra Molina |
| Administered-at Location | 400 Shoreline Drive, Stamford Connecticut 06901 |
| Lot Number | 7W87V3687 |
| Substance Expiration Date | 7/15/2015 |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) |
| Completion Status | CP |
| Route of Administration | Subcutaneous (NCIT C38299, HL70162: SC) |
| Administration Site | Left Deltoid (HL70162 LD) |
| VFC Eligibility | No |

Notes for Testers

NOTES FOR TESTERS

No Note

3.2. Juan Marcel Gonzales, Enter Orders and Immunizations

Orders and Immunization events, non-administrations, and alerts presented for current visit.

Test Story

Description

No Description

Comments

No Comments

Pre Condition

No PreCondition

Post Condition

No PostCondition

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

3.2.1. Order intranasal, live virus influenza vaccine and view asthma contraindication

Test Step Type: SUT_MANUAL

Selects selects to order intranasal, live virus influenza vaccine and views information about patient asthma problem which is a contraindication to the intranasal vaccine.

Test Story

Description

The physician accesses the record for Juan Marcel Gonzales and:

- • Orders administration of Influenza vaccine (intranasal, live virus vaccine)
- • Receives notification the patient has asthma, a relative contraindication for intranasal influenza vaccine

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR.

Post Condition

User notified of history of contraindication to influenza virus vaccine, live, attenuated, for intranasal use (CVX 111) of asthma on problem list. Order is changed to Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161)

Test Objectives

Modify Antigen Recommendations Based on Active Diagnoses: The system notifies the provider of any conflicts between recommended vaccines in the updated forecast and the patient's current or historical diagnoses.

Enter Vaccination Order: The EHR or other clinical software system allows providers to order immunizations for a patient using filters for type of vaccine, including combination vaccines.

Evaluation Criteria

EMR Records the following order information and Alert:

| | |
|--|--|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Value/Text for Vaccine Type: | influenza virus vaccine, live, attenuated, for intranasal use (CVX 111) |
| Date/Time Vaccine Refusal was recorded | Current Date |
| Alert | Notification the patient has asthma, a relative contraindication for intranasal influenza vaccine. |

The Provider changes the order to:

| | |
|---------------|---|
| Vaccine Type: | Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) |
|---------------|---|

Notes for Testers

No Note

3.2.2. Orders administration of Hepatitis B vaccine

Test Step Type: SUT MANUAL

The provider orders a Hepatitis B vaccine (dose 3).

Test Story

Description

As indicated by the vaccine forecast, the third Hepatitis B is overdue, and is ordered.

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR. Vaccine forecast reviewed.

Post Condition

Hepatitis B vaccine is ordered for the patient.

Test Objectives

Enter Vaccination Order: The EHR or other clinical software system allows providers to order immunizations for a patient using filters for type of vaccine, including combination vaccines.

Evaluation Criteria

EMR Records the following order information and Alert:

| | |
|---|--|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Order Value/Text for Vaccine Type | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) |
| Date/Time Vaccine was recorded | Current Date |

Notes for Testers

No Note

3.2.3. Orders administration of DTaP vaccine and alerted that the dose is too early

Test Step Type: SUT_MANUAL

The provider orders a DTaP vaccine (dose 5). The EMR provides an alert that the vaccine dose is too early.

Test Story

Description

 The fifth DTaP is ordered, and the provider is notified that the dose is too early.

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR. Vaccine forecast is available in the EMR.

Post Condition

DTaP vaccine is ordered for the patient, and provider is notified that the dose is too early.

Test Objectives

Receive Dose Not Indicated Alert for Single Vaccine Order: The EHR or other clinical software system notifies the provider in instances when there are single or combination vaccine orders that are inconsistent with the expected timing intervals included in the vaccine forecast. Inconsistencies include suggestion of different date(s) for ordering the vaccine(s) or indication the vaccine(s) is/are no longer required.

Enter Vaccination Order: The EHR or other clinical software system allows providers to order immunizations for a patient using filters for type of vaccine, including combination vaccines.

Evaluation Criteria

EMR Records the following order information and Alert:

| | |
|--------------------------------------|--|
| Entered BY Ordering Provider | Sandra Molina Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Value/Text for Vaccine Type | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) |
| Date/Time Vaccine order was recorded | Current Date |
| Alert | Notification that the dose is too early |

Notes for Testers

No Note

3.2.4. Records Hepatitis B Vaccine lot number with expired lot alert

Test Step Type: SUT_MANUAL

The provider records the vaccine administration lot number in the EMR and is alerted of the expired lot.

Test Story

Description

The nurse documents administration lot number for the Hepatitis B vaccine
• Is prevented from ordering the Hepatitis B lot as it has expired
• Documents administration from a different lot that is not expired
nbsp;

Comments

Pre Condition

Order is placed for Hepatitis B vaccine.

Post Condition

The provider has been notified of the expired Hepatitis B vaccination lot. Documentation of a lot to be administered that is not expired is recorded in the EMR.

Test Objectives

Notify of Vaccine Dose Expiration: The EHR or other clinical software system notifies the provider administering a vaccine if the dose chosen for administration is expired.

Evaluation Criteria

EMR Records the following order information and Alert:

| | |
|--------------------------------------|---|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Date/Time of Start of Administration | Current Date |
| Vaccine Administered | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGERIX-B (NDC 58160-0820-11) |
| Lot Number (Expired) | 6332FK18 |
| Substance Expiration Date (Expired) | 6/15/2015 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) |
| Alert | Alerts user to expired lot |

Notes for Testers

No Note

3.2.5. Record Hepatitis B Vaccine administration

Test Step Type: SUT_MANUAL

The EMR is able to document all attributes associated with the new vaccine administration.

Test Story

Description

The nurse administers the Hepatitis B vaccine
• Documents all required information for the vaccine

Comments

No Comments

Pre Condition

Order is placed for Hepatitis B vaccine.

Post Condition

The Hepatitis B vaccination is recorded in the EMR.

Test Objectives

Record Vaccine Administration: The EHR or other clinical software system records information about each vaccine administered. The EHR records this information as structured data elements, including, at a minimum: date administered, administering clinician, site of administration (e.g., left arm), immunization type, product, lot number, manufacturer, Vaccine Information Statement date, and quantity of vaccine/dose size.

Evaluation Criteria

EMR Records the following vaccine administration information:

| | |
|--------------------------------------|---|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Date/Time of Start of Administration | Current Date |
| Vaccine Administered | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGERIX-B (NDC 58160-0820-11) |
| Dose Number | 3 |
| Doses in Series | 3 |
| Administered Amount (of Vaccine) | 0.5 |
| Administered Units (of Measure) | mL |
| Administration Notes | |
| Administering Provider | Sandra Molina |
| Administered-at Location | 400 Shoreline Drive, Stamford Connecticut 06901 |
| Lot Number | 6332FK26 |
| Substance Expiration Date | 8/25/2015 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) |
| Completion Status | CP |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) |
| Administration Site | Left Deltoid (HL70162 LD) |
| VFC Eligibility | No |

Notes for Testers

No Note

3.2.6. Records Influenza Vaccine administration with VFC eligibility checking

Test Step Type: SUT_MANUAL

The provider records the vaccine administration from a VFC source and alerted that the patient is not VFC eligible.

Test Story

Description

The nurse documents administration for the inactivated influenza vaccine from a VFC source
• Is alerted that the patient is not eligible for VFC
• Orders a different non-VFC lot of inactivated influenza vaccine
nbsp;

Comments

This step covers data quality checking as an informative aspect of vaccine administration

Pre Condition

Order is placed for inactivated influenza vaccine.

Post Condition

The user is notified of vaccine dose ineligibility.

Test Objectives

Notify of Vaccine Dose Ineligibility: The EHR or other clinical software system provides a method for alerting a provider if a vaccine is selected for a patient who is not eligible for the inventory item selected.

Evaluation Criteria

The provider documents a VFC lot to be administered in the EMR. Once notified that the patient is not eligible for the VFC, the a non-VFC lot is selected.

| | |
|--------------------------------------|--|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) |
| Value/Text for Vaccine Type: | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161), FLUZONE QUADRIVALENT (NDC 49281-0514-25) |
| Date/Time of Start of Administration | Current Date |
| Vaccine Administered | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161), FLUZONE QUADRIVALENT (NDC 49281-0514-25) |
| VFC lot (not administered) | D8043IN8422 |
| Substance Expiration Date | 8/15/2015 |
| Substance Manufacturer Name | Sanofi Pasteur (MVX PMC) |
| Alert | Patient is not VFC Eligible |

The Provider selects a non-VFC Lot:

| | |
|-------------------------------|-------------|
| Vaccine Lot # (administered): | D8043IN8855 |
| Vaccine Expiration Date: | 8/25/2015 |

Notes for Testers

No Note

3.2.7. Record Influenza Vaccine administration for Juan Marcel Gonzales

Test Step Type: SUT_MANUAL

The EMR is able to document all attributes associated with the new vaccine administration.

Test Story

Description

The nurse administers the inactivated influenza vaccine
• Documents all required information for each vaccine

Comments

No Comments

Pre Condition

Order is placed for inactivated influenza vaccine.

Post Condition

The inactivated influenza vaccine administration is recorded in the EMR.

Test Objectives

Record Vaccine Administration: The EHR or other clinical software system records information about each vaccine administered. The EHR records this information as structured data elements, including, at a minimum: date administered, administering clinician, site of administration (e.g., left arm), immunization type, product, lot number, manufacturer, Vaccine Information Statement date, and quantity of vaccine/dose size.

Evaluation Criteria

EMR Records the following vaccine administration information:

| | |
|---|--|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source (Administration Notes) | New immunization record (NIP001 00) |
| Value/Text for Vaccine Type | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161), FLUZONE QUADRIVALENT (NDC 49281-0514-25) |
| Date/Time of Start of Administration | Current Date |
| Vaccine Administered | Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161), FLUZONE QUADRIVALENT (NDC 49281-0514-25) |
| Administered Amount (of Vaccine) | 0.25 |
| Administered Units (of Measure) | mL |
| Administering Provider | Sandra Molina |
| Administered-at Location | 400 Shoreline Drive, Stamford Connecticut 06901 |
| Lot Number | D8043IN8855 |
| Substance Expiration Date | 8/25/2015 |
| Substance Manufacturer Name | Sanofi Pasteur (MVX PMC) |
| Completion Status | CP |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) |
| Administration Site | Left Thigh (HL7 LT) |
| VFC Eligibility | No |

Notes for Testers

No Note



3.3. Mariela Gonzales Morales, Enter Orders and Immunizations

Orders and Immunization events, non-administrations, and alerts presented for current visit.

Test Story

Description

No Description

Comments

No Comments

Pre Condition

No PreCondition

Post Condition

No PostCondition

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

3.3.1. Enters a deferral for the vaccines due

Test Step Type: SUT_MANUAL

Enters a deferral for vaccines due (Hepatitis B, DTaP, Hib, Pneumococcal conjugate (PCV13) and Rotavirus) due to medical reason, indicating low grade fever, and defers for 1 month.

Test Story

Description

The physician accesses the record for Mariela Gonzales Morales and:
• Enters a deferral for the vaccines due (Hepatitis B, DTaP, Hib, Pneumococcal conjugate (PCV13) and Rotavirus) due to medical reason, indicating low grade fever, and defers for 1 month

Comments

No Comment

Pre Condition

Prior Immunization History loaded and reconciled from the Immunization Registry. Vaccine forecast is available in the EMR indicating 5 vaccines are due: Hepatitis B, DTaP, Hib, Pneumococcal conjugate (PCV13) and Rotavirus

Post Condition

Vaccine deferral is recorded indicating the medical reason of low grade fever

Test Objectives

Record Vaccine Administration Deferral: The EHR or other clinical software system allows a user to enter a reason or reasons why a specific immunization was not given to a patient (e.g., due to contraindication, refusal, etc.). The system also stores that information in a structured way so it can be reported and analyzed as needed.

Evaluation Criteria

EMR Records the following vaccine administration information:

| | |
|--|---|
| Entered BY | Sandra Molina |
| Ordering Provider | Frank Smith |
| Entering Organization | Shoreline Pediatrics |
| Vaccine Event information source | New immunization record (NIP001 00) hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) pneumococcal conjugate vaccine, 13 valent (CVX 133) rotavirus, live, monovalent vaccine (CVX 119) |
| Value/Text for Vaccine Type: | Current Date contraindication of fever |
| Date/Time Vaccine not administered was recorded | Current Date |
| Alert | |
| Substance/Treatment Deferral Start Date: Vaccination contraindication/precaution effective date (30946-8 LOINC) | Current Date |
| Substance/Treatment Deferral End Date/Vaccination temporary contraindication/precaution expiration date (30944-3 LOINC): | Current Date +30 Days |
| Substance/Treatment Deferral Contraindication: Vaccination contraindication/precaution (30945-0 LOINC): | current fever with moderate-to-severe illness (PHVS_VaccinationContraindication_IIS - VXC23) |
| Completion Status: | NA |
| Date/Time Vaccine Deferral was recorded: | Current Date |

Notes for Testers

No Note

4. Transmit Immunization Report

This test will consist of generating a Vaccine Update (VXU-Z22) report to the registry for three of the test patients, including updates for vaccines not given. NOTE: There is no Immunization Report in this test plan for Juana Maria Gonzales.

4.1. Juana Mariana Gonzales Transmit Immunization Report

Send the Immunization Report to the Immunization Registry (VXU/Z22) for Juana Mariana Gonzales.

Test Story

Description

Following the vaccinations given during the visit, the EMR transmits an Immunization report to the Immunization Registry using the VXU/Z22. The Vaccination report includes all newly administered vaccines. The report should include vaccines incorrectly recorded in the IIS. The report MAY send the immunizations that the EMR imported from the IIS.

Comments

The Report must include all newly administered vaccines in any order. the report may also include the corrected information where the EMR has different information than the IIS, and may also include the information imported from the IIS.

Pre Condition

The vaccines for the visit have been administered.

Post Condition

No PostCondition

Test Objectives

Transmit Standard Patient Immunization History Report: The EHR or other clinical software system directly or indirectly through an intermediary creates and transmits a report of a patient's immunization history to public health immunization registries.

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

4.1.1. Transmit the immunization report to the Immunization Registry

Test Step Type: SUT_INITIATOR

The EMR send the Immunization Report to the Immunization Registry (VXU/Z22) for updated vaccination information from the visit. This includes all newly administered vaccines and may include historical information updated in the EMR during the visit.

Test Story

Description

Following the vaccinations given during the visit, the EMR transmits an Immunization report to the Immunization Registry using the VXU/Z22. The Vaccination report includes all newly administered vaccines. The report should include vaccines incorrectly recorded in the IIS. The report MAY send the immunizations that the EMR imported from the IIS.

Comments

The Report must include all newly administered vaccines in any order. the report may also include the corrected information where the EMR has different information than the IIS, and may also include the information imported from the IIS.

Pre Condition

The vaccines for the visit have been administered.

Post Condition

The Immunization Report has been transmitted to the IIS using a valid Z22 VXU in accordance with the test data correctly and without omission.

Test Objectives

Transmit Standard Patient Immunization History Report: The EHR or other clinical software system directly or indirectly through an intermediary creates and transmits a report of a patient's immunization history to public health immunization registries.

Evaluation Criteria

The VXU/Z22 message passes validation using the NIST Immunization VXU Validation Tool (Z22) (context-free). The content of the message correctly reflects the test data (context-based) in accordance with the Test Data Specification and the Message Content.

