

# A.

## Data Definition Tables

### A.1 INTRODUCTION

The HL7 specifications were prepared using a data dictionary database. Certain outputs from that database are included in the chapters that define the abstract messages. These outputs list the data fields and field notes associated with a segment. Other Data Dictionary outputs are included here to comprise appendix A. These include:

- a list of the message types that comprise the HL7 protocol
- a list of the segment IDs and segment names
- a list of each data element organized alphabetically by name
- a list of the IDs and names of all tables of coded values
- a cross reference of table IDs vs. data element names
- a list of the contents of each table
- a list of all data element names.

### A.2 MESSAGE TYPES

Message	Description	Chapter
ACK	General acknowledgment message	2
ADR	ADT response	3
ADT	ADT message	3
ARD	Ancillary RPT (display) (for backward compatibility only)	7
BAR	Add/change billing account	6
CNQ	Cancel query	2
CSU	Unsolicited clinical study data	7
DFT	Detail financial transaction	6
DSR	Display response	2
EDR	Enhanced display response	2
ERP	Event replay response	2
EQQ	Embedded query language query	2

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Message	Description	Chapter
MCF	Delayed acknowledgment	2
MDM	Documentation message	9
MFN	Master files notification	8
MFK	Master files application acknowledgment	8
MFD	Master files delayed application acknowledgment	8
MFQ	Master files query	8
MFR	Master files query response	8
ORF	Observation. result/record response	7
ORM	Order message	4
ORR	Order acknowledgment message	4
ORU	Observation result/unsolicited	7
OSQ	Order status query	4
OSR	Order status response	4
QRY	Query, original Mode	2
PEX	Product experience	7
PGL	Patient goal	12
PIN	Patient information	11
PPG	Patient pathway (goal-oriented) message	12
PPP	Patient pathway (problem-oriented)	12
PPR	Patient problem	12
PPT	Patient pathway (goal oriented) response	12
PPV	Patient goal response	12
PRR	Patient problem response	12
PTR	Patient pathway (problem-oriented) response	12
RAR	Pharmacy administration information	4
RAS	Pharmacy administration message	4
RCI	Return clinical information	11
RCL	Return clinical list	11
RDE	Pharmacy encoded order message	4
RDR	Pharmacy dispense information	4
RDS	Pharmacy dispense message	4
RGV	Pharmacy give message	4
RGR	Pharmacy dose information	4
REF	Patient referral	11
RER	Pharmacy encoded order information	4
ROR	Pharmacy prescription order response	4
RPA	Return patient authorization	11
RPI	Return patient information	11
RPL	Return patient display list	11
RPR	Return patient list	11
RQA	Request patient authorization	11
RQC	Request clinical information	11
RQI	Request patient information	11
RRA	Pharmacy administration acknowledgment	4
RRD	Pharmacy dispense acknowledgment	4
RRE	Pharmacy encoded order acknowledgment	4
RRG	Pharmacy give acknowledgment	4
RRI	Return patient referral	11

Message	Description	Chapter
SIU	Schedule information unsolicited	10
SPQ	Stored procedure request	2
SQM	Schedule query	10
SQR	Schedule query response	10
SRM	Study registration	10
SRM	Schedule request	10
SRR	Scheduled request response	10
SUR	Summary product experience report	7
TBR	Tabular response	2
UDM	Unsolicited display message	2
VQQ	Virtual table query	2
VXQ	Query for vaccination record	4
VXX	Vaccination query response with multiple PID matches	4
VXR	Vaccination query record response	4
VXU	Unsolicited vaccination record update	4

## A.3 SEGMENTS

Segment	Description	Chapter
ACC	Accident segment	6
ADD	Addendum segment	2
AIG	Appointment information - general resource	10
AIL	Appointment information - location resource segment	10
AIP	Appointment information - personnel resource segment	10
AIS	Appointment information - service segment	10
AL1	Patient allergy information segment	3
APR	Appointment preferences segment	10
ARQ	Appointment request segment	10
AUT	Authorization information segment	11
BHS	Batch header segment	2
BLG	Billing segment	4
BTS	Batch trailer segment	2
CDM	Charge description segment	8
CM0	Clinical study master segment	8
CM1	Clinical study phase master segment	8
CM2	Clinical study schedule master segment	8
CSP	Clinical study phase segment	7
CSR	Clinical study registration segment	7
CSS	Clinical study data schedule segment	7
CTD	Contact data segment	11
CTI	Clinical trial information segment	7
DG1	Diagnosis segment	6
DRG	Diagnosis related group segment	6
DSC	Continuation pointer segment	2
DSP	Display data segment	2
EQL	Embedded query language segment	2

