```
 <performer typeCode="PPRF">
     <assignedEntity>
         <id extension="1" root="2.16.840.1.113883.19" />
         <code code="2086S0120X" codeSystem="2.16.840.1.113883.6.101" codeSystemName="NUCC"
displayName="Pediatric Surgeon" />
         <addr>
             <streetAddressLine>1013 Healthcare Drive</streetAddressLine>
             <city>Ann Arbor</city>
             <state>MI</state>
             <postalCode>99999</postalCode>
             <country>US</country>
         </addr>
         <telecom value="tel:(555)555-1013" />
         <assignedPerson>
             <name>
                 <prefix>Dr.</prefix>
                 <given>Carl</given>
                 <family>Cutter</family>
             </name>
         </assignedPerson>
     </assignedEntity>
 </performer>
```

Figure 32: Operative Note serviceEvent Example

```
<serviceEvent classCode="PROC">
    <code code="801460020" codeSystem="2.16.840.1.113883.6.96" codeSystemName="SNOMED CT"
displayName="Laparoscopic Appendectomy" />
    <effectiveTime>
        <low value="201003292240" />
        <width value="15" unit="m" />
    </effectiveTime>
    ...

</serviceEvent>
```

1.1.16 Procedure Note (V3)

[ClinicalDocument: identifier urn:hl7ii:2.16.840.1.113883.10.20.22.1.6:2015-08-01 (open)]

Table 45: Procedure Note (V3) Contexts

Contained By:	Contains:
	Assessment Section (optional)
	Review of Systems Section (optional)
	Chief Complaint Section (optional)
	Reason for Visit Section (optional)
	Chief Complaint and Reason for Visit Section (optional)

Contained By:	Contains:
	History of Present Illness Section (optional)
	Procedure Description Section (required)
	Procedure Disposition Section (optional)
	Procedure Estimated Blood Loss Section (optional)
	Procedure Specimens Taken Section (optional)
	Medical (General) History Section (optional)
	Procedure Implants Section (optional)
	Medications Section (entries optional) (V2) (optional)
	Plan of Treatment Section (V2) (optional)
	Medications Administered Section (V2) (optional)
	Anesthesia Section (V2) (optional)
	Procedures Section (entries optional) (V2) (optional)
	Procedure Indications Section (V2) (required)
	Assessment and Plan Section (V2) (optional)
	Planned Procedure Section (V2) (optional)
	US Realm Date and Time (DT.US.FIELDED) (required)
	Complications Section (V3) (required)
	Past Medical History (V3) (optional)
	Procedure Findings Section (V3) (optional)
	Postprocedure Diagnosis Section (V3) (required)
	Physical Exam Section (V3) (optional)
	Social History Section (V3) (optional)
	Family History Section (V3) (optional)
	Allergies and Intolerances Section (entries optional) (V3) (optional)

A Procedure Note encompasses many types of non-operative procedures including interventional cardiology, gastrointestinal endoscopy, osteopathic manipulation, and many other specialty fields. Procedure Notes are differentiated from Operative Notes because they do not involve incision or excision as the primary act.

The Procedure Note is created immediately following a non-operative procedure. It records the indications for the procedure and, when applicable, postprocedure diagnosis, pertinent events of the procedure, and the patient's tolerance for the procedure. It should be detailed enough to justify the procedure, describe the course of the procedure, and provide continuity of care.

Table 46: Procedure Note (V3) Constraints Overview

XPath	Card.	Verb	Data Type	CONF#	Value
ClinicalDocument (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.1.6:2015-08-01)					
templateId	1..1	SHALL		1198-8496	
@root	1..1	SHALL		1198-10050	2.16.840.1.113883.10.20.22.1.6
@extension	1..1	SHALL		1198-32520	2015-08-01
code	1..1	SHALL		1198-17182	
@code	1..1	SHALL		1198-17183	urn:oid:2.16.840.1.113883.11.20.6.1 (ProcedureNoteDocumentType Codes)
participant	0..*	MAY		1198-8504	
@typeCode	1..1	SHALL		1198-8505	urn:oid:2.16.840.1.113883.5.88 (HL7ParticipationFunction) = IND
functionCode	1..1	SHALL		1198-8506	urn:oid:2.16.840.1.113883.5.88 (HL7ParticipationFunction) = PCP
associatedEntity/@classCode	1..1	SHALL		1198-8507	urn:oid:2.16.840.1.113883.5.90 (HL7ParticipationType) = PROV
associatedPerson	1..1	SHALL		1198-8508	
documentationOf	1..*	SHALL		1198-8510	
serviceEvent	1..1	SHALL		1198-10061	
effectiveTime	1..1	SHALL		1198-10062	US Realm Date and Time (DT.US.FIELDED) (identifier: urn:oid:2.16.840.1.113883.10.20.22.5.3
low	1..1	SHALL		1198-26449	
performer	1..1	SHALL		1198-8520	
@typeCode	1..1	SHALL		1198-8521	urn:oid:2.16.840.1.113883.5.90 (HL7ParticipationType) = PPRF
assignedEntity	1..1	SHALL		1198-14911	
code	0..1	SHOULD		1198-14912	urn:oid:2.16.840.1.114222.4.11.1066 (Healthcare Provider Taxonomy)