Notes for Testers

No Note

Message Contents

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 | | |
| 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].3 | Check Digit Scheme | | |
| 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].3 | Check Digit Scheme | | |
| 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 | Gonzales | Value-Test Case Fixed |
| PID-5.1.2 | Own Surname Prefix | | |
| PID-5.1.3 | Own Surname | | |
| PID-5.1.4 | Surname Prefix From Partner/Spouse | | |
| PID-5.1.5 | Surname From Partner/Spouse | | |
| PID-5.2 | Given Name | Juana | Value-Test Case Fixed |
| PID-5.3 | Second and Further Given Names or Initials Thereof | Mariana | Value-Test Case Fixed |
| PID-5.7 | Name Type Code | L | Value-Test Case Fixed |
| PID-6 | Mother's Maiden Name | | |
| PID-6.1 | Family Name | | |
| PID-6.1.1 | Surname | Acosta | Value-Test Case Fixed |
| PID-6.1.2 | Own Surname Prefix | | |
| PID-6.1.3 | Own Surname | | |
| PID-6.1.4 | Surname Prefix From Partner/Spouse | | |
| PID-6.1.5 | Surname From Partner/Spouse | | |
| PID-6.7 | Name Type Code | M | Value-Test Case Fixed |
| PID-7 | Date/Time of Birth | | |
| PID-7.1 | Time | 200912231105 | Value-Test Case Fixed |
| PID-8 | Administrative Sex | F | Value-Test Case Fixed |
| PID-10 | Race | | |
| PID-10.1 | Identifier | 2131-1 | Value-Test Case Fixed |
| PID-10.2 | Text | Other Race | Value-Test Case Fixed |
| PID-10.3 | Name of Coding System | HL70005 | Value-Test Case Fixed |
| PID-10.5 | Alternate Text | | |
| PID-10.6 | Name of Alternate Coding System | | |
| PID-11[1] | Patient Address | | |
| PID-11[1].1 | Street Address | | |
| PID-11[1].1.1 | Street or Mailing Address | 4345 Standish Way | Value-Test Case Fixed |
| PID-11[1].1.2 | Street Name | | |
| PID-11[1].1.3 | Dwelling Number | | |
| PID-11[1].2 | Other Designation | | |
| PID-11[1].3 | City | Stamford | Value-Test Case Fixed |
| PID-11[1].4 | State or Province | CT | Value-Test Case Fixed |
| PID-11[1].5 | Zip or Postal Code | 06903 | Value-Test Case Fixed |
| PID-11[1].6 | Country | USA | Value-Test Case Fixed |
| PID-11[1].7 | Address Type | L | Value-Test Case Fixed |
| PID-11[2] | Patient Address | | |
| PID-11[2].1 | Street Address | | |
| PID-11[2].1.1 | Street or Mailing Address | 325 Shoreline Drive | |
| PID-11[2].1.2 | Street Name | | |
| PID-11[2].1.3 | Dwelling Number | | |
| PID-11[2].2 | Other Designation | | |
| PID-11[2].3 | City | Stamford | |
| PID-11[2].4 | State or Province | CT | Value-Test Case Fixed |
| PID-11[2].5 | Zip or Postal Code | 06901 | |
| PID-11[2].6 | Country | | |
| PID-11[2].7 | Address Type | BDL | Value-Test Case Fixed |
| PID-13 | Phone Number - Home | | |
| PID-13.2 | Telecommunication Use Code | PRN | Value-Test Case Fixed |
| PID-13.3 | Telecommunication Equipment Type | PH | Value-Test Case Fixed |
| PID-13.4 | Email Address | | |
| PID-13.6 | Area/City Code | 203 | Value-Test Case Fixed |
| PID-13.7 | Local Number | 5551212 | Value-Test Case Fixed |
| PID-22 | Ethnic Group | | |
| PID-22.1 | Identifier | 2135-2 | Value-Test Case Fixed |
| PID-22.2 | Text | Hispanic or Latino | Value-Test Case Fixed |
| PID-22.3 | Name of Coding System | CDCREC | Value-Test Case Fixed |
| PID-22.5 | Alternate Text | | |
| PID-22.6 | Name of Alternate Coding System | | |
| 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

| 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 | |
| PD1-11.5 | Alternate Text | | |
| PD1-11.6 | Name of Alternate Coding System | | |
| 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

| Location | Data Element | Data | Categorization |
|-----------|--|-------------------|-----------------------|
| NK1-1 | Set ID - NK1 | 1 | |
| NK1-2 | Name | | |
| NK1-2.1 | Family Name | | |
| NK1-2.1.1 | Surname | Gonzales | |
| NK1-2.1.2 | Own Surname Prefix | | |
| NK1-2.1.3 | Own Surname | | |
| NK1-2.1.4 | Surname Prefix From Partner/Spouse | | |
| NK1-2.1.5 | Surname From Partner/Spouse | | |
| NK1-2.2 | Given Name | Joanna | Value-Test Case Fixed |
| NK1-2.3 | Second and Further Given Names or Initials Thereof | Merida | Value-Test Case Fixed |
| NK1-2.7 | Name Type Code | L | Value-Test Case Fixed |
| NK1-3 | Relationship | | |
| NK1-3.1 | Identifier | GRP | Value-Test Case Fixed |
| NK1-3.2 | Text | Grandparent | Value-Test Case Fixed |
| NK1-3.3 | Name of Coding System | HL70063 | Value-Test Case Fixed |
| NK1-3.5 | Alternate Text | | |
| NK1-3.6 | Name of Alternate Coding System | | |
| NK1-4 | Address | | |
| NK1-4.1 | Street Address | | |
| NK1-4.1.1 | Street or Mailing Address | 4345 Standish Way | Value-Test Case Fixed |
| NK1-4.1.2 | Street Name | | |
| NK1-4.1.3 | Dwelling Number | | |
| NK1-4.2 | Other Designation | | |
| NK1-4.3 | City | Stamford | Value-Test Case Fixed |
| NK1-4.4 | State or Province | CT | Value-Test Case Fixed |
| NK1-4.5 | Zip or Postal Code | 06901 | Value-Test Case Fixed |
| NK1-4.6 | Country | | |
| NK1-4.7 | Address Type | L | Value-Test Case Fixed |
| NK1-5 | Phone Number | | |
| NK1-5.2 | Telecommunication Use Code | PRN | Value-Test Case Fixed |
| NK1-5.3 | Telecommunication Equipment Type | PH | Value-Test Case Fixed |
| NK1-5.4 | Email Address | | |
| NK1-5.6 | Area/City Code | 203 | Value-Test Case Fixed |
| NK1-5.7 | Local Number | 5551212 | Value-Test Case Fixed |

ORC[*]**ORC : Common Order**

| 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-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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 | Value-Test Case Fixed |
| ORC-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Ricci | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Gina | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | Value-Test Case Fixed |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Value-Test Case Fixed |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Frank | Value-Test Case Fixed |
| 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 | Value-Test Case Fixed |
| ORC-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | Value-Test Case Fixed |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | F | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | F | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | F | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | Value-Test Case Fixed |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Value-Test Case Fixed |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Frank | Value-Test Case Fixed |
| 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 | Value-Test Case Fixed |
| ORC-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | Value-Test Case Fixed |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

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 | 20091123 | |
| 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 | |
| RXA-5.5 | Alternate Text | ENGERIX-B | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Sirtis | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100115 | |
| 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-5.5 | Alternate Text | ENGERIX-B | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 01 | |
| RXA-9.2 | Text | Historical Immunization | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Molina | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Sandra | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6352FK1 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101001 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20101030 | |
| 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 | |
| RXA-5.5 | Alternate Text | ENGERIX-B | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6352FK24 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120831 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 107 | |
| RXA-5.2 | Text | diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS2341 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20111130 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100323 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS2433 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110904 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100522 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS3255 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101201 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20110221 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS249 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110301 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20140831 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 02 | |
| RXA-9.2 | Text | Historical information - from other provider | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Casera | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Linda | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D643QS8243 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20140901 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Haemophilus influenzae type b vaccine, PRP-OMP conjugate | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M54K9245 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100324 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100323 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Haemophilus influenzae type b vaccine, PRP-OMP conjugate | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M55K3342 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101030 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100522 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Haemophilus influenzae type b vaccine, PRP-OMP conjugate | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M75K4566 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100523 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20110221 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Haemophilus influenzae type b vaccine, PRP-OMP conjugate | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M53K5534 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110222 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | poliovirus vaccine, inactivated | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | IPOV | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D333PV2431 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101004 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100323 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | poliovirus vaccine, inactivated | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | IPOV | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D333PV4344 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100323 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20110221 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | poliovirus vaccine, inactivated | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | IPOL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 02 | |
| RXA-9.2 | Text | Historical information - from other provider | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Casera | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Linda | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D335PV9644 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110222 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20150519 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | poliovirus vaccine, inactivated | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | | |
| RXA-5.6 | Name of Alternate Coding System | | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | 00 | |
| RXA-18.2 | Text | Parental decision | |
| RXA-18.3 | Name of Coding System | NIP002 | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | RE | |
| 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 | 20100121 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | pneumococcal conjugate vaccine, 13 valent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P243V3281 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100130 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100323 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | pneumococcal conjugate vaccine, 13 valent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P343V8321 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100330 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100522 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | pneumococcal conjugate vaccine, 13 valent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P853V2164 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100830 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20110221 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | pneumococcal conjugate vaccine, 13 valent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P853V58532 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110418 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 119 | |
| RXA-5.2 | Text | rotavirus, live, monovalent vaccine | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ROTARIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RV533 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100215 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100323 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 119 | |
| RXA-5.2 | Text | rotavirus, live, monovalent vaccine | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ROTARIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RV932 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100510 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100925 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza, injectable, quadrivalent, preservative free, pediatric | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D8043IN8734 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110312 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi PasteurGlaxoSmithKline Biologicals SA | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20101027 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza, injectable, quadrivalent, preservative free, pediatric | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D8043IN8734 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110312 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi PasteurGlaxoSmithKline Biologicals SA | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20111002 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza, injectable, quadrivalent, preservative free, pediatric | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D9334IN9333 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120522 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi PasteurGlaxoSmithKline Biologicals SA | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20131015 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza, injectable, quadrivalent, preservative free, pediatric | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 03 | |
| RXA-9.2 | Text | Historical information - from parents written record | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Ricci | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Gina | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 8L4B3423 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20140701 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MED | |
| RXA-17.2 | Text | MedImmune, LLC | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 149 | Value-Test Case Fixed |
| RXA-5.2 | Text | influenza, live, intranasal, quadrivalent | Value-Test Case Fixed |
| RXA-5.3 | Name of Coding System | CVX | Value-Test Case Fixed |
| RXA-5.5 | Alternate Text | FluMist Quadrivalent | Value-Test Case Fixed |
| RXA-5.6 | Name of Alternate Coding System | NDC | Value-Test Case Fixed |
| RXA-6 | Administered Amount | 0.2 | Value-Test Case Fixed |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | mL | Value-Test Case Fixed |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | UCUM | Value-Test Case Fixed |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 00 | Value-Test Case Fixed |
| RXA-9.2 | Text | New immunization record | Value-Test Case Fixed |
| RXA-9.3 | Name of Coding System | NIP001 | Value-Test Case Fixed |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Molina | Value-Test Case Fixed |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 8L4B3521 | Value-Test Case Fixed |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20150815 | Value-Test Case Fixed |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MED | Value-Test Case Fixed |
| RXA-17.2 | Text | MedImmune,LLC | Value-Test Case Fixed |
| RXA-17.3 | Name of Coding System | MVX | Value-Test Case Fixed |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | Value-Test Case Fixed |
| 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 | 20121104 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 149 | |
| RXA-5.2 | Text | influenza, live, intranasal, quadrivalent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FluMist Quadrivalent | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D9553IN2243 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120430 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi PasteurGlaxoSmithKline Biologicals SA | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20111123 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 83 | |
| RXA-5.2 | Text | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | HAVRIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RT33 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120124 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120523 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 83 | |
| RXA-5.2 | Text | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | HAVRIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RT48 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120911 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi PasteurGlaxoSmithKline Biologicals SA | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20101023 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 94 | |
| RXA-5.2 | Text | measles, mumps, rubella, and varicella virus vaccine | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ProQuad | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 01 | |
| RXA-9.2 | Text | historical | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7W27V7491 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101215 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20121122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 94 | |
| RXA-5.2 | Text | measles, mumps, rubella, and varicella virus vaccine | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ProQuad | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7W87V3452 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20130413 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 94 | Value-Test Case Fixed |
| RXA-5.2 | Text | measles, mumps, rubella, and varicella virus vaccine | Value-Test Case Fixed |
| RXA-5.3 | Name of Coding System | CVX | Value-Test Case Fixed |
| RXA-5.5 | Alternate Text | ProQuad | Value-Test Case Fixed |
| RXA-5.6 | Name of Alternate Coding System | NDC | Value-Test Case Fixed |
| RXA-6 | Administered Amount | 0.5 | Value-Test Case Fixed |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | mL | Value-Test Case Fixed |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | UCUM | Value-Test Case Fixed |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 00 | Value-Test Case Fixed |
| RXA-9.2 | Text | New immunization record | Value-Test Case Fixed |
| RXA-9.3 | Name of Coding System | NIP001 | Value-Test Case Fixed |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Molina | Value-Test Case Fixed |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7W87V3687 | Value-Test Case Fixed |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20150715 | Value-Test Case Fixed |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | Value-Test Case Fixed |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | Value-Test Case Fixed |
| RXA-17.3 | Name of Coding System | MVX | Value-Test Case Fixed |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | Value-Test Case Fixed |
| RXA-21 | Action Code - RXA | A | |

RXR[*]**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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|-----------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38284 | |
| RXR-1.2 | Text | Nasal | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Nasal | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | BN | |
| RXR-2.2 | Text | Bilateral Nares | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|-----------------|-----------------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38284 | Value-Test Case Fixed |
| RXR-1.2 | Text | Nasal | Value-Test Case Fixed |
| RXR-1.3 | Name of Coding System | NCIT | Value-Test Case Fixed |
| RXR-1.5 | Alternate Text | Nasal | Value-Test Case Fixed |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | Value-Test Case Fixed |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | BN | |
| RXR-2.2 | Text | Bilateral Nares | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RD | |
| RXR-2.2 | Text | Right Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | Subcutaneous | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | Subcutaneous | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|-----------------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | Value-Test Case Fixed |
| RXR-1.2 | Text | Subcutaneous | Value-Test Case Fixed |
| RXR-1.3 | Name of Coding System | NCIT | Value-Test Case Fixed |
| RXR-1.5 | Alternate Text | Subcutaneous | Value-Test Case Fixed |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | Value-Test Case Fixed |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | Value-Test Case Fixed |
| RXR-2.2 | Text | Left Deltoid | Value-Test Case Fixed |
| RXR-2.3 | Name of Coding System | HL70163 | Value-Test Case Fixed |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

OBX[*]**OBX : Observation/Result**

| Location | Data Element | Data | Categorization |
|-----------------|---------------------------------|--|-----------------------|
| OBX-1 | Set ID - OBX | 21 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 31044-1 | |
| OBX-3.2 | Text | Reaction | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | VXC12 | |
| OBX-5.2 | Text | fever of >40.5C (105F) within 48 hours of dose | |
| OBX-5.3 | Name of Coding System | CDCPHINVS | |
| OBX-5.5 | Alternate Text | | |
| OBX-5.6 | Name of Alternate Coding System | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20100522 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate 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 | 29768-9 | Value-Test Case Fixed |
| OBX-3.2 | Text | VIS Publication Date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20140819 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|-----------------------|-----------------------|
| OBX-1 | Set ID - OBX | 3 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 29769-7 | Value-Test Case Fixed |
| OBX-3.2 | Text | VIS Presentation Date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|---------------------------|-----------------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 64994-7 | Value-Test Case Fixed |
| OBX-3.2 | Text | vaccine fund pgm elig cat | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | V01 | |
| OBX-5.2 | Text | Not VFC elig | |
| OBX-5.3 | Name of Coding System | HL70064 | |
| OBX-5.5 | Alternate Text | | |
| OBX-5.6 | Name of Alternate Coding System | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate 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 | 29768-9 | Value-Test Case Fixed |
| OBX-3.2 | Text | VIS Publication Date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20100521 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|-----------------------|-----------------------|
| OBX-1 | Set ID - OBX | 3 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 29769-7 | Value-Test Case Fixed |
| OBX-3.2 | Text | VIS Presentation Date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|---------------------------|-----------------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 64994-7 | Value-Test Case Fixed |
| OBX-3.2 | Text | vaccine fund pgm elig cat | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | V01 | |
| OBX-5.2 | Text | Not VFC elig | |
| OBX-5.3 | Name of Coding System | HL70064 | |
| OBX-5.5 | Alternate Text | | |
| OBX-5.6 | Name of Alternate Coding System | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

Test Data Specification

Patient Information

| Element | Data |
|----------------------|---|
| Patient Name | Juana Mariana Gonzales |
| Mother's Maiden Name | Maria Acosta |
| ID Number | 123456 987633 |
| Date/Time of Birth | 12/23/2009 11:05 |
| Administrative Sex | Female |
| Patient Address 1 | 4345 Standish Way Stamford CT 06903 USA |
| Patient Address 2 | 325 Shorline Drive Stamford CT 06901 |
| Local Number | (203)555-1212 |
| Race1 | Other Race |
| Ethnic Group | Hispanic or Latino |
| Birth Order | |

Immunization Registry Information

| Element | Data |
|---|------------------------------|
| Immunization Registry Status | A |
| Immunization Registry Status Effective Date | 07/01/2012 |
| Publicity Code | Reminder/Recall - any method |
| Publicity Code Effective Date | 07/01/2012 |
| Protection Indicator | |
| Protection Indicator Effective Date | |

Guardian or Responsible Party

| Element | Data |
|--------------|-------------------------------------|
| Name | Joanna Merida Gonzales |
| Relationship | Grandparent |
| Address1 | 4345 Standish Way Stamford CT 06901 |
| Phone Number | (203)555-1212 |