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Segment	Description	Chapter
ERQ	Event replay query segment	2
ERR	Error segment	2
EVN	Event type segment	3
FAC	Facility segment	7
FHS	File header segment	2
FT1	Financial transaction segment	6
FTS	File trailer segment	2
GT1	Guarantor segment	6
IN1	Insurance segment	6
IN2	Insurance additional information segment	6
IN3	Insurance additional information - certification segment	6
LCC	Location charge code segment	8
LCH	Location characteristic segment	8
LDP	Location department segment	8
LOC	Location identification segment	8
LRL	Location relationship segment	8
MFA	Master file acknowledgment segment	8
MFE	Master file entry segment	8
MFI	Master file identification segment	8
MRG	Merge patient information segment	3
MSA	Message acknowledgment segment	2
MSH	Message header segment	2
NK1	Next of kin / associated parties segment	3
NPU	Bed status update segment	3
NTE	Notes and comments segment	2
OBR	Observation request segment	4
OBX	Observation/result segment	7
ODS	Dietary orders, supplements, and preferences segment	4
ODT	Diet tray instructions segment	4
OM1	General segment - fields that apply to most observations	8
OM2	Numeric observation segment	8
OM3	Categorical test/observation segment	8
OM4	Observations that require specimens segment	8
OM5	Observation batteries (sets) segment	8
OM6	Observations that are calculated from other observations segment	8
ORC	Common order segment	4
PCR	Possible causal relationship segment	7
PD1	Patient demographic segment	3
PDC	Product detail country segment	7
PEO	Product experience observation segment	7
PES	Product experience sender segment	7
PID	Patient identification segment	3
PR1	Procedures segment	6
PRA	Practitioner detail segment	8
PRC	Pricing segment	8
PRD	Provider data segment	11
PSR	Product summary header segment	7
PV1	Patient visit segment	3

Segment	Description	Chapter
PV2	Patient visit - additional information segment	3
QAK	Query acknowledgment segment	2
QRD	Original-style query definition segment	2
QRF	Original-style query filter segment	2
RDF	Table row definition segment	2
RDT	Table row data segment	2
RF1	Referral information segment	11
RQ1	Requisition detail-1 segment	4
RQD	Requisition detail segment	4
RXA	Pharmacy/treatment administration segment	4
RXC	Pharmacy/treatment component order segment	4
RXD	Pharmacy/treatment dispense segment	4
RXE	Pharmacy/treatment encoded order segment	4
RXG	Pharmacy/treatment give segment	4
RXO	Pharmacy/treatment prescription order segment	4
RXR	Pharmacy/treatment route segment	4
SCH	Schedule activity information segment	10
STF	Staff identification segment	8
SPR	Stored procedure request definition segment	2
TXA	Document notification segment	9
UB1	UB82 data segment	6
UB2	UB92 data segment	6
URD	Results/update definition segment	2
URS	Unsolicited selection segment	2
VTQ	Virtual table query request segment	2

## A.4 HL7 AND USER-DEFINED TABLES - ALPHABETIC SORT

For use notes, see Control section 2.4.3.7. When a table is used in an HL7 CE data type, its third component, "name of coding system" may have been adopted from some existing standard (for example, see list of tables in figures 2-2 and 2-3). If the table is not part of an existing standard, the third component, "name of coding system" constructed by appending the table number to the string "HL7". Thus, field RXR-administrative site, is a CE data type, which refers to table xxxx. Its "name of coding system" component is HL7xxxx.

Type	Table	Name	Used
HL7	0078	Abnormal Flags	OBX-8
HL7	0155	Accept/Application Acknowledgment Conditions	MSH-15, MSH-16
User	0050	Accident Code	ACC-2
User	0129	Accommodation Code	PV2-2
User	0117	Account Status	PV1-41
HL7	0008	Acknowledgment Code	MSA-1
HL7	0323	Action Code	RXA-22
HL7	0287	Action Code	GOL-1, PRB-1, ROL-2, PTH-1
HL7	0251	Action Taken in Response to the Event	PCR-21
HL7	0183	Active/Inactive	STF-7, CDM-8, PRC-16
HL7	0190	Address Type	AD data type