XPath	Card.	Verb	Data Type	CONF#	Value
performer	0..*	MAY		[1198-32732](#)	
@typeCode	1..1	SHALL		[1198-32734](#)	urn:oid:2.16.840.1.113883.5.90 (HL7ParticipationType) = SPRF
assignedEntity	1..1	SHALL		[1198-32733](#)	
code	0..1	SHOULD		[1198-32735](#)	urn:oid:2.16.840.1.114222.4.11.1066 (Healthcare Provider Taxonomy)
authorization	0..1	MAY		[1198-32412](#)	
@typeCode	1..1	SHALL		[1198-32413](#)	urn:oid:2.16.840.1.113883.5.1002 (HL7ActRelationshipType) = AUTH
consent	1..1	SHALL		[1198-32414](#)	
@classCode	1..1	SHALL		[1198-32415](#)	urn:oid:2.16.840.1.113883.5.6 (HL7ActClass) = CONS
@moodCode	1..1	SHALL		[1198-32416](#)	urn:oid:2.16.840.1.113883.5.1001 (HL7ActMood) = EVN
statusCode	1..1	SHALL		[1198-32417](#)	
componentOf	0..1	SHOULD		[1198-30871](#)	
encompassingEncounter	1..1	SHALL		[1198-30872](#)	
id	0..*	SHOULD		[1198-32395](#)	
code	1..1	SHALL		[1198-30873](#)	
encounterParticipant	0..1	MAY		[1198-30874](#)	
@typeCode	1..1	SHALL		[1198-30875](#)	REF
location	1..*	SHALL		[1198-30876](#)	
healthCareFacility	1..1	SHALL		[1198-30877](#)	
id	1..*	SHALL		[1198-30878](#)	
component	1..1	SHALL		[1198-9588](#)	
structuredBody	1..1	SHALL		[1198-30352](#)	
component	1..1	SHALL		[1198-30353](#)	

XPath	Card.	Verb	Data Type	CONF#	Value
section	1..1	SHALL		1198-30387	Complications Section (V3) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.37:2015-08-01
component	1..1	SHALL		1198-30355	
section	1..1	SHALL		1198-30356	Procedure Description Section (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.27
component	1..1	SHALL		1198-30357	
section	1..1	SHALL		1198-30358	Procedure Indications Section (V2) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.29:2014-06-09
component	1..1	SHALL		1198-30359	
section	1..1	SHALL		1198-30360	Postprocedure Diagnosis Section (V3) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.36:2015-08-01
component	0..1	MAY		1198-30361	
section	1..1	SHALL		1198-30362	Assessment Section (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.8
component	0..1	MAY		1198-30363	
section	1..1	SHALL		1198-30364	Assessment and Plan Section (V2) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.9:2014-06-09
component	0..1	MAY		1198-30365	
section	1..1	SHALL		1198-30366	Plan of Treatment Section (V2) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.10:2014-06-09
component	0..1	MAY		1198-30367	
section	1..1	SHALL		1198-30368	Allergies and Intolerances Section (entries optional) (V3) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.6:2015-08-01
component	0..1	MAY		1198-30369	
section	1..1	SHALL		1198-	Anesthesia Section (V2)