Vaccine Administration Information**Vaccine Administration Information**

| Element | Data |
|------------------------------------|---|
| Administered Code | hepatitis B vaccine, pediatric or pediatric/adolescent dosage |
| Date/Time Start of Administration | 11/23/2009 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | Lisa Sirtis |
| Substance Lot Number | 6332FK33 |
| Substance Expiration Date | 12/14/2010 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Shoreline Hospital |
| Entered By | Lisa Sirtis |
| Ordered By | Jane Carter |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | hepatitis B vaccine, unspecified formulation |
| Date/Time Start of Administration | 01/15/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical Immunization |
| Administering Provider | Sandra Molina |
| Substance Lot Number | 6352FK1 |
| Substance Expiration Date | 10/01/2010 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | hepatitis B vaccine, pediatric or pediatric/adolescent dosage |
| Date/Time Start of Administration | 10/30/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 6352FK24 |
| Substance Expiration Date | 08/31/2012 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified |
| Date/Time Start of Administration | 01/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D409QS2341 |
| Substance Expiration Date | 11/30/2011 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis |
| Date/Time Start of Administration | 03/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D409QS2433 |
| Substance Expiration Date | 09/04/2011 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis |
| Date/Time Start of Administration | 05/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D409QS3255 |
| Substance Expiration Date | 12/01/2010 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

| Element | Data |
|----------|--|
| Reaction | fever of >40.5C (105F) within 48 hours of dose |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis |
| Date/Time Start of Administration | 02/21/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D409QS249 |
| Substance Expiration Date | 03/01/2011 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis |
| Date/Time Start of Administration | 08/31/2014 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from other provider |
| Administering Provider | Linda Casera |
| Substance Lot Number | D643QS8243 |
| Substance Expiration Date | 09/01/2014 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | J Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Haemophilus influenzae type b vaccine, PRP-OMP conjugate |
| Date/Time Start of Administration | 01/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 7M54K9245 |
| Substance Expiration Date | 03/24/2010 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Haemophilus influenzae type b vaccine, PRP-OMP conjugate |
| Date/Time Start of Administration | 03/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 7M55K3342 |
| Substance Expiration Date | 10/30/2010 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Haemophilus influenzae type b vaccine, PRP-OMP conjugate |
| Date/Time Start of Administration | 05/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 7M75K4566 |
| Substance Expiration Date | 05/23/2010 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Haemophilus influenzae type b vaccine, PRP-OMP conjugate |
| Date/Time Start of Administration | 02/21/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 7M53K5534 |
| Substance Expiration Date | 02/22/2011 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | poliovirus vaccine, inactivated |
| Date/Time Start of Administration | 01/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D333PV2431 |
| Substance Expiration Date | 10/04/2010 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | poliovirus vaccine, inactivated |
| Date/Time Start of Administration | 03/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D333PV4344 |
| Substance Expiration Date | 03/23/2010 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | poliovirus vaccine, inactivated |
| Date/Time Start of Administration | 02/21/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from other provider |
| Administering Provider | Linda Casera |
| Substance Lot Number | D335PV9644 |
| Substance Expiration Date | 02/22/2011 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Deltoid |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | J Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---------------------------------|
| Administered Code | poliovirus vaccine, inactivated |
| Date/Time Start of Administration | 05/19/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | Parental decision |
| Completion Status | RE |
| Action Code | Add |
| Route | |
| Administration Site | |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | pneumococcal conjugate vaccine, 13 valent |
| Date/Time Start of Administration | 01/21/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | P243V3281 |
| Substance Expiration Date | 01/30/2010 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | pneumococcal conjugate vaccine, 13 valent |
| Date/Time Start of Administration | 03/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | P343V8321 |
| Substance Expiration Date | 03/30/2010 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | pneumococcal conjugate vaccine, 13 valent |
| Date/Time Start of Administration | 05/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | P853V2164 |
| Substance Expiration Date | 08/30/2010 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | pneumococcal conjugate vaccine, 13 valent |
| Date/Time Start of Administration | 02/21/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | P853V58532 |
| Substance Expiration Date | 04/18/2011 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | rotavirus, live, monovalent vaccine |
| Date/Time Start of Administration | 01/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 6359RV533 |
| Substance Expiration Date | 02/15/2010 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | rotavirus, live, monovalent vaccine |
| Date/Time Start of Administration | 03/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 6359RV932 |
| Substance Expiration Date | 05/10/2010 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Influenza, injectable,quadrivalent, preservative free, pediatric |
| Date/Time Start of Administration | 09/25/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D8043IN8734 |
| Substance Expiration Date | 03/12/2011 |
| Substance Manufacturer Name | Sanofi PasteurGlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Influenza, injectable,quadrivalent, preservative free, pediatric |
| Date/Time Start of Administration | 10/27/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D8043IN8734 |
| Substance Expiration Date | 03/12/2011 |
| Substance Manufacturer Name | Sanofi PasteurGlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Influenza, injectable,quadrivalent, preservative free, pediatric |
| Date/Time Start of Administration | 10/02/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D9334IN9333 |
| Substance Expiration Date | 05/22/2012 |
| Substance Manufacturer Name | Sanofi PasteurGlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Influenza, injectable,quadrivalent, preservative free, pediatric |
| Date/Time Start of Administration | 10/15/2013 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from parents written record |
| Administering Provider | Gina Ricci |
| Substance Lot Number | 8L4B3423 |
| Substance Expiration Date | 07/01/2014 |
| Substance Manufacturer Name | MedImmune, LLC |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | Nasal |
| Administration Site | Bilateral Nares |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Gina Ricci |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | influenza, live, intranasal, quadrivalent |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 0.2 |
| Administered Units | |
| Administration Notes | New immunization record |
| Administering Provider | Sandra Molina |
| Substance Lot Number | 8L4B3521 |
| Substance Expiration Date | 08/15/2015 |
| Substance Manufacturer Name | MedImmune,LLC |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | Nasal |
| Administration Site | Bilateral Nares |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

| Element | Data |
|---------------------------|--------------|
| VIS Publication Date | 08/19/2014 |
| VIS Presentation Date | 07/15/2015 |
| vaccine fund pgm elig cat | Not VFC elig |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | influenza, live, intranasal, quadrivalent |
| Date/Time Start of Administration | 11/04/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D9553IN2243 |
| Substance Expiration Date | 04/30/2012 |
| Substance Manufacturer Name | Sanofi PasteurGlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule |
| Date/Time Start of Administration | 11/23/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 6359RT33 |
| Substance Expiration Date | 01/24/2012 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule |
| Date/Time Start of Administration | 05/23/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 6359RT48 |
| Substance Expiration Date | 09/11/2012 |
| Substance Manufacturer Name | Sanofi PasteurGlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | F Smith |

Vaccine Administration Information

| Element | Data |
|-----------------------------------|--|
| Administered Code | measles, mumps, rubella, and varicella virus vaccine |
| Date/Time Start of Administration | 10/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | historical |

| | |
|------------------------------------|----------------------------|
| Administering Provider | J Martinez |
| Substance Lot Number | 7W87V491 |
| Substance Expiration Date | 12/15/2010 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | Subcutaneous |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | F Smith |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | measles, mumps, rubella, and varicella virus vaccine |
| Date/Time Start of Administration | 11/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 7W87V3452 |
| Substance Expiration Date | 04/13/2013 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | Subcutaneous |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | F Smith |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | measles, mumps, rubella, and varicella virus vaccine |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 0.5 |
| Administered Units | |
| Administration Notes | New immunization record |
| Administering Provider | Sandra Molina |
| Substance Lot Number | 7W87V3687 |
| Substance Expiration Date | 07/15/2015 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | Subcutaneous |
| Administration Site | Left Deltoid |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

| Element | Data |
|---------------------------|--------------|
| VIS Publication Date | 05/21/2010 |
| VIS Presentation Date | 07/15/2015 |
| vaccine fund pgm elig cat | Not VFC elig |

4.1.2. Record an adverse reaction

Test Step Type: SUT_MANUAL

The Provider records in the EMR an adverse reaction of persistent, inconsolable crying lasting > 3 hours within 48 hours of dose.

Test Story

Description

Following the vaccine administration, the patient's mother reports that the patient that evening had persistent, inconsolable crying lasting > 3 hours.

Comments

No Comments

Pre Condition

The vaccinations for the visit have been administered.

Post Condition

The adverse reaction to the MMRV of persistent, inconsolable crying lasting > 3 hours within 48 hours of dose is recorded in the EMR.

Test Objectives

Identify Adverse Event: The EHR or other clinical software system enables capture of structured data regarding adverse events.

Evaluation Criteria

Verify that vendor can record the adverse reaction of persistent, inconsolable crying lasting > 3 hours within 48 hours of dose correctly and without omission

Notes for Testers

No Note

4.1.3. Transmit the updated vaccination report with adverse reaction to the registry

Test Step Type: SUT_INITIATOR

The EMR generates a Z22 Send Unsolicited Immunization Update Using a VXU correctly and without omission according to supplied test data.

Test Story

Description

The adverse reaction to the MMRV of persistent, inconsolable crying lasting > 3 hours within 48 hours of dose is reported to the Immunization Registry using a Z22/VXU message.

Comments

No Comments

Pre Condition

An adverse reaction to the MMRV of persistent, inconsolable crying lasting > 3 hours within 48 hours of dose is recorded in the EMR.

Post Condition

The adverse reaction has been transmitted to the IIS.

Test Objectives

Transmit Standard Patient Immunization History Report: The EHR or other clinical software system directly or indirectly through an intermediary creates and transmits a report of a patient's immunization history to public health immunization registries.

Evaluation Criteria

The VXU/Z22 message passes validation using the NIST Immunization VXU Validation Tool (Z22) (context-free). The content of the message correctly reflects the test data (context-based) in accordance with the Test Data Specification and the Message Content.

Notes for Testers

No Note

Message Contents

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 | | |
| 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].3 | Check Digit Scheme | | |
| 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].3 | Check Digit Scheme | | |
| 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 | Gonzales | Value-Test Case Fixed |
| PID-5.1.2 | Own Surname Prefix | | |
| PID-5.1.3 | Own Surname | | |
| PID-5.1.4 | Surname Prefix From Partner/Spouse | | |
| PID-5.1.5 | Surname From Partner/Spouse | | |
| PID-5.2 | Given Name | Juana | Value-Test Case Fixed |
| PID-5.3 | Second and Further Given Names or Initials Thereof | Mariana | Value-Test Case Fixed |
| PID-5.7 | Name Type Code | L | Value-Test Case Fixed |
| PID-6 | Mother's Maiden Name | | |
| PID-6.1 | Family Name | | |
| PID-6.1.1 | Surname | Acosta | Value-Test Case Fixed |
| PID-6.1.2 | Own Surname Prefix | | |
| PID-6.1.3 | Own Surname | | |
| PID-6.1.4 | Surname Prefix From Partner/Spouse | | |
| PID-6.1.5 | Surname From Partner/Spouse | | |
| PID-6.7 | Name Type Code | M | Value-Test Case Fixed |
| PID-7 | Date/Time of Birth | | |
| PID-7.1 | Time | 200912231105 | Value-Test Case Fixed |
| PID-8 | Administrative Sex | F | Value-Test Case Fixed |
| PID-10 | Race | | |
| PID-10.1 | Identifier | 2131-1 | Value-Test Case Fixed |
| PID-10.2 | Text | Other Race | Value-Test Case Fixed |
| PID-10.3 | Name of Coding System | HL70005 | Value-Test Case Fixed |
| PID-10.5 | Alternate Text | | |
| PID-10.6 | Name of Alternate Coding System | | |
| PID-11[1] | Patient Address | | |
| PID-11[1].1 | Street Address | | |
| PID-11[1].1.1 | Street or Mailing Address | 4345 Standish Way | Value-Test Case Fixed |
| PID-11[1].1.2 | Street Name | | |
| PID-11[1].1.3 | Dwelling Number | | |
| PID-11[1].2 | Other Designation | | |
| PID-11[1].3 | City | Stamford | Value-Test Case Fixed |
| PID-11[1].4 | State or Province | CT | Value-Test Case Fixed |
| PID-11[1].5 | Zip or Postal Code | 06903 | Value-Test Case Fixed |
| PID-11[1].6 | Country | USA | Value-Test Case Fixed |
| PID-11[1].7 | Address Type | L | Value-Test Case Fixed |
| PID-11[2] | Patient Address | | |
| PID-11[2].1 | Street Address | | |
| PID-11[2].1.1 | Street or Mailing Address | 325 Shoreline Drive | |
| PID-11[2].1.2 | Street Name | | |
| PID-11[2].1.3 | Dwelling Number | | |
| PID-11[2].2 | Other Designation | | |
| PID-11[2].3 | City | Stamford | |
| PID-11[2].4 | State or Province | CT | Value-Test Case Fixed |
| PID-11[2].5 | Zip or Postal Code | 06901 | |
| PID-11[2].6 | Country | | |
| PID-11[2].7 | Address Type | BDL | Value-Test Case Fixed |
| PID-13 | Phone Number - Home | | |
| PID-13.2 | Telecommunication Use Code | PRN | Value-Test Case Fixed |
| PID-13.3 | Telecommunication Equipment Type | PH | Value-Test Case Fixed |
| PID-13.4 | Email Address | | |
| PID-13.6 | Area/City Code | 203 | Value-Test Case Fixed |
| PID-13.7 | Local Number | 5551212 | Value-Test Case Fixed |
| PID-22 | Ethnic Group | | |
| PID-22.1 | Identifier | 2135-2 | Value-Test Case Fixed |
| PID-22.2 | Text | Hispanic or Latino | Value-Test Case Fixed |
| PID-22.3 | Name of Coding System | CDCREC | Value-Test Case Fixed |
| PID-22.5 | Alternate Text | | |
| PID-22.6 | Name of Alternate Coding System | | |
| 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

| 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 | |
| PD1-11.5 | Alternate Text | | |
| PD1-11.6 | Name of Alternate Coding System | | |
| 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

| Location | Data Element | Data | Categorization |
|-----------|--|-------------------|-----------------------|
| NK1-1 | Set ID - NK1 | 1 | |
| NK1-2 | Name | | |
| NK1-2.1 | Family Name | | |
| NK1-2.1.1 | Surname | Gonzales | |
| NK1-2.1.2 | Own Surname Prefix | | |
| NK1-2.1.3 | Own Surname | | |
| NK1-2.1.4 | Surname Prefix From Partner/Spouse | | |
| NK1-2.1.5 | Surname From Partner/Spouse | | |
| NK1-2.2 | Given Name | Joanna | Value-Test Case Fixed |
| NK1-2.3 | Second and Further Given Names or Initials Thereof | Merida | Value-Test Case Fixed |
| NK1-2.7 | Name Type Code | L | Value-Test Case Fixed |
| NK1-3 | Relationship | | |
| NK1-3.1 | Identifier | GRP | Value-Test Case Fixed |
| NK1-3.2 | Text | Grandparent | Value-Test Case Fixed |
| NK1-3.3 | Name of Coding System | HL70063 | Value-Test Case Fixed |
| NK1-3.5 | Alternate Text | | |
| NK1-3.6 | Name of Alternate Coding System | | |
| NK1-4 | Address | | |
| NK1-4.1 | Street Address | | |
| NK1-4.1.1 | Street or Mailing Address | 4345 Standish Way | Value-Test Case Fixed |
| NK1-4.1.2 | Street Name | | |
| NK1-4.1.3 | Dwelling Number | | |
| NK1-4.2 | Other Designation | | |
| NK1-4.3 | City | Stamford | Value-Test Case Fixed |
| NK1-4.4 | State or Province | CT | Value-Test Case Fixed |
| NK1-4.5 | Zip or Postal Code | 06901 | Value-Test Case Fixed |
| NK1-4.6 | Country | | |
| NK1-4.7 | Address Type | L | Value-Test Case Fixed |
| NK1-5 | Phone Number | | |
| NK1-5.2 | Telecommunication Use Code | PRN | Value-Test Case Fixed |
| NK1-5.3 | Telecommunication Equipment Type | PH | Value-Test Case Fixed |
| NK1-5.4 | Email Address | | |
| NK1-5.6 | Area/City Code | 203 | Value-Test Case Fixed |
| NK1-5.7 | Local Number | 5551212 | Value-Test Case Fixed |

ORC[*]**ORC : Common Order**

| 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-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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 | Value-Test Case Fixed |
| ORC-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Ricci | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Gina | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Herrera | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Carlos | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | F | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | F | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | F | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | Value-Test Case Fixed |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Value-Test Case Fixed |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Frank | Value-Test Case Fixed |
| 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 | Value-Test Case Fixed |
| ORC-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | Value-Test Case Fixed |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

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 | 20091123 | |
| 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 | |
| RXA-5.5 | Alternate Text | ENGERIX-B | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Sirtis | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100115 | |
| 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-5.5 | Alternate Text | ENGERIX-B | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 01 | |
| RXA-9.2 | Text | Historical Immunization | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Molina | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Sandra | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6352FK1 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101001 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20101030 | |
| 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 | |
| RXA-5.5 | Alternate Text | ENGERIX-B | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6352FK24 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120831 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 107 | |
| RXA-5.2 | Text | diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS2341 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20111130 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100323 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS2433 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110904 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100522 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS3255 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101201 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20110221 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS249 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110301 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20140831 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 02 | |
| RXA-9.2 | Text | Historical information - from other provider | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Casera | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Linda | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D643QS8243 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20140901 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Haemophilus influenzae type b vaccine, PRP-OMP conjugate | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M54K9245 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100324 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100323 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Haemophilus influenzae type b vaccine, PRP-OMP conjugate | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M55K3342 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101030 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100522 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Haemophilus influenzae type b vaccine, PRP-OMP conjugate | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M75K4566 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100523 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20110221 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Haemophilus influenzae type b vaccine, PRP-OMP conjugate | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M53K5534 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110222 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | poliovirus vaccine, inactivated | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | IPOV | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D333PV2431 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101004 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100323 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | poliovirus vaccine, inactivated | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | IPOL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D333PV4344 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100323 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20110221 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | poliovirus vaccine, inactivated | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | IPOL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 02 | |
| RXA-9.2 | Text | Historical information - from other provider | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Casera | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Linda | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D335PV9644 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110222 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20150519 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | poliovirus vaccine, inactivated | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | | |
| RXA-5.6 | Name of Alternate Coding System | | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | 00 | |
| RXA-18.2 | Text | Parental decision | |
| RXA-18.3 | Name of Coding System | NIP002 | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | RE | |
| 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 | 20100121 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | pneumococcal conjugate vaccine, 13 valent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P243V3281 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100130 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100323 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | pneumococcal conjugate vaccine, 13 valent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P343V8321 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100330 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100522 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | pneumococcal conjugate vaccine, 13 valent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P853V2164 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100830 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20110221 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | pneumococcal conjugate vaccine, 13 valent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P853V58532 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110418 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 119 | |
| RXA-5.2 | Text | rotavirus, live, monovalent vaccine | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ROTARIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RV533 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100215 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100323 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 119 | |
| RXA-5.2 | Text | rotavirus, live, monovalent vaccine | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ROTARIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RV932 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20100510 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20100925 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza, injectable, quadrivalent, preservative free, pediatric | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D8043IN8734 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110312 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi PasteurGlaxoSmithKline Biologicals SA | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20101027 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza, injectable, quadrivalent, preservative free, pediatric | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D8043IN8734 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20110312 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi PasteurGlaxoSmithKline Biologicals SA | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20111002 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza, injectable, quadrivalent, preservative free, pediatric | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D9334IN9333 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120522 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi PasteurGlaxoSmithKline Biologicals SA | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20131015 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza, injectable, quadrivalent, preservative free, pediatric | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 03 | |
| RXA-9.2 | Text | Historical information - from parents written record | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Ricci | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Gina | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 8L4B3423 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20140701 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MED | |
| RXA-17.2 | Text | MedImmune, LLC | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 149 | |
| RXA-5.2 | Text | influenza, live, intranasal, quadrivalent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FluMist Quadrivalent | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| RXA-6 | Administered Amount | 0.2 | |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | mL | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | UCUM | |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 00 | |
| RXA-9.2 | Text | New immunization record | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Molina | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Sandra | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 8L4B3521 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20150815 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MED | |
| RXA-17.2 | Text | MedImmune,LLC | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20121104 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 149 | |
| RXA-5.2 | Text | influenza, live, intranasal, quadrivalent | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FluMist Quadrivalent | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D9553IN2243 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120430 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi PasteurGlaxoSmithKline Biologicals SA | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20111123 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 83 | |
| RXA-5.2 | Text | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | HAVRIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RT33 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120124 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120523 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 83 | |
| RXA-5.2 | Text | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | HAVRIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RT48 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120911 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi PasteurGlaxoSmithKline Biologicals SA | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20101023 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 94 | |
| RXA-5.2 | Text | measles, mumps, rubella, and varicella virus vaccine | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ProQuad | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 01 | |
| RXA-9.2 | Text | historical | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7W27V7491 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20101215 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20121122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 94 | |
| RXA-5.2 | Text | measles, mumps, rubella, and varicella virus vaccine | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ProQuad | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7W87V3452 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20130413 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 94 | Value-Test Case Fixed |
| RXA-5.2 | Text | measles, mumps, rubella, and varicella virus vaccine | Value-Test Case Fixed |
| RXA-5.3 | Name of Coding System | CVX | Value-Test Case Fixed |
| RXA-5.5 | Alternate Text | ProQuad | Value-Test Case Fixed |
| RXA-5.6 | Name of Alternate Coding System | NDC | Value-Test Case Fixed |
| RXA-6 | Administered Amount | 0.5 | Value-Test Case Fixed |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | mL | Value-Test Case Fixed |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | UCUM | Value-Test Case Fixed |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 00 | Value-Test Case Fixed |
| RXA-9.2 | Text | New immunization record | Value-Test Case Fixed |
| RXA-9.3 | Name of Coding System | NIP001 | Value-Test Case Fixed |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Molina | Value-Test Case Fixed |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7W87V3687 | Value-Test Case Fixed |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20150715 | Value-Test Case Fixed |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | Value-Test Case Fixed |
| RXA-17.2 | Text | Merck Sharp \T\ Dohme Corp | Value-Test Case Fixed |
| RXA-17.3 | Name of Coding System | MVX | Value-Test Case Fixed |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | Value-Test Case Fixed |
| RXA-21 | Action Code - RXA | A | |