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Type	Table	Name	Used
HL7	0165	Administration Method	RXR-4
HL7	0163	Administrative Site	RXR-2
HL7	0164	Administration Device	RXR-3
User	0007	Admission Type	PV1-4
User	0023	Admit Source	PV1-14
User	0128	Allergy Severity	AL1-4
User	0127	Allergy Type	AL1-2
HL7	0161	Allow Substitution	RXO-9
User	0279	Allow Substitution Codes	AIS-8, AIG-12, AIL-10, AIP-10
HL7	0211	Alternate Character Sets	MSH-18
User	0009	Ambulatory Status	PV1-15, NK1-18, GT1-34, IN2-34
User	0193	Amount Class	IN2-29^2
User	0146	Amount Type	IN2-28^2
User	0019	Anesthesia Code	PR1-9
User	0317	Annotations	ANO waveform
User	0276	Appointment Reason Codes	ARQ-7, SCH-7
User	0277	Appointment Type Codes	ARQ-8, SCH-8
User	0135	Assignment of Benefits	IN1-20
User	0021	Bad Debt Agency Code	PV1-31
User	0116	Bed Status	PV1-40, NPU-2
User	0293	Billing Category	PRC-15
User	0022	Billing Status	IN1-32
HL7	0252	Causality Observations	PCR-22
User	0288	Census Tract	XAD data type
HL7	0337	Certification Status	
User	0141	Champus Rank/Grade	IN2-15
User	0140	Champus Service	IN2-14
User	0142	Champus Status	IN2-16
User	0218	Charge Adjustment	PV2-30, GT1-26
User	0269	Charge on Indicator	PRC-18
HL7	0122	Charge Type	BLG-2
User	0032	Charge/Price Indicator	PV1-21
HL7	0061	Check Digit Scheme	CK data type
User	0171	Citizenship	PID-26, NK1-19, GT1-35, IN2-33
User	0042	Company Plan Code	IN1-35
HL7	0322	Completion Status	RXA-21
User	0043	Condition Code	UB1-7, UB2-3
User	0177	Confidentiality code	OM1-30
HL7	0318	Confirmation Provided By	PEO-23
User	0059	Consent Code	PR1-13
User	0222	Contact Reason	NK1-29, GT1-47, IN2-54, IN2-51
User	0131	Contact Role	NK1-7, CTD-1
User	0044	Contract Code	PV1-24
User	0173	Coordination of Benefits	IN1-21
User	0289	County/parish	XAD data type
User	0045	Courtesy Code	PV1-22
User	0309	Coverage Type	IN1-47
User	0046	Credit Rating	PV1-23

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Type	Table	Name	Used
HL7	0158	Date/Time Selection Qualifier	QRF-8, URS-8
HL7	0267	Days of the Week	LDP-14
User	0149	Days Type	IN3-11
HL7	0107	Deferred Response Type	QRD-5
HL7	0102	Delayed Acknowledgment Type	MSA-5
User	0111	Delete Account Code	PV1-34
User	0184	Department	STF-8
User	0049	Department Code	FT1-13
User	0319	Department Cost Center	RQD-7
HL7	0170	Derived Specimen	OM4-2
User	0228	Diagnosis Classification	DG1-19
User	0051	Diagnosis Code	FT1-19
HL7	0053	Diagnosis Coding Method	DG1-2
User	0052	Diagnosis Type	DG1-6
HL7	0074	Diagnostic Service Section ID	OBR-24
User	0114	Diet Type	PV1-38
HL7	0159	Diet Type	ODS-1
User	0334	Disabled Person	
User	0112	Discharged Disposition	PV1-36, PV2-27
User	0113	Discharged to Location	PV1-37
HL7	0321	Dispense Method	RXE-30, RXD-24
HL7	0273	Document Availability Status	TXA-19
HL7	0314	Document Change Reason	TXA-21
HL7	0271	Document Completion Status	TXA-17
HL7	0272	Document Confidentiality Status	TXA-18
HL7	0274	Document Modification Status	NO LONGER USED
HL7	0275	Document Storage Status	TXA-20
User	0270	Document Type	TXA-2
User	0055	DRG Code	DG1-8, DRG-1
User	0056	DRG Grouper Review Code	DG1-10, DRG-4
HL7	0255	Duration Categories	OM1-43
User	0144	Eligibility Source	IN2-27
User	0328	Employee Classification	NK1-11
User	0139	Employer Information Data	IN2-4
User	0066	Employment Status	GT1-20, IN1-42
HL7	0225	Escort Required	OBR-42
User	0189	Ethnic Group	PID-22, NK1-28, GT1-44, IN2-42
HL7	0240	Event Consequence	PEO-11
HL7	0239	Event Expected	PEO-10
HL7	0237	Event Qualification	PEO-8
User	0062	Event Reason	EVN-4
HL7	0238	Event Seriousness	PEO-9
HL7	0003	Event Type	MSH-9^2
HL7	0331	Facility Type	FAC-2
User	0024	Fee Schedule	FT1-17
HL7	0178	File Level Event Code	MFI-3
User	0278	Filler Status Codes	SCH-22, AIS-9, AIG-13, AIL-11, AIP-11
User	0064	Financial Class	PV1-20