XPath	Card.	Verb	Data Type	CONF#	Value
				30370	(identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.25:2014-06-09
component	0..1	MAY		1198-30371	
section	1..1	SHALL		1198-30372	Chief Complaint Section (identifier: urn:oid:1.3.6.1.4.1.19376.1.5.3.1.1.13.2.1
component	0..1	MAY		1198-30373	
section	1..1	SHALL		1198-30374	Chief Complaint and Reason for Visit Section (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.13
component	0..1	MAY		1198-30375	
section	1..1	SHALL		1198-30376	Family History Section (V3) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.15:2015-08-01
component	0..1	MAY		1198-30377	
section	1..1	SHALL		1198-30378	Past Medical History (V3) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.20:2015-08-01
component	0..1	MAY		1198-30379	
section	1..1	SHALL		1198-30380	History of Present Illness Section (identifier: urn:oid:1.3.6.1.4.1.19376.1.5.3.1.3.4
component	0..1	MAY		1198-30381	
section	1..1	SHALL		1198-30382	Medical (General) History Section (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.39
component	0..1	MAY		1198-30383	
section	1..1	SHALL		1198-30384	Medications Section (entries optional) (V2) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.1:2014-06-09
component	0..1	MAY		1198-30388	
section	1..1	SHALL		1198-30389	Medications Administered Section (V2) (identifier:

XPath	Card.	Verb	Data Type	CONF#	Value
					urn:hl7ii:2.16.840.1.113883.10.20.22.2.38:2014-06-09
component	0..1	MAY		1198-30390	
section	1..1	SHALL		1198-30391	Physical Exam Section (V3) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.2.10:2015-08-01
component	0..1	MAY		1198-30392	
section	1..1	SHALL		1198-30393	Planned Procedure Section (V2) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.30:2014-06-09
component	0..1	MAY		1198-30394	
section	1..1	SHALL		1198-30395	Procedure Disposition Section (identifier: urn:oid:2.16.840.1.113883.10.20.18.2.12
component	0..1	MAY		1198-30396	
section	1..1	SHALL		1198-30397	Procedure Estimated Blood Loss Section (identifier: urn:oid:2.16.840.1.113883.10.20.18.2.9
component	0..1	MAY		1198-30398	
section	1..1	SHALL		1198-30399	Procedure Findings Section (V3) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.28:2015-08-01
component	0..1	MAY		1198-30400	
section	1..1	SHALL		1198-30401	Procedure Implants Section (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.40
component	0..1	MAY		1198-30402	
section	1..1	SHALL		1198-30403	Procedure Specimens Taken Section (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.31
component	0..1	MAY		1198-30404	
section	1..1	SHALL		1198-30405	Procedures Section (entries optional) (V2) (identifier: urn:hl7ii:2.16.840.1.113883.1

XPath	Card.	Verb	Data Type	CONF#	Value
					0.20.22.2.7:2014-06-09
component	0..1	MAY		1198-30406	
section	1..1	SHALL		1198-30407	Reason for Visit Section (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.12
component	0..1	MAY		1198-30408	
section	1..1	SHALL		1198-30409	Review of Systems Section (identifier: urn:oid:1.3.6.1.4.1.19376.1.5.3.1.3.18
component	0..1	MAY		1198-30410	
section	1..1	SHALL		1198-30411	Social History Section (V3) (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.17:2015-08-01

1.1.17 Properties

1. Conforms to **US Realm Header (V3)** template (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.1.1:2015-08-01).
2. **SHALL** contain exactly one [1..1] **templateId** (CONF:1198-8496) such that it
   a. **SHALL** contain exactly one [1..1] **@root**="2.16.840.1.113883.10.20.22.1.6" (CONF:1198-10050).
   b. **SHALL** contain exactly one [1..1] **@extension**="2015-08-01" (CONF:1198-32520).
   c. When asserting this templateId, all C-CDA 2.1 section and entry templates that had a previous version in C-CDA R1.1 **SHALL** include both the C-CDA 2.1 templateId and the C-CDA R1.1 templateId root without an extension. See C-CDA R2.1 Volume 1 - Design Considerations for additional detail (CONF:1198-32941).

The Procedure Note recommends use of a single document type code, 28570-0 "Procedure Note", with further specification provided by author or performer, setting, or specialty. When pre-coordinated codes are used, any coded values describing the author or performer of the service act or the practice setting must be consistent with the LOINC document type.

3. **SHALL** contain exactly one [1..1] **code** (CONF:1198-17182).
   a. This code **SHALL** contain exactly one [1..1] **@code**, which **SHALL** be selected from ValueSet **ProcedureNoteDocumentTypeCodes** urn:oid:2.16.840.1.113883.11.20.6.1 **DYNAMIC** (CONF:1198-17183).