RXR[*]**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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|-----------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38284 | |
| RXR-1.2 | Text | Nasal | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Nasal | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | BN | |
| RXR-2.2 | Text | Bilateral Nares | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|-----------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38284 | |
| RXR-1.2 | Text | Nasal | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Nasal | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | BN | |
| RXR-2.2 | Text | Bilateral Nares | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RD | |
| RXR-2.2 | Text | Right Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | Subcutaneous | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | |
| RXR-1.2 | Text | Subcutaneous | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | Subcutaneous | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|-----------------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C38299 | Value-Test Case Fixed |
| RXR-1.2 | Text | Subcutaneous | Value-Test Case Fixed |
| RXR-1.3 | Name of Coding System | NCIT | Value-Test Case Fixed |
| RXR-1.5 | Alternate Text | Subcutaneous | Value-Test Case Fixed |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | Value-Test Case Fixed |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | Value-Test Case Fixed |
| RXR-2.2 | Text | Left Deltoid | Value-Test Case Fixed |
| RXR-2.3 | Name of Coding System | HL70163 | Value-Test Case Fixed |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

OBX[*]**OBX : Observation/Result**

| Location | Data Element | Data | Categorization |
|-----------------|---------------------------------|--|-----------------------|
| OBX-1 | Set ID - OBX | 21 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 31044-1 | |
| OBX-3.2 | Text | Reaction | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | VXC12 | |
| OBX-5.2 | Text | fever of >40.5C (105F) within 48 hours of dose | |
| OBX-5.3 | Name of Coding System | CDCPHINVS | |
| OBX-5.5 | Alternate Text | | |
| OBX-5.6 | Name of Alternate Coding System | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20100522 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate 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 | 29768-9 | |
| OBX-3.2 | Text | VIS Publication Date | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20140819 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|-----------------------|----------------|
| OBX-1 | Set ID - OBX | 3 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 29769-7 | |
| OBX-3.2 | Text | VIS Presentation Date | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|---------------------------|----------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 64994-7 | |
| OBX-3.2 | Text | vaccine fund pgm elig cat | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | V01 | |
| OBX-5.2 | Text | Not VFC elig | |
| OBX-5.3 | Name of Coding System | HL70064 | |
| OBX-5.5 | Alternate Text | | |
| OBX-5.6 | Name of Alternate Coding System | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate 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 | 29768-9 | |
| OBX-3.2 | Text | VIS Publication Date | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20100521 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|-----------------------|----------------|
| OBX-1 | Set ID - OBX | 3 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 29769-7 | |
| OBX-3.2 | Text | VIS Presentation Date | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|---------------------------|----------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 64994-7 | |
| OBX-3.2 | Text | vaccine fund pgm elig cat | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | V01 | |
| OBX-5.2 | Text | Not VFC elig | |
| OBX-5.3 | Name of Coding System | HL70064 | |
| OBX-5.5 | Alternate Text | | |
| OBX-5.6 | Name of Alternate Coding System | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|---------------------------|----------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 64994-7 | |
| OBX-3.2 | Text | vaccine fund pgm elig cat | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | V01 | |
| OBX-5.2 | Text | Not VFC elig | |
| OBX-5.3 | Name of Coding System | HL70064 | |
| OBX-5.5 | Alternate Text | | |
| OBX-5.6 | Name of Alternate Coding System | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--|-----------------------|
| OBX-1 | Set ID - OBX | 21 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 31044-1 | Value-Test Case Fixed |
| OBX-3.2 | Text | Reaction | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Identifier | VXC9 | |
| OBX-5.2 | Text | persistent, inconsolable crying lasting > 3 hours within 48 hours of dose | |
| OBX-5.3 | Name of Coding System | CDCPHINVS | |
| OBX-5.5 | Alternate Text | | |
| OBX-5.6 | Name of Alternate Coding System | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

Test Data Specification

Patient Information

| Element | Data |
|----------------------|---|
| Patient Name | Juana Mariana Gonzales |
| Mother's Maiden Name | Maria Acosta |
| ID Number | 123456 987633 |
| Date/Time of Birth | 12/23/2009 11:05 |
| Administrative Sex | Female |
| Patient Address 1 | 4345 Standish Way Stamford CT 06903 USA |
| Patient Address 2 | 325 Shorline Drive Stamford CT 06901 |
| Local Number | (203)555-1212 |
| Race 1 | Other Race |
| Ethnic Group | Hispanic or Latino |
| Birth Order | |

Immunization Registry Information

| Element | Data |
|---|------------------------------|
| Immunization Registry Status | A |
| Immunization Registry Status Effective Date | 07/01/2012 |
| Publicity Code | Reminder/Recall - any method |
| Publicity Code Effective Date | 07/01/2012 |
| Protection Indicator | |
| Protection Indicator Effective Date | |

Guardian or Responsible Party

| Element | Data |
|--------------|-------------------------------------|
| Name | Joanna Merida Gonzales |
| Relationship | Grandparent |
| Address1 | 4345 Standish Way Stamford CT 06901 |
| Phone Number | (203)555-1212 |

Vaccine Administration Information[*]

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | hepatitis B vaccine, pediatric or pediatric/adolescent dosage |
| Date/Time Start of Administration | 11/23/2009 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | Lisa Sirtis |
| Substance Lot Number | 6332FK33 |
| Substance Expiration Date | 12/14/2010 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Shoreline Hospital |
| Entered By | Lisa Sirtis |
| Ordered By | Jane Carter |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | hepatitis B vaccine, unspecified formulation |
| Date/Time Start of Administration | 01/15/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical Immunization |
| Administering Provider | Sandra Molina |
| Substance Lot Number | 6352FK1 |
| Substance Expiration Date | 10/01/2010 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | hepatitis B vaccine, pediatric or pediatric/adolescent dosage |
| Date/Time Start of Administration | 10/30/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 6352FK24 |
| Substance Expiration Date | 08/31/2012 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified |
| Date/Time Start of Administration | 01/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D409QS2341 |
| Substance Expiration Date | 11/30/2011 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis |
| Date/Time Start of Administration | 03/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D409QS2433 |
| Substance Expiration Date | 09/04/2011 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis |
| Date/Time Start of Administration | 05/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D409QS3255 |
| Substance Expiration Date | 12/01/2010 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

| Element | Data |
|----------|--|
| Reaction | fever of >40.5C (105F) within 48 hours of dose |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis |
| Date/Time Start of Administration | 02/21/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D409QS249 |
| Substance Expiration Date | 03/01/2011 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis |
| Date/Time Start of Administration | 08/31/2014 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from other provider |
| Administering Provider | Linda Casera |
| Substance Lot Number | D643QS8243 |
| Substance Expiration Date | 09/01/2014 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | J Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Haemophilus influenzae type b vaccine, PRP-OMP conjugate |
| Date/Time Start of Administration | 01/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 7M54K9245 |
| Substance Expiration Date | 03/24/2010 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Haemophilus influenzae type b vaccine, PRP-OMP conjugate |
| Date/Time Start of Administration | 03/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 7M55K3342 |
| Substance Expiration Date | 10/30/2010 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Haemophilus influenzae type b vaccine, PRP-OMP conjugate |
| Date/Time Start of Administration | 05/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 7M75K4566 |
| Substance Expiration Date | 05/23/2010 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Haemophilus influenzae type b vaccine, PRP-OMP conjugate |
| Date/Time Start of Administration | 02/21/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 7M53K5534 |
| Substance Expiration Date | 02/22/2011 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | poliovirus vaccine, inactivated |
| Date/Time Start of Administration | 01/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D333PV2431 |
| Substance Expiration Date | 10/04/2010 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | poliovirus vaccine, inactivated |
| Date/Time Start of Administration | 03/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D333PV4344 |
| Substance Expiration Date | 03/23/2010 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | poliovirus vaccine, inactivated |
| Date/Time Start of Administration | 02/21/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from other provider |
| Administering Provider | Linda Casera |
| Substance Lot Number | D335PV9644 |
| Substance Expiration Date | 02/22/2011 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Deltoid |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | J Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---------------------------------|
| Administered Code | poliovirus vaccine, inactivated |
| Date/Time Start of Administration | 05/19/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | Parental decision |
| Completion Status | RE |
| Action Code | Add |
| Route | |
| Administration Site | |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | pneumococcal conjugate vaccine, 13 valent |
| Date/Time Start of Administration | 01/21/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | P243V3281 |
| Substance Expiration Date | 01/30/2010 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | pneumococcal conjugate vaccine, 13 valent |
| Date/Time Start of Administration | 03/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | P343V8321 |
| Substance Expiration Date | 03/30/2010 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | pneumococcal conjugate vaccine, 13 valent |
| Date/Time Start of Administration | 05/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | P853V2164 |
| Substance Expiration Date | 08/30/2010 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | pneumococcal conjugate vaccine, 13 valent |
| Date/Time Start of Administration | 02/21/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | P853V58532 |
| Substance Expiration Date | 04/18/2011 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | rotavirus, live, monovalent vaccine |
| Date/Time Start of Administration | 01/22/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 6359RV533 |
| Substance Expiration Date | 02/15/2010 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | rotavirus, live, monovalent vaccine |
| Date/Time Start of Administration | 03/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 6359RV932 |
| Substance Expiration Date | 05/10/2010 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | Influenza, injectable, quadrivalent, preservative free, pediatric |
| Date/Time Start of Administration | 09/25/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D8043IN8734 |
| Substance Expiration Date | 03/12/2011 |
| Substance Manufacturer Name | Sanofi Pasteur/GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Influenza, injectable,quadrivalent, preservative free, pediatric |
| Date/Time Start of Administration | 10/27/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D8043IN8734 |
| Substance Expiration Date | 03/12/2011 |
| Substance Manufacturer Name | Sanofi PasteurGlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Influenza, injectable,quadrivalent, preservative free, pediatric |
| Date/Time Start of Administration | 10/02/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D9334IN9333 |
| Substance Expiration Date | 05/22/2012 |
| Substance Manufacturer Name | Sanofi PasteurGlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | Influenza, injectable,quadrivalent, preservative free, pediatric |
| Date/Time Start of Administration | 10/15/2013 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from parents written record |
| Administering Provider | Gina Ricci |
| Substance Lot Number | 8L4B3423 |
| Substance Expiration Date | 07/01/2014 |
| Substance Manufacturer Name | MedImmune, LLC |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | Nasal |
| Administration Site | Bilateral Nares |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Gina Ricci |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | influenza, live, intranasal, quadrivalent |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 0.2 |
| Administered Units | |
| Administration Notes | New immunization record |
| Administering Provider | Sandra Molina |
| Substance Lot Number | 8L4B3521 |
| Substance Expiration Date | 08/15/2015 |
| Substance Manufacturer Name | MedImmune,LLC |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | Nasal |
| Administration Site | Bilateral Nares |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

| Element | Data |
|---------------------------|--------------|
| VIS Publication Date | 08/19/2014 |
| VIS Presentation Date | 07/15/2015 |
| vaccine fund pgm elig cat | Not VFC elig |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | influenza, live, intranasal, quadrivalent |
| Date/Time Start of Administration | 11/04/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | D9553IN2243 |
| Substance Expiration Date | 04/30/2012 |
| Substance Manufacturer Name | Sanofi PasteurGlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule |
| Date/Time Start of Administration | 11/23/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 6359RT33 |
| Substance Expiration Date | 01/24/2012 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | Carlos Herrera |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule |
| Date/Time Start of Administration | 05/23/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 6359RT48 |
| Substance Expiration Date | 09/11/2012 |
| Substance Manufacturer Name | Sanofi PasteurGlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | F Smith |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | measles, mumps, rubella, and varicella virus vaccine |
| Date/Time Start of Administration | 10/23/2010 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | historical |
| Administering Provider | J Martinez |
| Substance Lot Number | 7W27V7491 |
| Substance Expiration Date | 12/15/2010 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | Subcutaneous |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | F Smith |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | measles, mumps, rubella, and varicella virus vaccine |
| Date/Time Start of Administration | 11/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | J Martinez |
| Substance Lot Number | 7W87V3452 |
| Substance Expiration Date | 04/13/2013 |
| Substance Manufacturer Name | Merck Sharp \T\ Dohme Corp |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | Subcutaneous |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J Martinez |
| Ordered By | F Smith |

Vaccine Administration Information

| Element | Data |
|-----------------------------------|--|
| Administered Code | measles, mumps, rubella, and varicella virus vaccine |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 0.5 |
| Administered Units | |
| Administration Notes | New immunization record |
| Administering Provider | Sandra Molina |
| Substance Lot Number | 7W87V3687 |

Substance Expiration Date 07/15/2015
Substance Manufacturer Name Merck Sharp & Dohme Corp
Substance/Treatment Refusal Reason [REDACTED]
Completion Status CP
Action Code Add
Route Subcutaneous
Administration Site Left Deltoid
Entering Organization Shoreline Pediatrics
Entered By Sandra Molina
Ordered By Frank Smith

| Element | Data |
|---------------------------|---|
| VIS Publication Date | 05/21/2010 |
| VIS Presentation Date | 07/15/2015 |
| vaccine fund pgm elig cat | Not VFC elig |
| vaccine fund pgm elig cat | Not VFC elig |
| Reaction | persistent, inconsolable crying lasting > 3 hours within 48 hours of dose |

4.2. Juan Marcel Gonzales Transmit Immunization Report

Send the Immunization Report to the Immunization Registry (VXU/Z22) for Juan Marcel Gonzales.

Test Story

Description

No Description

Comments

No Comments

Pre Condition

No PreCondition

Post Condition

No PostCondition

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

4.2.1. Transmit the Immunization Report for Juan Marcel Gonzales

Test Step Type: SUT_INITIATOR

The EMR sends the Immunization Report to the Immunization Registry (VXU/Z22) for updated vaccination information from the visit. This includes all newly administered vaccines and may include historical information updated in the EMR during the visit.

Test Story

Description

Following the vaccinations given during the visit, the EMR transmits an Immunization report to the Immunization Registry using the VXU/Z22. The Vaccination report includes all newly administered vaccines. The report MAY send the immunizations that the EMR imported from the IIS.

Comments

The Report must include all newly administered vaccines in any order. The report may include the information imported from the IIS.

Pre Condition

The vaccines for the visit have been administered.

Post Condition

The Immunization Report has been transmitted to the IIS using a valid Z22 VXU in accordance with the test data correctly and without omission.

Test Objectives

Transmit Standard Patient Immunization History Report: The EHR or other clinical software system directly or indirectly through an intermediary creates and transmits a report of a patient's immunization history to public health immunization registries.

The VXU/Z22 message passes validation using the NIST Immunization VXU Validation Tool (Z22) (context-free). The content of the message correctly reflects the test data (context-based) in accordance with the Test Data Specification and the Message Content.

Evaluation Criteria

The VXU/Z22 message passes validation using the NIST Immunization VXU Validation Tool (Z22) (context-free). The content of the message correctly reflects the test data (context-based) in accordance with the Test Data Specification and the Message Content.