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Type	Table	Name	Used
User	0266	Gender Indicator	LDP-13
User	0249	Generic Product	PCR-2
User	0068	Guarantor Type	GT1-10
User	0295	Handicap	NK1-36
User	0310	Handicap	IN1-48
User	0069	Hospital Service	PV1-10
User	0203	Identifier Type	CK data type
HL7	0243	Identity may be Divulged	PEO-25
HL7	0253	Indirect Exposure Mechanism	PCR-23
User	0232	Insurance Company Contact Reason	IN2-57
User	0285	Insurance Company ID Codes	AUT-2
User	0072	Insurance Plan ID	FT1-14, IN1-46, AUT-1, IN1-2
User	0073	Interest Rate Code	PV1-28
User	0320	Item Natural Account Code	RQD-8
User	0327	Job Class	NK1-11
User	0311	Job Status	NK1-34, GT1-53, IN2-48
HL7	0254	Kind of Quantity	OM1-42
User	0296	Language	NK1-20
User	0263	Level of Care	LOC-14
User	0220	Living Arrangement	NK1-21, PD1-2, GT1-37, IN2-35
User	0223	Living Dependency	NK1-17, PD1-1, GT1-33, IN2-33
HL7	0315	Living Will	PD1-7
User	0079	Location	NPU-1
User	0324	Location Characteristic ID	LCH-4
User	0264	Location Department	LDP-2, LOC-2
User	0261	Location Equipment	LOC-11
User	0325	Location Relationship ID	LRL-4
User	0137	Mail Claim Party	IN2-5
HL7	0191	Main Type of Reference Data	TXA-3
User	0118	Major Diagnostic Category	DG1-7
HL7	0227	Manufacturers of vaccines (code = MVX)	RXA-17
User	0002	Marital Status	PID-16, NK1-14, GT1-30, IN2-43
HL7	0330	Marketing Basis	PDC-10
User	0176	Master File Application Identifier	MFI-2
HL7	0175	Master File Identifier Code	MFI-1
HL7	0076	Message Type	MSH-9^1
User	0181	MFN Record Level Error Return	MFA-4
HL7	0290	MIME base64 encoding Characters	ED data type
User	0259	Modality	OM1-47
HL7	0200	Name Type	XPN data type
User	0212	Nationality	PID-28, NK1-27, GT1-43, IN2-41
HL7	0080	Nature of Abnormal Testing	OBX-10
HL7	0257	Nature of Challenge	OM1-44
HL7	0174	Nature of Test/Observation	OM1-18
HL7	0332	Network Source Type	NST-3
User	0233	Non-concur Code/Description	IN3-12
User	0143	Non-covered Insurance Code	IN2-24
HL7	0085	Observation Result Status Codes Interpretation	OBX-11



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Type	Table	Name	Used
User	0188	Operator ID	EVN-5
HL7	0119	Order Control Code	ORC-1
HL7	0038	Order Status	ORC-5
HL7	0316	Organ Donor	PD1-8
User	0204	Organizational Name Type	XON data type
User	0083	Outlier Type	DG1-11, DRG-5
User	0229	Outlier Type	DG1-11, DRG-5
User	0268	Override	CDM-5, PRC-13
User	0004	Patient Class	PV1-2
User	0260	Patient Location Type	LOC-3
HL7	0241	Patient Outcome	PEO-12
User	0216	Patient Status	PV2-24
User	0018	Patient Type	PV1-18, FT1-18
User	0148	Penalty Type	IN3-5
User	0084	Performed By	FT1-20
User	0010	Physician ID	various XCN
User	0086	Plan ID	IN1-15
User	0312	Policy Scope	IN2-59
User	0313	Policy Source	IN2-60
User	0147	Policy Type	IN2-29^1
User	0186	Practitioner Category	PRA-4
User	0338	Practitioner ID number type	
User	0087	Pre-admit Test Indicator	PV1-12
User	0150	Pre-certification Patient Type	IN3-20
HL7	0185	Preferred Method of Contact	STF-16, PRD-7
HL7	0205	Price Type	CP data type
HL7	0242	Primary Observer's Qualification	PEO-22, PCR-19
HL7	0027	Priority	OM4-13
User	0262	Privacy Level	LOC-13
User	0088	Procedure Code	PR1-3
User	0089	Procedure Coding Method	PR1-2
User	0230	Procedure Functional Type	PR1-6
User	0133	Procedure Practitioner Identifier Code Type	PR1-12
HL7	0103	Processing ID	MSH-11^1
HL7	0207	Processing Mode	MSH-11^2
HL7	0168	Processing Priority	OM1-25
User	0246	Product Available for Inspection	PCR-13
User	0245	Product Problem	PCR-11
HL7	0248	Product Source	PCR-17
HL7	0187	Provider Billing	PRA-4
User	0286	Provider Role	PRD-1
User	0215	Publicity Code	PV2-21, NK1-22, GT1-38, IN2-36
User	0213	Purge Status	PV2-16
HL7	0126	Quantity Limited Request	QRD-7
HL7	0329	Quantity Method	PSH-8
HL7	0091	Query Priority	QRD-3
User	0208	Query Response Status	QAK-2
HL7	0108	Query Results Level	QRD-12, URD-7