1.1.17.1 participant

The participant element in the Procedure Note header follows the General Header Constraints for participants.

4. **MAY** contain zero or more [0..*] **participant** (CONF:1198-8504) such that it
    a. **SHALL** contain exactly one [1..1] **@typeCode**="IND" Individual (CodeSystem: HL7ParticipationFunction urn:oid:2.16.840.1.113883.5.88 **STATIC**) (CONF:1198-8505).
    b. **SHALL** contain exactly one [1..1] **functionCode**="PCP" Primary Care Physician (CodeSystem: HL7ParticipationFunction urn:oid:2.16.840.1.113883.5.88 **STATIC**) (CONF:1198-8506).
    c. **SHALL** contain exactly one [1..1] **associatedEntity/@classCode**="PROV" Provider (CodeSystem: HL7ParticipationType urn:oid:2.16.840.1.113883.5.90 **STATIC**) (CONF:1198-8507).
        i. This associatedEntity/@classCode **SHALL** contain exactly one [1..1] **associatedPerson** (CONF:1198-8508).

1.1.17.2 documentationOf

A serviceEvent is required in the Procedure Note to represent the main act, such as a colonoscopy or a cardiac stress study, being documented. It must be equivalent to or further specialize the value inherent in the ClinicalDocument/@code (such as where the ClinicalDocument/@code is simply "Procedure Note" and the procedure is "colonoscopy"), and it shall not conflict with the value inherent in the ClinicalDocument/@code, as such a conflict would create ambiguity. A serviceEvent/effectiveTime element indicates the time the actual event (as opposed to the encounter surrounding the event) took place. serviceEvent/effectiveTime may be represented two different ways in the Procedure Note. For accuracy to the second, the best method is effectiveTime/low together with effectiveTime/high. If a more general time, such as minutes or hours, is acceptable OR if the duration is unknown, an effectiveTime/low with a width element may be used. If the duration is unknown, the appropriate HL7 null value such as "NI" or "NA" must be used for the width element.

5. **SHALL** contain at least one [1..*] **documentationOf** (CONF:1198-8510) such that it
    a. **SHALL** contain exactly one [1..1] **serviceEvent** (CONF:1198-10061).
        i. This serviceEvent **SHALL** contain exactly one [1..1] **US Realm Date and Time (DT.US.FIELDED)** (identifier: urn:oid:2.16.840.1.113883.10.20.22.5.3) (CONF:1198-10062).
            1. This effectiveTime **SHALL** contain exactly one [1..1] **low** (CONF:1198-26449).
            2. The serviceEvent/effectiveTime **SHALL** be present with effectiveTime/low (CONF:1198-8513).
            3. If a width is not present, the serviceEvent/effectiveTime **SHALL** include effectiveTime/high (CONF:1198-8514).
            4. When only the date and the length of the procedure are known a width element **SHALL** be present and the serviceEvent/effectiveTime/high **SHALL NOT** be present (CONF:1198-8515).

1.1.17.3 performer

This performer participant represents clinicians who actually and principally carry out the serviceEvent. Typically, these are clinicians who have the appropriate privileges in their institutions such as gastroenterologists, interventional radiologists, and family practice

physicians. Performers may also be non-physician providers (NPPs) who have other significant roles in the procedure such as a radiology technician, dental assistant, or nurse. Any assistants are identified as a secondary performer (SPRF) in a second performer participant.

    ii. This serviceEvent **SHALL** contain exactly one [1..1] **performer** (CONF:1198-8520) such that it

        1. **SHALL** contain exactly one [1..1] **@typeCode**="PPRF" Primary Performer (CodeSystem: HL7ParticipationType urn:oid:2.16.840.1.113883.5.90 **STATIC**) (CONF:1198-8521).

        2. **SHALL** contain exactly one [1..1] **assignedEntity** (CONF:1198-14911).

            a. This assignedEntity **SHOULD** contain zero or one [0..1] **code**, which **SHALL** be selected from ValueSet **Healthcare Provider Taxonomy** urn:oid:2.16.840.1.114222.4.11.1066 **DYNAMIC** (CONF:1198-14912).

1.1.17.4 performer

This performer identifies any assistants.

    iii. This serviceEvent **MAY** contain zero or more [0..*] **performer** (CONF:1198-32732) such that it

        1. **SHALL** contain exactly one [1..1] **@typeCode**="SPRF" Secondary Performer (CodeSystem: HL7ParticipationType urn:oid:2.16.840.1.113883.5.90) (CONF:1198-32734).