Notes for Testers

No Note

Message Contents

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 | | |
| 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].3 | Check Digit Scheme | | |
| 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].3 | Check Digit Scheme | | |
| 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 | Gonzales | |
| PID-5.1.2 | Own Surname Prefix | | |
| PID-5.1.3 | Own Surname | | |
| PID-5.1.4 | Surname Prefix From Partner/Spouse | | |
| PID-5.1.5 | Surname From Partner/Spouse | | |
| PID-5.2 | Given Name | Juan | Value-Test Case Fixed |
| PID-5.3 | Second and Further Given Names or Initials Thereof | Marcel | Value-Test Case Fixed |
| PID-5.7 | Name Type Code | L | Value-Test Case Fixed |
| PID-6 | Mother's Maiden Name | | |
| PID-6.1 | Family Name | | |
| PID-6.1.1 | Surname | Morales | Value-Test Case Fixed |
| PID-6.1.2 | Own Surname Prefix | | |
| PID-6.1.3 | Own Surname | | |
| PID-6.1.4 | Surname Prefix From Partner/Spouse | | |
| PID-6.1.5 | Surname From Partner/Spouse | | |
| PID-6.7 | Name Type Code | M | Value-Test Case Fixed |
| PID-7 | Date/Time of Birth | | |
| PID-7.1 | Time | 201111231100 | Value-Test Case Fixed |
| PID-8 | Administrative Sex | M | Value-Test Case Fixed |
| PID-10 | Race | | |
| PID-10.1 | Identifier | 2131-1 | Value-Test Case Fixed |
| PID-10.2 | Text | Other Race | Value-Test Case Fixed |
| PID-10.3 | Name of Coding System | HL70005 | Value-Test Case Fixed |
| PID-10.5 | Alternate Text | | |
| PID-10.6 | Name of Alternate Coding System | | |
| PID-11 | Patient Address | | |
| PID-11.1 | Street Address | | |
| PID-11.1.1 | Street or Mailing Address | 4623 Standish Way | Value-Test Case Fixed |
| PID-11.1.2 | Street Name | | |
| PID-11.1.3 | Dwelling Number | | |
| PID-11.2 | Other Designation | | |
| PID-11.3 | City | Stamford | Value-Test Case Fixed |
| PID-11.4 | State or Province | CT | Value-Test Case Fixed |
| PID-11.5 | Zip or Postal Code | 06903 | Value-Test Case Fixed |
| PID-11.6 | Country | USA | Value-Test Case Fixed |
| PID-11.7 | Address Type | L | Value-Test Case Fixed |
| PID-13 | Phone Number - Home | | |
| PID-13.2 | Telecommunication Use Code | PRN | Value-Test Case Fixed |
| PID-13.3 | Telecommunication Equipment Type | PH | Value-Test Case Fixed |
| PID-13.4 | Email Address | | |
| PID-13.6 | Area/City Code | 203 | Value-Test Case Fixed |
| PID-13.7 | Local Number | 5551213 | Value-Test Case Fixed |
| PID-22 | Ethnic Group | | |
| PID-22.1 | Identifier | 2135-2 | Value-Test Case Fixed |
| PID-22.2 | Text | Hispanic or Latino | Value-Test Case Fixed |
| PID-22.3 | Name of Coding System | CDCREC | Value-Test Case Fixed |
| PID-22.5 | Alternate Text | | |
| PID-22.6 | Name of Alternate Coding System | | |
| 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

| 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 | |
| PD1-11.5 | Alternate Text | | |
| PD1-11.6 | Name of Alternate Coding System | | |
| 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

| Location | Data Element | Data | Categorization |
|-----------|--|-------------------|-----------------------|
| NK1-1 | Set ID - NK1 | 1 | |
| NK1-2 | Name | | |
| NK1-2.1 | Family Name | | |
| NK1-2.1.1 | Surname | Gonzales | Value-Test Case Fixed |
| NK1-2.1.2 | Own Surname Prefix | | |
| NK1-2.1.3 | Own Surname | | |
| NK1-2.1.4 | Surname Prefix From Partner/Spouse | | |
| NK1-2.1.5 | Surname From Partner/Spouse | | |
| NK1-2.2 | Given Name | Manuel | Value-Test Case Fixed |
| NK1-2.3 | Second and Further Given Names or Initials Thereof | Marcel | Value-Test Case Fixed |
| NK1-2.7 | Name Type Code | L | Value-Test Case Fixed |
| NK1-3 | Relationship | | |
| NK1-3.1 | Identifier | FTH | Value-Test Case Fixed |
| NK1-3.2 | Text | Father | Value-Test Case Fixed |
| NK1-3.3 | Name of Coding System | HL70063 | Value-Test Case Fixed |
| NK1-3.5 | Alternate Text | | |
| NK1-3.6 | Name of Alternate Coding System | | |
| NK1-4 | Address | | |
| NK1-4.1 | Street Address | | |
| NK1-4.1.1 | Street or Mailing Address | 4623 Standish Way | Value-Test Case Fixed |
| NK1-4.1.2 | Street Name | | |
| NK1-4.1.3 | Dwelling Number | | |
| NK1-4.2 | Other Designation | | |
| NK1-4.3 | City | Stamford | Value-Test Case Fixed |
| NK1-4.4 | State or Province | CT | Value-Test Case Fixed |
| NK1-4.5 | Zip or Postal Code | 06903 | Value-Test Case Fixed |
| NK1-4.6 | Country | | |
| NK1-4.7 | Address Type | L | |
| NK1-5 | Phone Number | | |
| NK1-5.2 | Telecommunication Use Code | PRN | Value-Test Case Fixed |
| NK1-5.3 | Telecommunication Equipment Type | PH | Value-Test Case Fixed |
| NK1-5.4 | Email Address | | |
| NK1-5.6 | Area/City Code | 203 | Value-Test Case Fixed |
| NK1-5.7 | Local Number | 5551213 | Value-Test Case Fixed |

ORC[*]**ORC : Common Order**

| 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-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Molina | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Martinez | |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Rodriguez | |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | J. | |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | OP | |
| ORC-17.2 | Text | Oceanview Pediatrics | |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

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 | 20111123 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 08 | |
| RXA-5.2 | Text | Hepatitis B | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ENGERIX-B | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6332FK34 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20111214 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20111223 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 08 | |
| RXA-5.2 | Text | Hepatitis B | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ENGERIX-B | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6352FK2 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20111001 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 08 | |
| RXA-5.2 | Text | Hepatitis B | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ENGERIX-B | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| RXA-6 | Administered Amount | 0.5 | |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | mL | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | UCUM | |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 00 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Molina | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Sandra | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6332FK26 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20150825 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | DTaP | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS2342 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20121130 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120322 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | DTaP | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS2434 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120904 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120521 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | DTaP | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS250 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20140103 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20130220 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 106 | |
| RXA-5.2 | Text | DTaP | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | DAPTACEL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D409QS250 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20140103 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Hib | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M54K9255 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120324 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp and Dohme Corp. | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120322 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Hib | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M55K3343 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20121030 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp and Dohme Corp. | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120512 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Hib | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M75K4577 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120523 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp and Dohme Corp. | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120222 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 49 | |
| RXA-5.2 | Text | Hib | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PedvaxHIB | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7M53K5535 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120222 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp and Dohme Corp. | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | Polio (IPV) | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | IPOL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D333PV2444 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120410 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | MSanofi Pasteur Inc. | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120322 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | Polio (IPV) | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | IPOL | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D333PV4343 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120323 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | MSanofi Pasteur Inc. | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120521 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 10 | |
| RXA-5.2 | Text | Polio (IPV) | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | IPOP | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D333PV4343 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120323 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | MSanofi Pasteur Inc. | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | Pneumococcal conjugate (PCV13) | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P243V3321 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120130 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120322 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | Pneumococcal conjugate (PCV13) | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P343V8445 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120330 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120521 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | Pneumococcal conjugate (PCV13) | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P853V2175 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120830 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20121122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 133 | |
| RXA-5.2 | Text | Pneumococcal conjugate (PCV13) | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | PREVNAR 13 | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | P853V58544 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20130118 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PFR | |
| RXA-17.2 | Text | Pfizer, Inc | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20121122 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 119 | |
| RXA-5.2 | Text | Rotavirus | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ROTARIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RV543 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120215 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120322 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 119 | |
| RXA-5.2 | Text | Rotavirus | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ROTARIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RV933 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20120510 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20120922 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D8043IN8738 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20130312 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20121022 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D8043IN8798 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20130312 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20131030 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D9334IN9433 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20140522 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 161 | |
| RXA-5.2 | Text | Influenza | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | FLUZONE QUADRIVALENT | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| RXA-6 | Administered Amount | 0.25 | |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | mL | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | UCUM | |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 00 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Molina | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | Sandra | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | D8043IN8855 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20150828 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | PMC | |
| RXA-17.2 | Text | Sanofi Pasteur | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20130521 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 83 | |
| RXA-5.2 | Text | Hepatitis A | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | HAVRIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RT35 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20140104 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20131201 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 83 | |
| RXA-5.2 | Text | Hepatitis A | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | HAVRIX | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 6359RT47 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20130911 | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20130112 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 94 | |
| RXA-5.2 | Text | MMR and Varicella | |
| RXA-5.3 | Name of Coding System | CVX | |
| RXA-5.5 | Alternate Text | ProQuad | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | 08 | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | NIP001 | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Martinez | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| RXA-10.3 | Given Name | J. | |
| 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-10.12 | Check Digit Scheme | | |
| 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 | 7W27V7632 | |
| RXA-16 | Substance Expiration Date | | |
| RXA-16.1 | Time | 20161215 | |
| RXA-17 | Substance Manufacturer Name | | |
| RXA-17.1 | Identifier | MSD | |
| RXA-17.2 | Text | Merck Sharp and Dohme Corp. | |
| RXA-17.3 | Name of Coding System | MVX | |
| RXA-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| RXA-21 | Action Code - RXA | A | |

RXR[*]

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C28161 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | SC | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C28161 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | SC | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|--------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C28161 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | SC | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Thigh Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RT | |
| RXR-2.2 | Text | Right Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | RD | |
| RXR-2.2 | Text | Right Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LD | |
| RXR-2.2 | Text | Left Deltoid | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

RXR : Pharmacy/Treatment Route

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|------------|----------------|
| RXR-1 | Route | | |
| RXR-1.1 | Identifier | C28161 | |
| RXR-1.2 | Text | SC | |
| RXR-1.3 | Name of Coding System | NCIT | |
| RXR-1.5 | Alternate Text | SC | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

OBX[*]**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 | 29768-9 | |
| OBX-3.2 | Text | VIS Publication Date | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20120202 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|-----------------|---------------------------------|-----------------------|-----------------------|
| OBX-1 | Set ID - OBX | 3 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 29769-7 | |
| OBX-3.2 | Text | VIS Presentation Date | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|---------------------------|----------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 64994-7 | |
| OBX-3.2 | Text | vaccine fund pgm elig cat | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate 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 | 29768-9 | |
| OBX-3.2 | Text | VIS Publication Date | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20140819 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|-----------------------|----------------|
| OBX-1 | Set ID - OBX | 3 | |
| OBX-2 | Value Type | TS | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 29769-7 | |
| OBX-3.2 | Text | VIS Presentation Date | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| Location | Data Element | Data | Categorization |
|----------|---------------------------------|---------------------------|----------------|
| OBX-1 | Set ID - OBX | 1 | |
| OBX-2 | Value Type | CE | |
| OBX-3 | Observation Identifier | | |
| OBX-3.1 | Identifier | 64994-7 | |
| OBX-3.2 | Text | vaccine fund pgm elig cat | |
| OBX-3.3 | Name of Coding System | LN | |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

Test Data Specification

Patient Information

| Element | Data |
|----------------------|---|
| Patient Name | Juan Marcel Gonzales |
| Mother's Maiden Name | Anita Morales |
| ID Number | 123456 987633 |
| Date/Time of Birth | 11/23/2011 11:00 |
| Administrative Sex | Male |
| Patient Address 1 | 4623 Standish Way Stamford CT 06903 USA |
| Local Number | (203)555-1213 |
| Race1 | Other Race |
| Ethnic Group | Hispanic or Latino |
| Birth Order | |

Immunization Registry Information

| Element | Data |
|---|------------------------------|
| Immunization Registry Status | A |
| Immunization Registry Status Effective Date | 07/01/2012 |
| Publicity Code | Reminder/Recall - any method |
| Publicity Code Effective Date | 07/01/2012 |
| Protection Indicator | |
| Protection Indicator Effective Date | |

Guardian or Responsible Party

| Element | Data |
|--------------|-------------------------------------|
| Name | Manuel Marcel Gonzales |
| Relationship | Father |
| Address1 | 4623 Standish Way Stamford CT 06903 |
| Phone Number | (203)555-1213 |

Vaccine Administration Information[*]

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Hepatitis B |
| Date/Time Start of Administration | 11/23/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | 6332FK34 |
| Substance Expiration Date | 12/14/2011 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Shoreline Hospital |
| Entered By | Lisa Sirtis |
| Ordered By | Jane Carter |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Hepatitis B |
| Date/Time Start of Administration | 12/23/2011 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | 6352FK2 |
| Substance Expiration Date | 10/01/2011 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Hepatitis B |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 0.5 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | Sandra Molina |
| Substance Lot Number | 6332FK26 |
| Substance Expiration Date | 08/25/2015 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

| Element | Data |
|---------------------------|--------------|
| VIS Publication Date | 02/02/2012 |
| VIS Presentation Date | 07/15/2015 |
| vaccine fund pgm elig cat | Not VFC elig |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | DTaP |
| Date/Time Start of Administration | 01/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | D409QS2342 |
| Substance Expiration Date | 11/30/2012 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | DTaP |
| Date/Time Start of Administration | 03/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | D409QS2434 |
| Substance Expiration Date | 09/04/2012 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | DTaP |
| Date/Time Start of Administration | 05/21/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | D409QS250 |
| Substance Expiration Date | 01/03/2014 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | DTaP |
| Date/Time Start of Administration | 02/20/2013 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | D409QS250 |
| Substance Expiration Date | 01/03/2014 |
| Substance Manufacturer Name | Sanofi Pasteur Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|-----------------------------|
| Administered Code | Hib |
| Date/Time Start of Administration | 01/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | 7M54K9255 |
| Substance Expiration Date | 03/24/2012 |
| Substance Manufacturer Name | Merck Sharp and Dohme Corp. |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|-----------------------------|
| Administered Code | Hib |
| Date/Time Start of Administration | 03/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | 7M55K3343 |
| Substance Expiration Date | 10/30/2012 |
| Substance Manufacturer Name | Merck Sharp and Dohme Corp. |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|-----------------------------|
| Administered Code | Hib |
| Date/Time Start of Administration | 05/12/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | 7M75K4577 |
| Substance Expiration Date | 05/23/2012 |
| Substance Manufacturer Name | Merck Sharp and Dohme Corp. |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|-----------------------------|
| Administered Code | Hib |
| Date/Time Start of Administration | 02/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | 7M53K5535 |
| Substance Expiration Date | 02/22/2012 |
| Substance Manufacturer Name | Merck Sharp and Dohme Corp. |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | Polio (IPV) |
| Date/Time Start of Administration | 01/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | D333PV2444 |
| Substance Expiration Date | 04/10/2012 |
| Substance Manufacturer Name | MSanofi Pasteur Inc. |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | Polio (IPV) |
| Date/Time Start of Administration | 03/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | D333PV4343 |
| Substance Expiration Date | 03/23/2012 |
| Substance Manufacturer Name | MSanofi Pasteur Inc. |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | Polio (IPV) |
| Date/Time Start of Administration | 05/21/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | D333PV4343 |
| Substance Expiration Date | 03/23/2012 |
| Substance Manufacturer Name | MSanofi Pasteur Inc. |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Pneumococcal conjugate (PCV13) |
| Date/Time Start of Administration | 01/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | P243V3321 |
| Substance Expiration Date | 01/30/2012 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Pneumococcal conjugate (PCV13) |
| Date/Time Start of Administration | 03/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | P343V8445 |
| Substance Expiration Date | 03/30/2012 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Pneumococcal conjugate (PCV13) |
| Date/Time Start of Administration | 05/21/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | P853V2175 |
| Substance Expiration Date | 08/30/2012 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Pneumococcal conjugate (PCV13) |
| Date/Time Start of Administration | 11/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | P853V58544 |
| Substance Expiration Date | 01/18/2013 |
| Substance Manufacturer Name | Pfizer, Inc |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Rotavirus |
| Date/Time Start of Administration | 11/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | 6359RV543 |
| Substance Expiration Date | 02/15/2012 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Rotavirus |
| Date/Time Start of Administration | 03/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | 6359RV933 |
| Substance Expiration Date | 05/10/2012 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Thigh Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | Influenza |
| Date/Time Start of Administration | 09/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | D8043IN8738 |
| Substance Expiration Date | 03/12/2013 |
| Substance Manufacturer Name | Sanofi Pasteur |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | Influenza |
| Date/Time Start of Administration | 10/22/2012 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | D8043IN8798 |
| Substance Expiration Date | 03/12/2013 |
| Substance Manufacturer Name | Sanofi Pasteur |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | Influenza |
| Date/Time Start of Administration | 10/30/2013 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | D9334IN9433 |
| Substance Expiration Date | 05/22/2014 |
| Substance Manufacturer Name | Sanofi Pasteur |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | Influenza |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 0.25 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | Sandra Molina |
| Substance Lot Number | D8043IN8855 |
| Substance Expiration Date | 08/28/2015 |
| Substance Manufacturer Name | Sanofi Pasteur |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

| Element | Data |
|---------------------------|--------------|
| VIS Publication Date | 08/19/2014 |
| VIS Presentation Date | 07/15/2015 |
| vaccine fund pgm elig cat | Not VFC elig |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Hepatitis A |
| Date/Time Start of Administration | 05/21/2013 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | J. Martinez |
| Substance Lot Number | 6359RT35 |
| Substance Expiration Date | 01/04/2014 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Right Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--------------------------------|
| Administered Code | Hepatitis A |
| Date/Time Start of Administration | 12/01/2013 |
| Administered Amount | 999 |
| Administered Units | [REDACTED] |
| Administration Notes | [REDACTED] |
| Administering Provider | J. Martinez |
| Substance Lot Number | 6359RT47 |
| Substance Expiration Date | 09/11/2013 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | [REDACTED] |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Deltoid |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

Vaccine Administration Information

| Element | Data |
|------------------------------------|-----------------------------|
| Administered Code | MMR and Varicella |
| Date/Time Start of Administration | 01/12/2013 |
| Administered Amount | 999 |
| Administered Units | [REDACTED] |
| Administration Notes | [REDACTED] |
| Administering Provider | J. Martinez |
| Substance Lot Number | 7W27V7632 |
| Substance Expiration Date | 12/15/2016 |
| Substance Manufacturer Name | Merck Sharp and Dohme Corp. |
| Substance/Treatment Refusal Reason | [REDACTED] |
| Completion Status | CP |
| Action Code | Add |
| Route | SC |
| Administration Site | Left Thigh |
| Entering Organization | Oceanview Pediatrics |
| Entered By | J. Martinez |
| Ordered By | J. Rodriguez |

4.3. Mariela Gonzales Morales Transmit Immunization Report

Send the Immunization Report to the Immunization Registry (VXU/Z22) for Mariela Gonzales Morales.