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Type	Table	Name	Used
HL7	0106	Query/Response Format Code	QRD-2, EQL-2, VTQ-2, SPR-2
User	0005	Race	PID-10, NK1-35, GT1-46, IN2-71
User	0092	Re-admission Indicator	PV1-13
HL7	0180	Record Level Event Code	MFE-1, MFA-1
User	0219	Recurring Service	PV2-31
User	0284	Referral Category	RF1-5
User	0282	Referral Disposition	RF1-4
User	0280	Referral Priority	RF1-2
User	0283	Referral Status	RF1-1
User	0281	Referral Type	RF1-3
HL7	0250	Relatedness Assessment	PCR-20
HL7	0210	Relational Conjunction	VTQ-5
HL7	0209	Relational Operator	VTQ-5
User	0063	Relationship	NK1-3, NK1-31, GT1-11, IN1-17, IN2-62
HL7	0258	Relationship Modifier	OM1-45
User	0093	Release Information	IN1-27
User	0006	Religion	PID-17, NK1-25, GT1-41, IN2-39
HL7	0109	Report Priority	URD-2
HL7	0235	Report Source	PES-12
HL7	0234	Report Timing	PES-11
HL7	0236	Reported To	PES-13
HL7	0169	Reporting Priority	OM1-26
HL7	0121	Response Flag	ORC-6
HL7	0179	Response Level	MFI-6
HL7	0123	Result Status	OBR-25
User	0145	Room Type	IN2-28^1
HL7	0162	Route of Administration	RXR-1
HL7	0166	RX Component Type	RXC-1
User	0152	Second Opinion Documentation Received	IN3-24
User	0151	Second Opinion Status	IN3-23
HL7	0206	Segment Action Code	IN2-31, IN3-26
User	0115	Servicing Facility	PV1-39
User	0001	Sex	PID-8, NK1-15, GT1-9, IN1-43, STF-5
User	0244	Single Use Device	PCR-9
HL7	0105	Source of Comment	NTE-2
User	0214	Special Program Codes	PV2-18
User	0265	Specialty Type	LDP-4
HL7	0065	Specimen Action Code	OBR-11
HL7	0070	Specimen Source Codes	OBR-15
User	0182	Staff Type	STF-4
HL7	0247	Start of Evaluation	PCR-15
User	0231	Student Status	GT1-40, IN2-38, NK1-24
HL7	0167	Substitution Status	RXE-9, RXD-11, RXG-10
HL7	0291	Subtype of Referenced Data	RP data type
HL7	0202	Telecommunication Equipment Type	XTN data type
HL7	0201	Telecommunication Use Code	XTN data type
HL7	0256	Time Delay Post Challenge	OM1-44
User	0294	Time Selection Criteria Parameter Class Codes	APR-1