        2. **SHALL** contain exactly one [1..1] **assignedEntity** (CONF:1198-32733).

            a. This assignedEntity **SHOULD** contain zero or one [0..1] **code**, which **SHALL** be selected from ValueSet **Healthcare Provider Taxonomy** urn:oid:2.16.840.1.114222.4.11.1066 **DYNAMIC** (CONF:1198-32735).

    iv. The value of Clinical Document /documentationOf/serviceEvent/code **SHALL** be from ICD9 CM Procedures (codeSystem 2.16.840.1.113883.6.104), CPT-4 (codeSystem 2.16.840.1.113883.6.12), or values descending from 71388002 (Procedure) from the SNOMED CT (codeSystem 2.16.840.1.113883.6.96) ValueSet 2.16.840.1.113883.3.88.12.80.28 Procedure *DYNAMIC* (CONF:1198-8511).

Authorization represents consent. Consent, if present, shall be represented by authorization/consent.

6. **MAY** contain zero or one [0..1] **authorization** (CONF:1198-32412).

    a. The authorization, if present, **SHALL** contain exactly one [1..1] **@typeCode**="AUTH" authorized by (CodeSystem: HL7ActRelationshipType urn:oid:2.16.840.1.113883.5.1002) (CONF:1198-32413).

    b. The authorization, if present, **SHALL** contain exactly one [1..1] **consent** (CONF:1198-32414).

---

i. This consent **SHALL** contain exactly one [1..1] **@classCode**="CONS" consent (CodeSystem: HL7ActClass urn:oid:2.16.840.1.113883.5.6) (CONF:1198-32415).

ii. This consent **SHALL** contain exactly one [1..1] **@moodCode**="EVN" event (CodeSystem: HL7ActMood urn:oid:2.16.840.1.113883.5.1001) (CONF:1198-32416).

iii. This consent **SHALL** contain exactly one [1..1] **statusCode** (CONF:1198-32417).

1.1.17.5 componentOf

7. **SHOULD** contain zero or one [0..1] **componentOf** (CONF:1198-30871).

    a. The componentOf, if present, **SHALL** contain exactly one [1..1] **encompassingEncounter** (CONF:1198-30872).

        i. This encompassingEncounter **SHOULD** contain zero or more [0..*] **id** (CONF:1198-32395).

        ii. This encompassingEncounter **SHALL** contain exactly one [1..1] **code** (CONF:1198-30873).

        iii. This encompassingEncounter **MAY** contain zero or one [0..1] **encounterParticipant** (CONF:1198-30874) such that it

            1. **SHALL** contain exactly one [1..1] **@typeCode**="REF" Referrer (CONF:1198-30875).

        iv. This encompassingEncounter **SHALL** contain at least one [1..*] **location** (CONF:1198-30876).

            1. Such locations **SHALL** contain exactly one [1..1] **healthCareFacility** (CONF:1198-30877).

                a. This healthCareFacility **SHALL** contain at least one [1..*] **id** (CONF:1198-30878).

1.1.17.6 component

8. **SHALL** contain exactly one [1..1] **component** (CONF:1198-9588).

    a. This component **SHALL** contain exactly one [1..1] **structuredBody** (CONF:1198-30352).

        i. This structuredBody **SHALL** contain exactly one [1..1] **component** (CONF:1198-30353) such that it

            1. **SHALL** contain exactly one [1..1] **Complications Section (V3)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.37:2015-08-01) (CONF:1198-30387).

        ii. This structuredBody **SHALL** contain exactly one [1..1] **component** (CONF:1198-30355) such that it

            1. **SHALL** contain exactly one [1..1] **Procedure Description Section** (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.27) (CONF:1198-30356).

        iii. This structuredBody **SHALL** contain exactly one [1..1] **component** (CONF:1198-30357) such that it

1. **SHALL** contain exactly one [1..1] **Procedure Indications Section (V2)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.29:2014-06-09) (CONF:1198-30358).

iv. This structuredBody **SHALL** contain exactly one [1..1] **component** (CONF:1198-30359) such that it

1. **SHALL** contain exactly one [1..1] **Postprocedure Diagnosis Section (V3)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.36:2015-08-01) (CONF:1198-30360).

v. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30361) such that it

1. **SHALL** contain exactly one [1..1] **Assessment Section** (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.8) (CONF:1198-30362).

vi. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30363) such that it

1. **SHALL** contain exactly one [1..1] **Assessment and Plan Section (V2)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.9:2014-06-09) (CONF:1198-30364).

vii. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30365) such that it

1. **SHALL** contain exactly one [1..1] **Plan of Treatment Section (V2)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.10:2014-06-09) (CONF:1198-30366).

viii.This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30367) such that it

1. **SHALL** contain exactly one [1..1] **Allergies and Intolerances Section (entries optional) (V3)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.6:2015-08-01) (CONF:1198-30368).

ix. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30369) such that it

1. **SHALL** contain exactly one [1..1] **Anesthesia Section (V2)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.25:2014-06-09) (CONF:1198-30370).

x. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30371) such that it

1. **SHALL** contain exactly one [1..1] **Chief Complaint Section** (identifier: urn:oid:1.3.6.1.4.1.19376.1.5.3.1.1.13.2.1) (CONF:1198-30372).

xi. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30373) such that it

1. **SHALL** contain exactly one [1..1] **Chief Complaint and Reason for Visit Section** (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.13) (CONF:1198-30374).

xii. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30375) such that it

1. **SHALL** contain exactly one [1..1] **Family History Section (V3)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.15:2015-08-01) (CONF:1198-30376).

xiii. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30377) such that it

1. **SHALL** contain exactly one [1..1] **Past Medical History (V3)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.20:2015-08-01) (CONF:1198-30378).

xiv. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30379) such that it

1. **SHALL** contain exactly one [1..1] **History of Present Illness Section** (identifier: urn:oid:1.3.6.1.4.1.19376.1.5.3.1.3.4) (CONF:1198-30380).

xv. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30381) such that it

1. **SHALL** contain exactly one [1..1] **Medical (General) History Section** (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.39) (CONF:1198-30382).

xvi. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30383) such that it

1. **SHALL** contain exactly one [1..1] **Medications Section (entries optional) (V2)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.1:2014-06-09) (CONF:1198-30384).

xvii. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30388) such that it

1. **SHALL** contain exactly one [1..1] **Medications Administered Section (V2)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.38:2014-06-09) (CONF:1198-30389).

xviii. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30390) such that it

1. **SHALL** contain exactly one [1..1] **Physical Exam Section (V3)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.2.10:2015-08-01) (CONF:1198-30391).

xix. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30392) such that it

1. **SHALL** contain exactly one [1..1] **Planned Procedure Section (V2)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.30:2014-06-09) (CONF:1198-30393).

xx. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30394) such that it

1. **SHALL** contain exactly one [1..1] **Procedure Disposition Section** (identifier: urn:oid:2.16.840.1.113883.10.20.18.2.12) (CONF:1198-30395).

xxi. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30396) such that it

1. **SHALL** contain exactly one [1..1] **Procedure Estimated Blood Loss Section** (identifier: urn:oid:2.16.840.1.113883.10.20.18.2.9) (CONF:1198-30397).

xxii. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30398) such that it

1. **SHALL** contain exactly one [1..1] **Procedure Findings Section (V3)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.28:2015-08-01) (CONF:1198-30399).

xxiii. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30400) such that it

1. **SHALL** contain exactly one [1..1] **Procedure Implants Section** (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.40) (CONF:1198-30401).

xxiv. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30402) such that it

1. **SHALL** contain exactly one [1..1] **Procedure Specimens Taken Section** (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.31) (CONF:1198-30403).

xxv. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30404) such that it

1. **SHALL** contain exactly one [1..1] **Procedures Section (entries optional) (V2)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.7:2014-06-09) (CONF:1198-30405).

xxvi. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30406) such that it

1. **SHALL** contain exactly one [1..1] **Reason for Visit Section** (identifier: urn:oid:2.16.840.1.113883.10.20.22.2.12) (CONF:1198-30407).

xxvii. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30408) such that it

1. **SHALL** contain exactly one [1..1] **Review of Systems Section** (identifier: urn:oid:1.3.6.1.4.1.19376.1.5.3.1.3.18) (CONF:1198-30409).

xxviii. This structuredBody **MAY** contain zero or one [0..1] **component** (CONF:1198-30410) such that it

    1. **SHALL** contain exactly one [1..1] **Social History Section (V3)** (identifier: urn:hl7ii:2.16.840.1.113883.10.20.22.2.17:2015-08-01) (CONF:1198-30411).