Test Story

Description

No Description

Comments

No Comments

Pre Condition

No PreCondition

Post Condition

No PostCondition

Test Objectives

No Test Objectives

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

4.3.1. Transmit the Immunization Report for Mariela Gonzales Morales

Test Step Type: SUT_INITIATOR

The EMR sends the Immunization Report to the Immunization Registry (VXU/Z22) for updated vaccination information from the visit. This includes the vaccine deferral and may include historical information updated in the EMR during the visit.

Test Story

Description

Following the visit, the EMR transmits an Immunization report to the Immunization Registry using the VXU/Z22. The Vaccination report includes the vaccine deferrals. The report MAY send the immunizations that the EMR imported from the IIS.

Comments

The Report must include all vaccine deferrals recorded in the EMR in any order. The report may include the information imported from the IIS

Pre Condition

The vaccines for the visit have been administered.

Post Condition

The Immunization Report has been transmitted to the IIS using a valid Z22 VXU in accordance with the test data correctly and without omission.

Test Objectives

Transmit Standard Patient Immunization History Report: The EHR or other clinical software system directly or indirectly through an intermediary creates and transmits a report of a patient's immunization history to public health immunization registries.

Evaluation Criteria

The VXU/Z22 message passes validation using the NIST Immunization VXU Validation Tool (Z22) (context-free). The content of the message correctly reflects the test data (context-based) in accordance with the Test Data Specification and the Message Content. The message must contain all deferrals recorded in the EMR. Current Date is expected for the Non-Administration date and deferral date.

Notes for Testers

No Note

Message Contents

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 | | |
| 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].3 | Check Digit Scheme | | |
| 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].3 | Check Digit Scheme | | |
| 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-5.1.2 | Own Surname Prefix | | |
| PID-5.1.3 | Own Surname | | |
| PID-5.1.4 | Surname Prefix From Partner/Spouse | | |
| PID-5.1.5 | Surname From Partner/Spouse | | |
| PID-5.2 | Given Name | Mariela | Value-Test Case Fixed |
| PID-5.3 | Second and Further Given Names or Initials Thereof | Gonzales | Value-Test Case Fixed |
| PID-5.7 | Name Type Code | L | Value-Test Case Fixed |
| PID-6 | Mother's Maiden Name | | |
| PID-6.1 | Family Name | | |
| PID-6.1.1 | Surname | Gonzales | Value-Test Case Fixed |
| PID-6.1.2 | Own Surname Prefix | | |
| PID-6.1.3 | Own Surname | | |
| PID-6.1.4 | Surname Prefix From Partner/Spouse | | |
| PID-6.1.5 | Surname From Partner/Spouse | | |
| PID-6.7 | Name Type Code | M | Value-Test Case Fixed |
| PID-7 | Date/Time of Birth | | |
| PID-7.1 | Time | 201503301115 | Value-Test Case Fixed |
| PID-8 | Administrative Sex | F | Value-Test Case Fixed |
| PID-10 | Race | | |
| PID-10.1 | Identifier | 2131-1 | Value-Test Case Fixed |
| PID-10.2 | Text | Other Race | Value-Test Case Fixed |
| PID-10.3 | Name of Coding System | HL70005 | Value-Test Case Fixed |
| PID-10.5 | Alternate Text | | |
| PID-10.6 | Name of Alternate Coding System | | |
| PID-11[1] | Patient Address | | |
| PID-11[1].1 | Street Address | | |
| PID-11[1].1.1 | Street or Mailing Address | 3321 Standish Way | Value-Test Case Fixed |
| PID-11[1].1.2 | Street Name | | |
| PID-11[1].1.3 | Dwelling Number | | |
| PID-11[1].2 | Other Designation | | |
| PID-11[1].3 | City | Stamford | Value-Test Case Fixed |
| PID-11[1].4 | State or Province | CT | Value-Test Case Fixed |
| PID-11[1].5 | Zip or Postal Code | 06903 | Value-Test Case Fixed |
| PID-11[1].6 | Country | USA | Value-Test Case Fixed |
| PID-11[1].7 | Address Type | L | Value-Test Case Fixed |
| PID-11[2] | Patient Address | | |
| PID-11[2].1 | Street Address | | |
| PID-11[2].1.1 | Street or Mailing Address | 325 Shoreline Drive | |
| PID-11[2].1.2 | Street Name | | |
| PID-11[2].1.3 | Dwelling Number | | |
| PID-11[2].2 | Other Designation | | |
| PID-11[2].3 | City | Stamford | |
| PID-11[2].4 | State or Province | CT | Value-Test Case Fixed |
| PID-11[2].5 | Zip or Postal Code | 06901 | |
| PID-11[2].6 | Country | | |
| PID-11[2].7 | Address Type | BDL | Value-Test Case Fixed |
| PID-13 | Phone Number - Home | | |
| PID-13.2 | Telecommunication Use Code | PRN | Value-Test Case Fixed |
| PID-13.3 | Telecommunication Equipment Type | PH | Value-Test Case Fixed |
| PID-13.4 | Email Address | | |
| PID-13.6 | Area/City Code | 203 | Value-Test Case Fixed |
| PID-13.7 | Local Number | 5551214 | Value-Test Case Fixed |
| PID-22 | Ethnic Group | | |
| PID-22.1 | Identifier | 2135-2 | Value-Test Case Fixed |
| PID-22.2 | Text | Hispanic or Latino | Value-Test Case Fixed |
| PID-22.3 | Name of Coding System | CDCREC | Value-Test Case Fixed |
| PID-22.5 | Alternate Text | | |
| PID-22.6 | Name of Alternate Coding System | | |
| 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

| 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 | |
| PD1-11.5 | Alternate Text | | |
| PD1-11.6 | Name of Alternate Coding System | | |
| 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

| 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 | Value-Test Case Fixed |
| NK1-2.1.2 | Own Surname Prefix | | |
| NK1-2.1.3 | Own Surname | | |
| NK1-2.1.4 | Surname Prefix From Partner/Spouse | | |
| NK1-2.1.5 | Surname From Partner/Spouse | | |
| NK1-2.2 | Given Name | Joanna | Value-Test Case Fixed |
| NK1-2.3 | Second and Further Given Names or Initials Thereof | Gonzales | Value-Test Case Fixed |
| NK1-2.7 | Name Type Code | L | Value-Test Case Fixed |
| NK1-3 | Relationship | | |
| NK1-3.1 | Identifier | MTH | Value-Test Case Fixed |
| NK1-3.2 | Text | Mother | Value-Test Case Fixed |
| NK1-3.3 | Name of Coding System | HL70063 | |
| NK1-3.5 | Alternate Text | | |
| NK1-3.6 | Name of Alternate Coding System | | |
| NK1-4 | Address | | |
| NK1-4.1 | Street Address | | |
| NK1-4.1.1 | Street or Mailing Address | 4623 Standish Way | Value-Test Case Fixed |
| NK1-4.1.2 | Street Name | | |
| NK1-4.1.3 | Dwelling Number | | |
| NK1-4.2 | Other Designation | | |
| NK1-4.3 | City | Stamford | Value-Test Case Fixed |
| NK1-4.4 | State or Province | CT | Value-Test Case Fixed |
| NK1-4.5 | Zip or Postal Code | 06903 | Value-Test Case Fixed |
| NK1-4.6 | Country | | |
| NK1-4.7 | Address Type | L | Value-Test Case Fixed |
| NK1-5 | Phone Number | | |
| NK1-5.2 | Telecommunication Use Code | PRN | Value-Test Case Fixed |
| NK1-5.3 | Telecommunication Equipment Type | PH | Value-Test Case Fixed |
| NK1-5.4 | Email Address | | |
| NK1-5.6 | Area/City Code | 203 | Value-Test Case Fixed |
| NK1-5.7 | Local Number | 5551213 | Value-Test Case Fixed |

ORC[*]**ORC : Common Order**

| 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 | Value-Test Case Fixed |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| 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-12.12 | Check Digit Scheme | | |
| 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 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Value-Test Case Fixed |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Value-Test Case Fixed |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Frank | Value-Test Case Fixed |
| 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 | Value-Test Case Fixed |
| ORC-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | Value-Test Case Fixed |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Value-Test Case Fixed |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Value-Test Case Fixed |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Frank | Value-Test Case Fixed |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | Value-Test Case Fixed |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Value-Test Case Fixed |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Value-Test Case Fixed |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Frank | Value-Test Case Fixed |
| 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 | Value-Test Case Fixed |
| ORC-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | Value-Test Case Fixed |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Value-Test Case Fixed |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Value-Test Case Fixed |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Frank | Value-Test Case Fixed |
| 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 | Value-Test Case Fixed |
| ORC-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | Value-Test Case Fixed |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

ORC : Common Order

| 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 | Value-Test Case Fixed |
| ORC-10.2.2 | Own Surname Prefix | | |
| ORC-10.2.3 | Own Surname | | |
| ORC-10.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-10.2.5 | Surname From Partner/Spouse | | |
| ORC-10.3 | Given Name | Sandra | Value-Test Case Fixed |
| 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-10.12 | Check Digit Scheme | | |
| 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 | Value-Test Case Fixed |
| ORC-12.2.2 | Own Surname Prefix | | |
| ORC-12.2.3 | Own Surname | | |
| ORC-12.2.4 | Surname Prefix From Partner/Spouse | | |
| ORC-12.2.5 | Surname From Partner/Spouse | | |
| ORC-12.3 | Given Name | Frank | Value-Test Case Fixed |
| 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-12.12 | Check Digit Scheme | | |
| ORC-12.13 | Identifier Type Code | | |
| ORC-17 | Entering Organization | | |
| ORC-17.1 | Identifier | SP | |
| ORC-17.2 | Text | Shoreline Pediatrics | Value-Test Case Fixed |
| ORC-17.3 | Name of Coding System | HL70362 | |
| ORC-17.5 | Alternate Text | | |
| ORC-17.6 | Name of Alternate Coding System | | |

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 | 20091123 | |
| 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 | |
| RXA-5.5 | Alternate Text | ENGERIX-B | |
| RXA-5.6 | Name of Alternate Coding System | NDC | |
| 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-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate 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-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | Sirtis | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | CP | |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 45 | Value-Test Case Fixed |
| RXA-5.2 | Text | hepatitis B vaccine, unspecified formulation | Value-Test Case Fixed |
| RXA-5.3 | Name of Coding System | CVX | Value-Test Case Fixed |
| RXA-5.5 | Alternate Text | | |
| RXA-5.6 | Name of Alternate Coding System | | |
| RXA-6 | Administered Amount | 999 | Value-Test Case Fixed |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | NA | Value-Test Case Fixed |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 107 | Value-Test Case Fixed |
| RXA-5.2 | Text | DTaP, unspecified formulation | Value-Test Case Fixed |
| RXA-5.3 | Name of Coding System | CVX | Value-Test Case Fixed |
| RXA-5.5 | Alternate Text | | |
| RXA-5.6 | Name of Alternate Coding System | | |
| RXA-6 | Administered Amount | 999 | Value-Test Case Fixed |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | NA | Value-Test Case Fixed |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 08 | Value-Test Case Fixed |
| RXA-5.2 | Text | Hib | Value-Test Case Fixed |
| RXA-5.3 | Name of Coding System | CVX | Value-Test Case Fixed |
| RXA-5.5 | Alternate Text | | |
| RXA-5.6 | Name of Alternate Coding System | | |
| RXA-6 | Administered Amount | 999 | Value-Test Case Fixed |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | NA | Value-Test Case Fixed |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 152 | Value-Test Case Fixed |
| RXA-5.2 | Text | Pneumococcal Conjugate, unspecified formulation | Value-Test Case Fixed |
| RXA-5.3 | Name of Coding System | CVX | Value-Test Case Fixed |
| RXA-5.5 | Alternate Text | | |
| RXA-5.6 | Name of Alternate Coding System | | |
| RXA-6 | Administered Amount | 999 | Value-Test Case Fixed |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | NA | Value-Test Case Fixed |
| 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 | 20150715 | |
| RXA-5 | Administered Code | | |
| RXA-5.1 | Identifier | 122 | Value-Test Case Fixed |
| RXA-5.2 | Text | rotavirus, unspecified formulation | Value-Test Case Fixed |
| RXA-5.3 | Name of Coding System | CVX | Value-Test Case Fixed |
| RXA-5.5 | Alternate Text | | |
| RXA-5.6 | Name of Alternate Coding System | | |
| RXA-6 | Administered Amount | 999 | Value-Test Case Fixed |
| RXA-7 | Administered Units | | |
| RXA-7.1 | Identifier | | |
| RXA-7.2 | Text | | |
| RXA-7.3 | Name of Coding System | | |
| RXA-7.5 | Alternate Text | | |
| RXA-7.6 | Name of Alternate Coding System | | |
| RXA-9 | Administration Notes | | |
| RXA-9.1 | Identifier | | |
| RXA-9.2 | Text | | |
| RXA-9.3 | Name of Coding System | | |
| RXA-9.5 | Alternate Text | | |
| RXA-9.6 | Name of Alternate Coding System | | |
| RXA-10 | Administering Provider | | |
| RXA-10.1 | ID Number | | |
| RXA-10.2 | Family Name | | |
| RXA-10.2.1 | Surname | | |
| RXA-10.2.2 | Own Surname Prefix | | |
| RXA-10.2.3 | Own Surname | | |
| RXA-10.2.4 | Surname Prefix From Partner/Spouse | | |
| RXA-10.2.5 | Surname From Partner/Spouse | | |
| 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-10.12 | Check Digit Scheme | | |
| 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-17.5 | Alternate Text | | |
| RXA-17.6 | Name of Alternate Coding System | | |
| RXA-18 | Substance/Treatment Refusal Reason | | |
| RXA-18.1 | Identifier | | |
| RXA-18.2 | Text | | |
| RXA-18.3 | Name of Coding System | | |
| RXA-18.5 | Alternate Text | | |
| RXA-18.6 | Name of Alternate Coding System | | |
| RXA-20 | Completion Status | NA | Value-Test Case Fixed |
| 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-1.5 | Alternate Text | IM | |
| RXR-1.6 | Name of Alternate Coding System | HL70162 | |
| RXR-2 | Administration Site | | |
| RXR-2.1 | Identifier | LT | |
| RXR-2.2 | Text | Left Thigh | |
| RXR-2.3 | Name of Coding System | HL70163 | |
| RXR-2.5 | Alternate Text | | |
| RXR-2.6 | Name of Alternate Coding System | | |

OBX[*]

OBX : Observation/Result

| 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination contraindication | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination contraindication/precaution effective date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination temporary contraindication/precaution expiration date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20150815 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination contraindication | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination contraindication/precaution effective date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination temporary contraindication/precaution expiration date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20150815 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination contraindication | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination contraindication/precaution effective date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination temporary contraindication/precaution expiration date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20150815 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination contraindication | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination contraindication/precaution effective date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination temporary contraindication/precaution expiration date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20150815 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination contraindication | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination contraindication/precaution effective date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| 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-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

OBX : Observation/Result

| 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 | Value-Test Case Fixed |
| OBX-3.2 | Text | Vaccination temporary contraindication/precaution expiration date | Value-Test Case Fixed |
| OBX-3.3 | Name of Coding System | LN | Value-Test Case Fixed |
| OBX-3.5 | Alternate Text | | |
| OBX-3.6 | Name of Alternate Coding System | | |
| OBX-4 | Observation Sub-ID | 1 | |
| OBX-5 | Observation Value | | |
| OBX-5.1 | Time | 20150815 | |
| OBX-6 | Units | | |
| OBX-6.1 | Identifier | | |
| OBX-6.2 | Text | | |
| OBX-6.3 | Name of Coding System | | |
| OBX-6.5 | Alternate Text | | |
| OBX-6.6 | Name of Alternate Coding System | | |
| OBX-11 | Observation Result Status | F | |
| OBX-14 | Date/Time of the Observation | | |
| OBX-14.1 | Time | 20150715 | |
| OBX-17 | Observation Method | | |
| OBX-17.1 | Identifier | | |
| OBX-17.2 | Text | | |
| OBX-17.3 | Name of Coding System | | |
| OBX-17.5 | Alternate Text | | |
| OBX-17.6 | Name of Alternate Coding System | | |

Test Data Specification

Patient Information

| Element | Data |
|----------------------|---|
| Patient Name | Mariela Gonzales Morales |
| Mother's Maiden Name | Joanna Gonzales |
| ID Number | 123456 987633 |
| Date/Time of Birth | 03/30/2015 11:15 |
| Administrative Sex | Female |
| Patient Address 1 | 3321 Standish Way Stamford CT 06903 USA |
| Patient Address 2 | 325 Shorline Drive Stamford CT 06901 |
| Local Number | (203)555-1214 |
| Race1 | Other Race |
| Ethnic Group | Hispanic or Latino |
| Birth Order | |

Immunization Registry Information

| Element | Data |
|---|------------------------------|
| Immunization Registry Status | A |
| Immunization Registry Status Effective Date | 07/01/2012 |
| Publicity Code | Reminder/Recall - any method |
| Publicity Code Effective Date | 07/01/2012 |
| Protection Indicator | |
| Protection Indicator Effective Date | |

Guardian or Responsible Party

| Element | Data |
|--------------|-------------------------------------|
| Name | Joanna Gonzales Morales |
| Relationship | Mother |
| Address1 | 4623 Standish Way Stamford CT 06903 |
| Phone Number | (203)555-1213 |

Vaccine Administration Information[*]

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | hepatitis B vaccine, pediatric or pediatric/adolescent dosage |
| Date/Time Start of Administration | 11/23/2009 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | Lisa Sirtis |
| Substance Lot Number | 6332FK33 |
| Substance Expiration Date | 12/14/2010 |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | IM |
| Administration Site | Left Thigh |
| Entering Organization | Shoreline Hospital |
| Entered By | Lisa Sirtis |
| Ordered By | Jane Carter |

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code | hepatitis B vaccine, unspecified formulation |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |
| Completion Status | NA |
| Action Code | Add |
| Route | |
| Administration Site | |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

| Element | Data |
|---|---|
| Vaccination contraindication | current fever with moderate-to-severe illness |
| Vaccination contraindication/precaution effective date | 07/15/2015 |
| Vaccination temporary contraindication/precaution expiration date | 08/15/2015 |

Vaccine Administration Information

| Element | Data |
|------------------------------------|-------------------------------|
| Administered Code | DTaP, unspecified formulation |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |
| Completion Status | NA |
| Action Code | Add |
| Route | |
| Administration Site | |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

| Element | Data |
|---|---|
| Vaccination contraindication | current fever with moderate-to-severe illness |
| Vaccination contraindication/precaution effective date | 07/15/2015 |
| Vaccination temporary contraindication/precaution expiration date | 08/15/2015 |

Vaccine Administration Information

| Element | Data |
|------------------------------------|----------------------|
| Administered Code | Hib |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |
| Completion Status | NA |
| Action Code | Add |
| Route | |
| Administration Site | |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

| Element | Data |
|---|---|
| Vaccination contraindication | current fever with moderate-to-severe illness |
| Vaccination contraindication/precaution effective date | 07/15/2015 |
| Vaccination temporary contraindication/precaution expiration date | 08/15/2015 |

Vaccine Administration Information

| Element | Data |
|------------------------------------|---|
| Administered Code | Pneumococcal Conjugate, unspecified formulation |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |
| Completion Status | NA |
| Action Code | Add |
| Route | |
| Administration Site | |
| Entering Organization | Shoreline Pediatrics |

Entered By
Ordered By

Sandra Molina
Frank Smith

| Element | Data |
|---|---|
| Vaccination contraindication | current fever with moderate-to-severe illness |
| Vaccination contraindication/precaution effective date | 07/15/2015 |
| Vaccination temporary contraindication/precaution expiration date | 08/15/2015 |

Vaccine Administration Information

| Element | Data |
|------------------------------------|------------------------------------|
| Administered Code | rotavirus, unspecified formulation |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |
| Completion Status | NA |
| Action Code | Add |
| Route | |
| Administration Site | |
| Entering Organization | Shoreline Pediatrics |
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

| Element | Data |
|---|---|
| Vaccination contraindication | current fever with moderate-to-severe illness |
| Vaccination contraindication/precaution effective date | 07/15/2015 |
| Vaccination temporary contraindication/precaution expiration date | 08/15/2015 |

5. Display Immunization Report

This test will consist of generating and displaying a human readable immunization report for the patient showing immunization history, upcoming vaccines due.