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Type	Table	Name	Used
User	0132	Transaction Code	FT1-7, CDM-1, PRC-1
User	0017	Transaction Type	FT1-6
User	0110	Transfer to Bad Debt Code	PV1-29
HL7	0224	Transport Arranged	OBR-41
HL7	0124	Transportation Mode	OBR-30
HL7	0160	Tray Type	ODT-1
User	0098	Type of Agreement	IN1-31
User	0098	Type of agreement	IN1-31
HL7	0292	Vaccines Administered	RXA-5
User	0153	Value Code	UB1-10, UB2-6
HL7	0125	Value Type	OBX-2, OM1-3
HL7	0104	Version ID	MSH-12
User	0172	Veterans Military Status	PID-27
User	0099	VIP Indicator	PV1-16
User	0192	Visit ID Type	PV1-50
User	0326	Visit Indicator	PV1-51
User	0217	Visit Priority	PV2-25
User	0130	Visit User Code	PV2-7
HL7	0048	What Subject Filter	QRD-9, URD-4
HL7	0100	When to Charge	BLG-1
HL7	0156	Which Date/Time Qualifier	QRF-6, URS-6
HL7	0157	Which Date/Time Status Qualifier	QRF-7, URS-7
HL7	0136	Yes/No Indicator	

### A.5 HL7 AND USER-DEFINED TABLES - NUMERIC SORT

Type	Table	Name	Value	Description
User	0001	Sex		
	0001		F	Female
	0001		M	Male
	0001		O	Other
	0001		U	Unknown
User	0002	Marital Status		
	0002		A	Separated
	0002		D	Divorced
	0002		M	Married
	0002		S	Single
	0002		W	Widowed
HL7	0003	Event Type		
	0003		A01	ADT/ACK - Admit a patient
	0003		A02	ADT/ACK - Transfer a patient
	0003		A03	ADT/ACK - Discharge a patient
	0003		A04	ADT/ACK - Register a patient
	0003		A05	ADT/ACK - Preadmit a patient
	0003		A06	ADT/ACK - Transfer an outpatient to inpatient
	0003		A07	ADT/ACK - Transfer an inpatient to outpatient
	0003		A08	ADT/ACK - Update patient information
	0003		A09	ADT/ACK - Patient departing

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Type	Table	Name	Value	Description
	0003		A10	ADT/ACK - Patient arriving
	0003		A11	ADT/ACK - Cancel admit
	0003		A12	ADT/ACK - Cancel transfer
	0003		A13	ADT/ACK - Cancel discharge
	0003		A14	ADT/ACK - Pending admit
	0003		A15	ADT/ACK - Pending transfer
	0003		A16	ADT/ACK - Pending discharge
	0003		A17	ADT/ACK - Swap patients
	0003		A18	ADT/ACK - Merge patient information
	0003		A19	QRY/ADR - Patient query
	0003		A20	ADT/ACK - Nursing/Census application updates
	0003		A21	ADT/ACK - Leave of absence - out (leaving)
	0003		A22	ADT/ACK - Leave of absence - in (returning)
	0003		A23	ADT/ACK - Delete a patient record
	0003		A24	ADT/ACK - Link patient information
	0003		A25	ADT/ACK - Cancel pending discharge
	0003		A26	ADT/ACK - Cancel pending transfer
	0003		A27	ADT/ACK - Cancel pending admit
	0003		A28	ADT/ACK - Add person information
	0003		A29	ADT/ACK - Delete person information
	0003		A30	ADT/ACK - Merge person information
	0003		A31	ADT/ACK - Update person information
	0003		A32	ADT/ACK - Cancel patient arriving
	0003		A33	ADT/ACK - Cancel patient departing
	0003		A34	ADT/ACK - Merge patient information - patient ID only
	0003		A35	ADT/ACK - Merge patient information - account number only
	0003		A36	ADT/ACK - Merge patient information - patient ID and account number
	0003		A37	ADT/ACK - Unlink patient information
	0003		A38	ADT/ACK - Cancel pre-admit
	0003		A39	ADT/ACK - Merge person - external ID
	0003		A40	ADT/ACK - Merge person - internal ID
	0003		A41	ADT/ACK - Merge account - patient account number
	0003		A42	ADT/ACK - Merge visit - visit number
	0003		A43	ADT/ACK - Move patient information - internal ID
	0003		A44	ADT/ACK - Move account information - patient account number
	0003		A45	ADT/ACK - Move visit information - visit number
	0003		A46	ADT/ACK - Change external ID
	0003		A47	ADT/ACK - Change internal ID
	0003		A48	ADT/ACK - Change alternate patient ID
	0003		A49	ADT/ACK - Change patient account number
	0003		A50	ADT/ACK - Change visit number
	0003		A51	ADT/ACK - Change alternate visit ID
	0003		C01	CRM - Register a patient on a clinical trial
	0003		C02	CRM - Cancel a patient registration on clinical trial (for clerical mistakes only)
	0003		C02	CRM - Correct/update registration information
	0003		C04	CRM - Patient has gone off a clinical trial
	0003		C05	CRM - Patient enters phase of clinical trial