xxix. This structuredBody **SHALL** contain an Assessment and Plan Section (V2) (2.16.840.1.113883.10.20.22.2.9:2014-06-09), or an Assessment Section (2.16.840.1.113883.10.20.22.2.8) and a Plan of Treatment Section (V2) (2.16.840.1.113883.10.20.22.2.10:2014-06-09) (CONF:1198-30412).

xxx. This structuredBody **SHALL NOT** contain an Assessment and Plan Section (V2) (2.16.840.1.113883.10.20.22.2.9:2014-06-09) when either an Assessment Section (2.16.840.1.113883.10.20.22.2.8) or a Plan of Treatment Section (V2) (2.16.840.1.113883.10.20.22.2.10:2014-06-09) is present (CONF:1198-30414).

xxxi. This structuredBody **SHALL NOT** contain a Chief Complaint and Reason for Visit Section (2.16.840.1.113883.10.20.22.2.13) when either a Chief Complaint Section (1.3.6.1.4.1.19376.1.5.3.1.1.13.2.1) or a Reason for Visit Section (2.16.840.1.113883.10.20.22.2.12) is present (CONF:1198-30415).

Table 47: ProcedureNoteDocumentTypeCodes

Value Set: ProcedureNoteDocumentTypeCodes urn:oid:2.16.840.1.113883.11.20.6.1
A value set of LOINC document codes for Procedure Notes.

Specific URL Pending
Value Set Source: **http://search.loinc.org**

Code	Code System	Code System OID	Print Name
28570-0	LOINC	urn:oid:2.16.840.1.113883.6.1	Provider-unspecified Procedure note
11505-5	LOINC	urn:oid:2.16.840.1.113883.6.1	Physician procedure note
18744-3	LOINC	urn:oid:2.16.840.1.113883.6.1	Bronchoscopy study
18745-0	LOINC	urn:oid:2.16.840.1.113883.6.1	Cardiac catheterization study
18746-8	LOINC	urn:oid:2.16.840.1.113883.6.1	Colonoscopy study
18751-8	LOINC	urn:oid:2.16.840.1.113883.6.1	Endoscopy study
18753-4	LOINC	urn:oid:2.16.840.1.113883.6.1	Flexible sigmoidoscopy study
18836-7	LOINC	urn:oid:2.16.840.1.113883.6.1	Cardiac stress study Procedure
28577-5	LOINC	urn:oid:2.16.840.1.113883.6.1	Dentist procedure note
28625-2	LOINC	urn:oid:2.16.840.1.113883.6.1	Podiatry procedure note
…			

Figure 33: Procedure Note performer Example

```
<performer typeCode="PPRF">
    <assignedEntity>
      <id extension="IO00017" root="2.16.840.1.113883.19.5" />
      <code code="207RG0100X" codeSystem="2.16.840.1.113883.6.96" codeSystemName="NUCC"
displayName="Gastroenterologist" />
      <addr>
        <streetAddressLine>1001 Hospital Lane</streetAddressLine>
        <city>Ann Arbor</city>
        <state>MI</state>
        <postalCode>99999</postalCode>
        <country>US</country>
      </addr>
      <telecom value="tel:(999)555-1212" />
      <assignedPerson>
        <name>
          <prefix>Dr.</prefix>
          <given>Tony</given>
          <family>Tum</family>
        </name>
      </assignedPerson>
    </assignedEntity>
</performer>
```

Figure 34: Procedure Note serviceEvent Example

```
<documentationOf>
    <serviceEvent classCode="PROC">
      <code code="118155006" codeSystem="2.16.840.1.113883.6.96"
            codeSystemName="SNOMED CT" displayName="Gastrointestinal tract endoscopy" />
      <effectiveTime>
        <low value="201003292240" />
        <width value="15" unit="m" />
      </effectiveTime>
      ...
    </serviceEvent>
</documentationOf>
```

1.1.18 Progress Note (V3)

[ClinicalDocument: identifier urn:hl7ii:2.16.840.1.113883.10.20.22.1.9:2015-08-01 (open)]

Table 48: Progress Note (V3) Contexts

Contained By:	Contains:
	Assessment Section (optional)
	Review of Systems Section (optional)
	Chief Complaint Section (optional)
	Objective Section (optional)
	Subjective Section (optional)
	Medications Section (entries optional) (V2) (optional)