5.1. Juana Mariana Gonzales Display Immunization Report

Produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.)

Test Story

Description

Following the vaccination visit, the provider uses the EMR to produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.)

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR. New vaccinations have been administered.

Post Condition

The patient/parent has been provided a patient immunization history report.

Test Objectives

Produce Standard Patient Immunization History Report: The EHR or other clinical software system produces a report of a patient's immunization history that is appropriate for various entities, such as schools and day-care centers.

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

5.1.1. Produce an immunization report for Juana Mariana Gonzales including all history

Test Step Type: SUT_MANUAL

The EMR is used to produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.).

Test Story

Description

Following the vaccination visit, the provider uses the EMR to produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.)

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR. New vaccinations have been administered.

Post Condition

The patient/parent has been provided a patient immunization history report.

Test Objectives

Produce Standard Patient Immunization History Report: The EHR or other clinical software system produces a report of a patient's immunization history that is appropriate for various entities, such as schools and day-care centers.

Evaluation Criteria

The following patient demographics are displayed:

Patient Identifier Number: **Vendor Assigned**
Patient Identifier Type Code: **Vendor Assigned**
Patient Name: **Juana Mariana Gonzales**
Date/Time of Birth: **12/23/2009 11:05am**

Sex: **Female**
Patient Address: **4345 Standish Way, Stamford, CT, 06903**
Multiple Birth:
Birth Order: **NA**

The following Vaccination History is displayed:

Vaccine Group: Hep B Peds NOS
Administered: hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)
ENGERIX-B (NDC 58160-0820-11)"
Date Administered: 12/23/2009
Additional Observations: None
Dose #: 1
Doses in Series: 3
Valid Dose: Y
Ordering Provider: Jane Carter
Entered By: Lisa Sirtis
Entering Organization: Shoreline Hospital
Administered Amt: .05 mL
Administering Provider: Jane Carter
Administered at Location: 325 Shoreline Drive,
Stamford Connecticut 06901
Lot#: 6332FK33
Exp Date: 12/14/2010
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: Hep B Peds NOS
Administered: hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)
ENGERIX-B (NDC 58160-0820-11)"
Date Administered: 1/15/2010
Additional Observations: None
Dose #: 2
Doses in Series: 3
Valid Dose: Y
Ordering Provider: Frank Smith
Entered By: Sandra Molina
Entering Organization: Shoreline Pediatrics
Administered Amt: .05 mL

Administering Provider: Sandra Molina
Administered at Location: 400 Shoreline Drive,
Stamford Connecticut 06901
Lot#: 6352FK1
Exp Date: 10/1/2010
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)
&nbs;p;
Vaccine Group: Hep B Peds NOS
Administered: hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)
ENGERIX-B (NDC 58160-0820-11)"
Date Administered: 10/30/2010
Additional Observations: None
Dose #: 3
Doses in Series: 3
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: Sandra Molina
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: 6352FK24
Exp Date: 8/31/2012
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)
&nbs;p;
Vaccine Group: diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered: diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)
DAPTACEL (NDC 49281-0286-01)"
Date Administered: 1/22/2010
Additional Observations: None
Dose #: 1
Doses in Series: 5
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: D409QS2341
Exp Date: 11/30/2011
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)
&nbs;p;
Vaccine Group: diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered: diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)
DAPTACEL (NDC 49281-0286-01)
Date Administered: 3/23/2010
Additional Observations: 31044-1 Reaction, VXC12*fever of >40.5C (105F) within 48 hours of dose
Dose #: 2
Doses in Series: 5
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: D409QS2433
Exp Date: 9/4/2011
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)
&nbs;p;
Vaccine Group: diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered: diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)
DAPTACEL (NDC 49281-0286-01)"
Date Administered: 5/22/2010
Additional Observations:
Dose #: 3
Doses in Series: 5
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: D409QS3255
Exp Date: 12/1/2010
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)
&nbs;p;
Vaccine Group: diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered: diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)
DAPTACEL (NDC 49281-0286-01)"
Date Administered: 2/21/2011
Additional Observations:
Dose #: 4
Doses in Series: 5
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: D409QS249
Exp Date: 3/1/2011
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL7 LD)
&nbs;p;

Vaccine Group: Hib, unspecified formulation
Administered: Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)
PedvaxHIB (NDC 00006-4897-00)">
Date Administered: 1/22/2010
Additional Observations:
Dose #: 1
Doses in Series: 4
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: 7M54K9245
Exp Date: 3/24/2010
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: Hib, unspecified formulation
Administered: Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)
PedvaxHIB (NDC 00006-4897-00)">
Date Administered: 3/23/2010
Additional Observations:
Dose #: 2
Doses in Series: 4
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: 7M55K342
Exp Date: 10/30/2010
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: Hib, unspecified formulation
Administered: Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)
PedvaxHIB (NDC 00006-4897-00)">
Date Administered: 5/22/2010
Additional Observations:
Dose #: 3
Doses in Series: 4
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: 7M75K4566
Exp Date: 5/23/2010
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: Hib, unspecified formulation
Administered: Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)
PedvaxHIB (NDC 00006-4897-00)">
Date Administered: 2/21/2011
Additional Observations:
Dose #: 4
Doses in Series: 4
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: 7M53K5534
Exp Date: 2/22/2011
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL7 LD)

Vaccine Group: poliovirus vaccine, inactivated
Administered: poliovirus vaccine, inactivated (CVX 10)
IPOL (NDC 49281-0860-55)
Date Administered: 1/22/2010
Additional Observations:
Dose #: 1
Doses in Series: 4
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: D333PV2431
Exp Date: 10/4/2010
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Subcutaneous (NCIT C38299, HL70162: SC)
Site: Left Deltoid (HL7 LD)

Vaccine Group: poliovirus vaccine, inactivated
Administered: poliovirus vaccine, inactivated (CVX 10)
IPOL (NDC 49281-0860-55)
Date Administered: 3/23/2010
Additional Observations:

Dose #: 2
Doses in Series: 4
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: D333PV4344
Exp Date: 3/23/2010
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Subcutaneous (NCIT C38299, HL70162: SC)
Site: Left Deltoid (HL7 LD)

Vaccine Group: pneumococcal, unspecified formulation
Administered: pneumococcal conjugate vaccine, 13 valent (CVX 133)
PREVNAR 13 (NDC 00005-1971-05)"
Date Administered: 1/22/2010
Additional Observations:
Dose #: 1
Doses in Series: 4
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: P243V3281
Exp Date: 1/30/2010
Manufacturer: Pfizer, Inc (MVX PFR)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: pneumococcal, unspecified formulation
Administered: pneumococcal conjugate vaccine, 13 valent (CVX 133)
PREVNAR 13 (NDC 00005-1971-05)"
Date Administered: 3/23/2010
Additional Observations:
Dose #: 2
Doses in Series: 4
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: P343V8321
Exp Date: 3/30/2010
Manufacturer: Pfizer, Inc (MVX PFR)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: pneumococcal, unspecified formulation
Administered: pneumococcal conjugate vaccine, 13 valent (CVX 133)
PREVNAR 13 (NDC 00005-1971-05)"
Date Administered: 5/22/2010
Additional Observations:
Dose #: 3
Doses in Series: 4
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: P853V2164
Exp Date: 8/30/2010
Manufacturer: Pfizer, Inc (MVX PFR)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: pneumococcal, unspecified formulation
Administered: pneumococcal conjugate vaccine, 13 valent (CVX 133)
PREVNAR 13 (NDC 00005-1971-05)"
Date Administered: 2/21/2011
Additional Observations:
Dose #: 4
Doses in Series: 4
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: P853V58532
Exp Date: 4/18/2011
Manufacturer: Pfizer, Inc (MVX PFR)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL7 LD)

Vaccine Group: rotavirus, unspecified formulation
Administered: rotavirus, live, monovalent vaccine (CVX 119)
ROTARIX (NDC 58160-0854-52)"
Date Administered: 1/22/2010
Additional Observations:
Dose #: 1
Doses in Series: 3
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: 1 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901

Lot#: 6359RV533
Exp Date: 2/15/2010
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: rotavirus, unspecified formulation
Administered: rotavirus, live, monovalent vaccine (CVX 119)
ROTARIX (NDC 58160-0854-52)"
Date Administered: 3/23/2010
Additional Observations:
Dose #: 2
Doses in Series: 3
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: 1 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: 6359RV932
Exp Date: 5/10/2011
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: influenza, unspecified formulation
Administered: Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)
FLUZONE QUADRIVALENT (NDC 49281-0514-25)"
Date Administered: 9/25/2010
Additional Observations:
Dose #: 1
Doses in Series: 2
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .25 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: D8043IN8734
Exp Date: 3/12/2011
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: influenza, unspecified formulation
Administered: Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)
FLUZONE QUADRIVALENT (NDC 49281-0514-25)"
Date Administered: 10/27/2010
Additional Observations:
Dose #: 2
Doses in Series: 2
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .25 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: D8043IN8734
Exp Date: 3/12/2011
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: influenza, unspecified formulation
Administered: Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)
FLUZONE QUADRIVALENT (NDC 49281-0514-25)"
Date Administered: 10/2/2011
Additional Observations:
Dose #:
Doses in Series:
Valid Dose:
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .25 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: D9334IN9333
Exp Date: 5/22/2012
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL7 LD)

Vaccine Group: influenza, unspecified formulation
Administered: Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)
FLUZONE QUADRIVALENT (NDC 49281-0514-25)"
Date Administered: 11/4/2012
Additional Observations:
Dose #:
Doses in Series:
Valid Dose:
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .25 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: D9553IN2243
Exp Date: 4/30/2012
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL7 LD)

Vaccine Group: influenza, unspecified formulation
Administered: influenza, live, intranasal, quadrivalent (CVX 149)
FluMist Quadrivalent (NDC 66019-0301-10)"

Date Administered: Current Date
Additional Observations:
Dose #:
Doses in Series:
Valid Dose:
Ordering Provider: Sandra Molina
Entered By: Frank Smith
Entering Organization: Oceanview Pediatrics
Administered Amt: .2 mL
Administering Provider: Sandra Molina
Administered at Location: 400 Shoreline Drive, Stamford Connecticut 06901
Lot#: 8L4B3521
Exp Date: 7/15/2015
Manufacturer: MedImmune,LLC (MVX MED)
Route: Nasal (NCIT C38284), Nasal (HL70162 NS)
Site:

Vaccine Group: Hep A, unspecified formulation
Administered: hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83)
HAVRIX (NDC 58160-0825-52)"
Date Administered: 11/23/2011
Additional Observations:
Dose #: 1
Doses in Series: 2
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: 6359RT33
Exp Date: 1/4/2012
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Deltoid (HL7 RD)

Vaccine Group: Hep A, unspecified formulation
Administered: hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83)
HAVRIX (NDC 58160-0825-52)"
Date Administered: 5/23/2012
Additional Observations:
Dose #: 2
Doses in Series: 2
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: 6359RT48
Exp Date: 9/11/2012
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL7 LD)

Vaccine Group: MMRV
Administered: measles, mumps, rubella, and varicella virus vaccine (CVX 94)
ProQuad (NDC 00006-4999-00)"
Date Administered: 10/23/2010
Additional Observations:
Dose #:
Doses in Series: 2
Valid Dose: N
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: 7W27V7491
Exp Date: 12/15/2010
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Subcutaneous (NCIT C38299, HL70162: SC)
Site: Left Thigh (HL7 LT)

Vaccine Group: MMRV
Administered: measles, mumps, rubella, and varicella virus vaccine (CVX 94)
ProQuad (NDC 00006-4999-00)"
Date Administered: 11/22/2012
Additional Observations:
Dose #: 1
Doses in Series: 2
Valid Dose: Y
Ordering Provider: Carlos Herrera
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901
Lot#: 7W87V3452
Exp Date: 4/13/2013
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Subcutaneous (NCIT C38299, HL70162: SC)
Site: Left Deltoid (HL7 LD)

Vaccine Group: MMRV
Administered: measles, mumps, rubella, and varicella virus vaccine (CVX 94)
ProQuad (NDC 00006-4999-00)"
Date Administered: Current Date
Additional Observations: Reaction (LOINC 31044-1)/fever of >40.5C (105F) within 48 hours of dose (CDCPHINVS VXC12)
Dose #: 2
Doses in Series: 2
Valid Dose: Y
Ordering Provider: Sandra Molina
Entered By: Frank Smith

Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: Sandra Molina
Administered at Location: 400 Shoreline Drive, Stamford Connecticut 06901
Lot#: 7W87V3687
Exp Date: 7/15/2015
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)
Route: Subcutaneous (NCIT C38299, HL70162: SC)
Site: Left Deltoid (HL7 LD)

The Following Vaccine Forecast is displayed:

Vaccine Group: IPV
Due Date: 11/22/2013
Earliest Date to Give: 11/22/2013
Latest Date to Give: 11/22/2015
Overdue Date: 11/23/2015
Immunization Schedule: ACIP

Vaccine Group: influenza, unspecified formulation
Due Date: 10/21/2016
Earliest Date to Give: 9/1/2016
Latest Date to Give: 2/29/2017
Overdue Date: 3/1/3027
Immunization Schedule: ACIP

Notes for Testers

No Note

5.2. Juan Marcel Gonzales Display Immunization Report

Produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.)

Test Story

Description

Following the vaccination visit, the provider uses the EMR to produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.)

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR. New vaccinations have been administered.

Post Condition

The patient/parent has been provided a patient immunization history report.

Test Objectives

Produce Standard Patient Immunization History Report: The EHR or other clinical software system produces a report of a patient's immunization history that is appropriate for various entities, such as schools and day-care centers.

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

5.2.1. Produce an immunization report for Juan Marcel Gonzales including all history

Test Step Type: SUT_MANUAL

The EMR is used to produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.).

Test Story

Description

Following the vaccination visit, the provider uses the EMR to produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.)

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR. New vaccinations have been administered.

Post Condition

The patient/parent has been provided a patient immunization history report.

Test Objectives

Produce Standard Patient Immunization History Report: The EHR or other clinical software system produces a report of a patient's immunization history that is appropriate for various entities, such as schools and day-care centers.