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0003		C06	CRM - Cancel patient entering a phase (clerical mistake)
	0003		C07	CRM - Correct/update phase information
	0003		C08	CRM - Patient has gone off phase of clinical trial
	0003		C09	CSU - Automated time intervals for reporting, like monthly
	0003		C10	CSU - Patient completes the clinical trial
	0003		C11	CSU - Patient completes a phase of the clinical trial
	0003		C12	CSU - Update/correction of patient order/result information
	0003		CNQ	QRY/EQQ/VQQ/RQQ - Cancel query
	0003		I01	RQI/RPI - Request for insurance information
	0003		I02	RQI/RPL - Request/receipt of patient selection display list
	0003		I03	RQI/RPR - Request/receipt of patient selection list
	0003		I04	RQD/RPI - Request for patient demographic data
	0003		I05	RQC/RCI - Request for patient clinical information
	0003		I06	RQC/RCL - Request/receipt of clinical data listing
	0003		I07	PIN/ACK - Unsolicited insurance information
	0003		I08	RQA/RPA - Request for treatment authorization information
	0003		I09	RQA/RPA - Request for modification to an authorization
	0003		I10	RQA/RPA - Request for resubmission of an authorization
	0003		I11	RQA/RPA - Request for cancellation of an authorization
	0003		I12	REF/RRI - Patient referral
	0003		I13	REF/RRI - Modify patient referral
	0003		I14	REF/RRI - Cancel patient referral
	0003		I15	REF/RRI - Request patient referral status
	0003		M01	MFN/MFK - Master file not otherwise specified (for backward compatibility only)
	0003		M02	MFN/MFK - Master file - Staff Practitioner
	0003		M03	MFN/MFK - Master file - Test/Observation
	0003		varies	MFQ/MFR - Master files query (use event same as asking for e.g., M05 - location)
	0003		M04	MFD/ACK - Master files delayed application acknowledgment
	0003		M05	MFN/MFK - Patient location master file
	0003		M06	MFN/MFK - Charge description master file
	0003		M07	MFN/MFK - Clinical study without phases but with schedules master file
	0003		M08	MFN/MFK - Test/Observation (Numeric) master file
	0003		M09	MFN/MFK - Test/Observation (Categorical) master file
	0003		M10	MFN/MFK - Test/Observation batteries master file
	0003		M11	MFN/MFK - Test/Calculated observations master file
	0003		O01	ORM - Order message (also RDE, RDS, RGV, RAS,
	0003		O02	ORR - Order response (also RRE, RRD, RRG, RRA,
	0003		R05	QRY/DSR - query for display results
	0003		R06	UDM - unsolicited update/display results
	0003		RAR	RAR - Pharmacy administration information query response
	0003		RDR	RDR - Pharmacy dispense information query response
	0003		RER	RER - Pharmacy encoded order information query response
	0003		RGR	RGR - Pharmacy dose information query response
	0003		ROR	ROR - Pharmacy prescription order query response
	0003		P01	BAR/ACK - Add and update patient account
	0003		P02	BAR/ACK - Purge patient account

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0003		P03	DFT/ACK - Post detail financial transaction
	0003		P04	QRY/DSP - Generate bill and A/R statements
	0003		P05	BAR/ACK - Update account
	0003		P06	BAR/ACK - End account
	0003		Q01	QRY/DSR - Query sent for immediate response
	0003		Q02	QRY/ACK - Query sent for deferred response
	0003		Q03	DSR/ACK - Deferred response to a query
	0003		Q05	UDM/ACK - Unsolicited display update
	0003		Q06	OSQ/OSR - Query for order status
	0003		R01	ORU/ACK - Unsolicited transmission of an observation
	0003		R02	QRY - Query for results of observation
	0003		R03	Display-oriented results, query/unsol. update (for backward compatibility only)
	0003		R04	ORF - Response to query; transmission of requested observation
	0003		RAR	RAR - Pharmacy administration information query response
	0003		RER	RER-Pharmacy encoded order information query response
	0003		R0R	R0R - Pharmacy prescription order query response
	0003		S01	SRM/SRR - Request new appointment booking
	0003		S02	SRM/SRR - Request appointment rescheduling
	0003		S03	SRM/SRR - Request appointment modification
	0003		S04	SRM/SRR - Request appointment cancellation
	0003		S05	SRM/SRR - Request appointment discontinuation
	0003		S06	SRM/SRR - Request appointment deletion
	0003		S07	SRM/SRR - Request addition of service/resource on appointment
	0003		S08	SRM/SRR - Request modification of service/resource on appointment
	0003		S09	SRM/SRR - Request cancellation of service/resource on appointment
	0003		S10	SRM/SRR - Request discontinuation of service/resource on appointment
	0003		S11	SRM/SRR - Request deletion of service/resource on appointment
	0003		S12	SIU/ACK - Notification of new appointment booking
	0003		S13	SIU/ACK - Notification of appointment rescheduling
	0003		S14	SIU/ACK - Notification of appointment modification
	0003		S15	SIU/ACK - Notification of appointment cancellation
	0003		S16	SIU/ACK - Notification of appointment discontinuation
	0003		S17	SIU/ACK - Notification of appointment deletion
	0003		S18	SIU/ACK - Notification of addition of service/resource on appointment
	0003		S19	SIU/ACK - Notification of modification of service/resource on appointment
	0003		S20	SIU/ACK - Notification of cancellation of service/resource on appointment
	0003		S21	SIU/ACK - Notification of discontinuation of service/resource on appointment
	0003		S22	SIU/ACK - Notification of deletion of service/resource on appointment
	0003		S23	SIU/ACK - Notification of blocked schedule time slot(s)
	0003		S24	SIU/ACK - Notification of open ("unblocked") schedule time slot(s)
	0003		S25	SQM/SQR - Query schedule information
	0003		S26	Notification that patient did not show up for scheduled