Evaluation Criteria

The following patient demographics are displayed:

Patient Identifier Number: Vendor Assigned

Patient Identifier Type Code: Vendor Assigned

Patient Name: Juan Marcel Gonzales

Date/Time of Birth: 11/23/2011 11:00am

Sex: Male

Patient Address: 4623 Standish Way, Stamford, CT 06903

Multiple Birth: N

Birth Order: NA

The following Vaccination History is displayed:

Vaccine Group: Hep B Peds NOS

Administered: hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)

ENGERIX-B (NDC 58160-0820-11)"

Date Administered: 11/23/2011

Additional Observations:

Dose #: 1

Doses in Series: 3

Valid Dose: Y

Ordering Provider: Jane Carter

Entered By: Lisa Sirtis

Entering Organization: Shoreline Hospital

Administered Amt: .05 mL

Administering Provider: Jane Carter

Administered at Location: 325 Shoreline Drive,

Stamford Connecticut 06901

Lot#: 6332FK34

Exp Date: 12/14/2011

Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)

Route: Intramuscular (NCIT C28161, HL70162: IM)

Site: Left Thigh (HL7 LT)

Vaccine Group: Hep B Peds NOS

Administered: hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)

ENGERIX-B (NDC 58160-0820-11)"

Date Administered: 12/23/2013

Additional Observations:

Dose #: 2

Doses in Series: 3

Valid Dose: Y

Ordering Provider: J. Rodriguez

Entered By: J. Martinez

Entering Organization: Oceanview Pediatrics

Administered Amt: .05 mL

Administering Provider: J. Martinez

Administered at Location: 4253 Standish Way, Stamford Connecticut 06903

Lot#: 6352FK2
Exp Date: 10/1/2011
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: Hep B Peds NOS
Administered: hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)
ENGERIX-B (NDC 58160-0820-11)"
Date Administered: Current Date
Additional Observations:
Dose #: 3
Doses in Series: 3
Valid Dose: Y
Ordering Provider: Sandra Molina
Entered By: Frank Smith
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: Sandra Molina
Administered at Location: 400 Shoreline Drive, Stamford Connecticut 06901
Lot#: 6332FK26
Exp Date: 8/25/2015
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL70162 LD)

Vaccine Group: diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered: diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)
DAPTACEL (NDC 49281-0286-01)"
Date Administered: 1/22/2012
Additional Observations:
Dose #: 1
Doses in Series: 5
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: D409QS2342
Exp Date: 11/30/2012
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered: diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)
DAPTACEL (NDC 49281-0286-01)"
Date Administered: 3/22/2012
Additional Observations:
Dose #: 2
Doses in Series: 5
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: D409QS2434
Exp Date: 9/4/2012
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered: diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)
DAPTACEL (NDC 49281-0286-01)"
Date Administered: 5/21/2012
Additional Observations:
Dose #: 3
Doses in Series: 5
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: D409QS3256
Exp Date: 12/1/2012
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered: diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)
DAPTACEL (NDC 49281-0286-01)"
Date Administered: 5/21/2012
Additional Observations:
Dose #: 3
Doses in Series: 5
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: D409QS3256
Exp Date: 12/1/2012
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: Hib, unspecified formulation
Administered: Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)

PedvaxHIB (NDC 00006-4897-00)"
Date Administered: 1/22/2012
Additional Observations:
Dose #: 1
Doses in Series: 4
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: 7M54K9255
Exp Date: 3/24/2012
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: Hib, unspecified formulation
Administered: Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)
PedvaxHIB (NDC 00006-4897-00)"
Date Administered: 3/22/2012
Additional Observations:
Dose #: 2
Doses in Series: 4
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: 7M55K3343
Exp Date: 10/30/2012
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: Hib, unspecified formulation
Administered: Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)
PedvaxHIB (NDC 00006-4897-00)"
Date Administered: 5/21/2012
Additional Observations:
Dose #: 3
Doses in Series: 4
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: 7M75K4577
Exp Date: 5/23/2012
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: Hib, unspecified formulation
Administered: Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)
PedvaxHIB (NDC 00006-4897-00)"
Date Administered: 11/22/2012
Additional Observations:
Dose #: 4
Doses in Series: 4
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: 7M53K5353
Exp Date: 2/22/2012
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL7 LD)

Vaccine Group: poliovirus vaccine, inactivated
Administered: poliovirus vaccine, inactivated (CVX 10)
IPOL (NDC 49281-0860-55)"
Date Administered: 1/22/2012
Additional Observations:
Dose #: 1
Doses in Series: 4
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: D333PV2444
Exp Date: 10/4/2012
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Subcutaneous (NCIT C38299, HL70162: SC)
Site: Left Deltoid (HL7 LD)

Vaccine Group: poliovirus vaccine, inactivated
Administered: poliovirus vaccine, inactivated (CVX 10)
IPOL (NDC 49281-0860-55)"
Date Administered: 3/22/2012
Additional Observations:
Dose #: 2
Doses in Series: 4

Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: D333PV4343
Exp Date: 3/23/2012
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Subcutaneous (NCIT C38299, HL70162: SC)
Site: Left Deltoid (HL7 LD)

Vaccine Group: poliovirus vaccine, inactivated
Administered: poliovirus vaccine, inactivated (CVX 10)
IPOL (NDC 49281-0860-55)
Date Administered: 5/21/2012
Additional Observations:
Dose #: 2
Doses in Series: 4
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: D335PV9654
Exp Date: 2/22/2013
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Subcutaneous (NCIT C38299, HL70162: SC)
Site: Left Deltoid (HL7 LD)

Vaccine Group: pneumococcal, unspecified formulation
Administered: pneumococcal conjugate vaccine, 13 valent (CVX 133)
PREVNAR 13 (NDC 00005-1971-05)"
Date Administered: 1/22/2012
Additional Observations:
Dose #: 1
Doses in Series: 4
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: P243V3321
Exp Date: 1/30/2012
Manufacturer: Pfizer, Inc (MVX PFR)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: pneumococcal, unspecified formulation
Administered: pneumococcal conjugate vaccine, 13 valent (CVX 133)
PREVNAR 13 (NDC 00005-1971-05)"
Date Administered: 3/22/2012
Additional Observations:
Dose #: 2
Doses in Series: 4
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: P343V8445
Exp Date: 3/30/2012
Manufacturer: Pfizer, Inc (MVX PFR)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: pneumococcal, unspecified formulation
Administered: pneumococcal conjugate vaccine, 13 valent (CVX 133)
PREVNAR 13 (NDC 00005-1971-05)"
Date Administered: 5/21/2012
Additional Observations:
Dose #: 3
Doses in Series: 4
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: P853V2175
Exp Date: 8/30/2012
Manufacturer: Pfizer, Inc (MVX PFR)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: pneumococcal, unspecified formulation
Administered: pneumococcal conjugate vaccine, 13 valent (CVX 133)
PREVNAR 13 (NDC 00005-1971-05)"
Date Administered: 11/22/2012
Additional Observations:
Dose #: 4
Doses in Series: 4
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: P853V58544
Exp Date: 4/18/2013

Manufacturer: Pfizer, Inc (MVX PFR)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL7 LD)

Vaccine Group: rotavirus, unspecified formulation
Administered: rotavirus, live, monovalent vaccine (CVX 119)
ROTARIX (NDC 58160-0854-52)"
Date Administered: 1/22/2012
Additional Observations:
Dose #: 1
Doses in Series: 3
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: 1 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: 6359RV533
Exp Date: 2/15/2010
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: rotavirus, unspecified formulation
Administered: rotavirus, live, monovalent vaccine (CVX 119)
ROTARIX (NDC 58160-0854-52)"
Date Administered: 3/22/2012
Additional Observations:
Dose #: 2
Doses in Series: 3
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: 1 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: 6359RV932
Exp Date: 5/10/2011
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: influenza, unspecified formulation
Administered: Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)
FLUZONE QUADRIVALENT (NDC 49281-0514-25)"
Date Administered: 9/22/2012
Additional Observations:
Dose #: 1
Doses in Series: 2
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .25 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: D8043IN8734
Exp Date: 3/12/2013
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: influenza, unspecified formulation
Administered: Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)
FLUZONE QUADRIVALENT (NDC 49281-0514-25)"
Date Administered: 10/20/2012
Additional Observations:
Dose #: 2
Doses in Series: 2
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .25 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: D8043IN8798
Exp Date: 3/12/2013
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Thigh (HL7 RT)

Vaccine Group: influenza, unspecified formulation
Administered: Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)
FLUZONE QUADRIVALENT (NDC 49281-0514-25)"
Date Administered: 10/30/2013
Additional Observations:
Dose #:
Doses in Series:
Valid Dose:
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .25 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: D8043IN8734
Exp Date: 5/22/2014
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL7 LD)

Vaccine Group: influenza, unspecified formulation
Administered: Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161)
FLUZONE QUADRIVALENT (NDC 49281-0514-25)"
Date Administered: Current Date
Additional Observations:

Dose #: 1
Doses in Series: 2
Valid Dose: Y
Ordering Provider: Sandra Molina
Entered By: Frank Smith
Entering Organization: Oceanview Pediatrics
Administered Amt: .25 mL
Administering Provider: Sandra Molina
Administered at Location: 400 Shoreline Drive, Stamford Connecticut 06901
Lot#: D8043IN8855
Exp Date: 7/28/2015
Manufacturer: Sanofi Pasteur Inc (MVX PMC)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Thigh (HL7 LT)

Vaccine Group: Hep A, unspecified formulation
Administered: hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83)
HAVRIX (NDC 58160-0825-52)"
Date Administered: 5/21/2013
Additional Observations:
Dose #: 1
Doses in Series: 2
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: 6359RT35
Exp Date: 1/4/2014
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Right Deltoid (HL7 RD)

Vaccine Group: Hep A, unspecified formulation
Administered: hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83)
HAVRIX (NDC 58160-0825-52)"
Date Administered: 12/1/2013
Additional Observations:
Dose #: 2
Doses in Series: 2
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: 6359RT47
Exp Date: 9/11/2013
Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)
Route: Intramuscular (NCIT C28161, HL70162: IM)
Site: Left Deltoid (HL7 LD)

Vaccine Group: MMRV
Administered: measles, mumps, rubella, and varicella virus vaccine (CVX 94)
ProQuad (NDC 00006-4999-00)"
Date Administered: 11/22/2012
Additional Observations:
Dose #: 1
Doses in Series: 2
Valid Dose: Y
Ordering Provider: J. Rodriguez
Entered By: J. Martinez
Entering Organization: Oceanview Pediatrics
Administered Amt: .05 mL
Administering Provider: J. Martinez
Administered at Location: 4253 Standish Way, Stamford Connecticut 06903
Lot#: 7W27V7632
Exp Date: 12/15/2016
Manufacturer: Merck Sharp & Dohme Corp (MVX MSD)

Route: Subcutaneous (NCIT C38299, HL70162: SC)
Site: Left Thigh (HL7 LT)

The Following Vaccine Forecast is displayed:
Vaccine Group: Dtap
Due Date: 11/22/2015
Earliest Date to Give: 11/22/2015
Latest Date to Give: 11/21/2017
Overdue Date: 11/22/2017
Immunization Schedule: ACIP

Vaccine Group: IPV
Due Date: 11/22/2015
Earliest Date to Give: 11/22/2015
Latest Date to Give: 11/21/2017
Overdue Date: 11/22/2017
Immunization Schedule: ACIP

Vaccine Group: Influenza
Due Date: 10/22/2015
Earliest Date to Give: 9/1/2015
Latest Date to Give: 1/31/2016
Overdue Date: 2/1/2016
Immunization Schedule: ACIP

Vaccine Group: MMR
Due Date: 11/22/2015
Earliest Date to Give: 11/22/2015
Latest Date to Give: 11/21/2017
Overdue Date: 11/22/2017
Immunization Schedule: ACIP

Vaccine Group: Varicella
Due Date: 11/22/2015
Earliest Date to Give: 11/22/2015

Latest Date to Give: 11/21/2017
Overdue Date: 11/22/2017
Immunization Schedule: ACIP

Notes for Testers

No Note

5.3. Mariana Gonzales Morales Display Immunization Report

Produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.)

Test Story

Description

Following the vaccination visit, the provider uses the EMR to produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.)

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR. New vaccinations have been administered.

Post Condition

The patient/parent has been provided a patient immunization history report.

Test Objectives

Produce Standard Patient Immunization History Report: The EHR or other clinical software system produces a report of a patient's immunization history that is appropriate for various entities, such as schools and day-care centers.

Evaluation Criteria

No evaluation criteria

Notes for Testers

No Note

5.3.1. Produce an immunization report for Juan Marcel Gonzales including all history

Test Step Type: SUT_MANUAL

The EMR is used to produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.).

Test Story

Description

Following the vaccination visit, the provider uses the EMR to produce an immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.)

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR. New vaccinations have been administered.

Post Condition

The patient/parent has been provided a patient immunization history report.

Test Objectives

Produce Standard Patient Immunization History Report: The EHR or other clinical software system produces a report of a patient's immunization history that is appropriate for various entities, such as schools and day-care centers.

Evaluation Criteria

The following patient demographics are displayed:

Patient Identifier Number: Vendor Supplied

Patient Identifier Type Code: Vendor Supplied

Patient Name: Mariela Gonzales Morales

Date/Time of Birth: 03/30/2015 11:00am

Sex: Female

Patient Address: 3321 Standish Way, Stamford, CT 06903

Multiple Birth: Y

Birth Order: 1

The following Vaccination History is displayed:

Vaccine Group: Hep B Peds NOS

Administered: hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)

ENGERIX-B (NDC 58160-0820-11)"

Date Administered: 11/23/2011

Additional Observations:

Dose #: 1

Doses in Series: 3

Valid Dose: Y

Ordering Provider: Jane Carter

Entered By: Lisa Sirtis

Entering Organization: Shoreline Hospital

Administered Amt: .05 mL

Administering Provider: Jane Carter

Administered at Location: 325 Shoreline Drive,

Stamford Connecticut 06901

Lot#: 6332FK34

Exp Date: 12/14/2011

Manufacturer: GlaxoSmithKline Biologicals SA (MVX SKB)

Route: Intramuscular (NCIT C28161, HL70162: IM)

Site: Left Thigh (HL7 LT)

The Following Vaccine Forecast is displayed:

Vaccine Group: Hep B Peds NOS

Due Date: 6/29/2015

Earliest Date to Give: 6/29/2015

Latest Date to Give: 7/29/2015

Overdue Date: 7/30/2015

Immunization Schedule: ACIP

Vaccine Group: Dtap

Due Date: 7/29/2015

Earliest Date to Give: 29-Jul-15

Latest Date to Give:

Overdue Date:

Immunization Schedule: ACIP

Vaccine Group: Hib
Due Date: 7/29/2015
Earliest Date to Give: 7/29/2015
Latest Date to Give:
Overdue Date:
Immunization Schedule: ACIP

Vaccine Group: IPV
Due Date: 7/29/2015
Earliest Date to Give: 7/29/2015
Latest Date to Give:
Overdue Date:
Immunization Schedule: ACIP

Vaccine Group: Pneumococcal conjugate
Due Date: 7/29/2015
Earliest Date to Give: 7/29/2015
Latest Date to Give:
Overdue Date:
Immunization Schedule: ACIP

Vaccine Group: Rotavirus
Due Date: 7/29/2015
Earliest Date to Give: 7/29/2015
Latest Date to Give:
Overdue Date:
Immunization Schedule: ACIP

Vaccine Group: Influenza
Due Date: Nov 26, 2015 or later
later
Earliest Date to Give: Nov 26, 2015

Latest Date to Give:
Overdue Date:
Immunization Schedule: ACIP

Vaccine Group: HepA
Due Date: 5/29/2016
Earliest Date to Give: 5/29/2016
Latest Date to Give: 5/29/2017
Overdue Date: 5/30/2017
Immunization Schedule: ACIP

Vaccine Group: MMR
Due Date: 5/29/2016
Earliest Date to Give: 5/29/2016
Latest Date to Give: 8/27/2016
Overdue Date: 8/28/2016
Immunization Schedule: ACIP

Notes for Testers

No Note

6. Cohort Report

This test will consist of generating a cohort report to list all patients who are overdue for immunizations showing all overdue immunizations with the associated due/overdue dates.

6.1. Overdue Immunizations

List all patients who are overdue for immunizations showing all overdue immunizations.

Test Story

Description

The provider periodically uses the EMR to identify the cohort of patients that are overdue for immunizations along with their contact information in order to send reminder notifications to the patients/parents.

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR. The vaccine forecast is available to the EMR.

Post Condition

The Cohort report for all patients that are overdue for immunizations is available to the provider through the EMR.

Test Objectives

Produce Population-Level Report: The EHR or other clinical system generates aggregate, population-level reports based on known patient immunization data.

Evaluation Criteria

The following patient information is provided on the cohort report:

Patient Name Mariela Gonzales
Morales
Preferred Contact Method Phone
Contact information using
preferred contact (email, text,
phone, mailing address) (203) 555-1214

Patient Identifier Number Vendor Supplied
Patient Identifier Type Code Vendor Supplied

Date/Time of Birth 3/30/2015 11am
Sex Female
Vaccine Group Hep B Peds NOS
Latest Date to Give 5/29/15
Overdue Date 5/29/15
Dose # 2
Dose in Series 3
Link to full record Vendor Supplied

Patient Name Juana Maria Gonzales
Morales
Preferred Contact Method Phone
Contact information using
preferred contact (email, text,
phone, mailing address) (203) 555-1214

Patient Identifier Number Vendor Supplied
Patient Identifier Type Code Vendor Supplied
Date/Time of Birth 3/30/2015 11:15am
Sex Female
Vaccine Group Hep B Peds NOS
Latest Date to Give 5/29/15
Overdue Date 5/29/15
Dose # 2
Dose in Series 3
Link to full record Vendor Supplied

Notes for Testers

No Note



6.1.1. Produce Overdue Immunizations Cohort Report

Test Step Type: SUT_MANUAL

The provider uses the EMR to create a report for all patient vaccinations overdue with the contact information.

Test Story

Description

The provider periodically uses the EMR to identify the cohort of patients that are overdue for immunizations along with their contact information in order to send reminder notifications to the patients/parents.

Comments

No Comments

Pre Condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EMR. The vaccine forecast is available to the EMR.

Post Condition

The Cohort report for all patients that are overdue for immunizations is available to the provider through the EMR.

Test Objectives

Produce Population-Level Report: The EHR or other clinical system generates aggregate, population-level reports based on known patient immunization data.

Evaluation Criteria

The following patient information is provided on the cohort report:

| | |
|---|--|
| | Mariela |
| Patient Name | Gonzales Morales |
| Preferred Contact Method | Phone |
| Contact information using preferred contact (email, text, phone, mailing address) | (203) 555-1214 |
| Patient Identifier Number | Vendor Supplied |
| Patient Identifier Type Code | Vendor Supplied |
| Date/Time of Birth | 5/30/2015 11am |
| Sex | Female |
| Vaccine Group | Hep B Peds NOS |
| Latest Date to Give | 5/29/15 |
| Overdue Date | 5/29/15 |
| Dose # | 2 |
| Dose in Series | 3 |
| Link to full record | Vendor Supplied |
| | |
| Patient Name | Juana Maria Gonzales Morales |
| Preferred Contact Method | Phone |
| Contact information using preferred contact (email, text, phone, mailing address) | (203) 555-1214 |
| Patient Identifier Number | Vendor Supplied |
| Patient Identifier Type Code | Vendor Supplied |
| Date/Time of Birth | 5/30/2015 11:15am |
| Sex | Female |
| Vaccine Group | Hep B Peds NOS |
| Latest Date to Give | 5/29/15 |
| Overdue Date | 5/29/15 |

Dose #
Dose in Series
Link to full record

 2
 3
 Vendor
Supplied

Notes for Testers

No Note