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
				appointment
	0003		T01	MDM/ACK - Original document notification
	0003		T02	MDM/ACK - Original document notification and content
	0003		T03	MDM/ACK - Document status change notification
	0003		T04	MDM/ACK - Document status change notification and content
	0003		T05	MDM/ACK - Document addendum notification
	0003		T06	MDM/ACK - Document addendum notification and content
	0003		T07	MDM/ACK - Document replace notification
	0003		T08	MDM/ACK - Document replace notification and content
	0003		T09	MDM/ACK - Document cancel notification
	0003		V01	VXQ - Query for vaccination record
	0003		V02	VXX - Response to vaccination query returning multiple PID matches
	0003		V03	VXR - Vaccination record response
	0003		V04	VXU - Unsolicited vaccination record update
	0003		W01	ORU - Waveform result, unsolicited transmission of requested information
	0003		W02	QRF - Waveform result, response to query
User	0004	Patient Class		
	0004		E	Emergency
	0004		I	Inpatient
	0004		O	Outpatient
	0004		P	Preadmit
	0004		R	Recurring Patient
	0004		B	Obstetrics
User	0005	Race		
	0005			No suggested values
User	0006	Religion		
	0006			No suggested values
User	0007	Admission Type		
	0007		A	Accident
	0007		E	Emergency
	0007		L	Labor and Delivery
	0007		R	Routine
HL7	0008	Acknowledgment Code		
	0008		AA	Original mode: Application Accept Enhanced mode: Application acknowledgment: Accept
	0008		AE	Original mode: Application Error Enhanced mode: Application acknowledgment: Error
	0008		AR	Original mode: Application Reject Enhanced mode: Application acknowledgment: Reject
	0008		CA	Enhanced mode: Application acknowledgment: Commit Accept
	0008		CE	Enhanced mode: Application acknowledgment: Commit Error
	0008		CR	Enhanced mode: Application acknowledgment: Commit Reject
User	0009	Ambulatory Status		
	0009		A0	No functional limitations
	0009		A1	Ambulates with assistive device
	0009		A2	Wheelchair/stretchers bound
	0009		A3	Comatose; non-responsive

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0009		A4	Disoriented
	0009		A5	Vision Impaired
	0009		A6	Hearing Impaired
	0009		A7	Speech Impaired
	0009		A8	Non-English Speaking
	0009		A9	Functional level unknown
	0009		B1	Oxygen Therapy
	0009		B2	Special Equipment (tubes, IV's, catheters)
	0009		B3	Amputee
	0009		B4	Mastectomy
	0009		B5	Paraplegic
	0009		B6	Pregnant
User	0010	Physician ID		
	0010			No suggested values
User	0017	Transaction Type		
	0017		CG	Charge
	0017		CD	Credit
	0017		PY	Payment
	0017		AJ	Adjustment
User	0018	Patient Type		
	0018			No suggested values
User	0019	Anesthesia Code		
	0019			No suggested values
User	0021	Bad Dept Agency Code		
	0021			No suggested values
User	0022	Billing Status		
	0022			No suggested values.
User	0023	Admit Source		
	0023			No suggested values
User	0024	Fee Schedule		
	0024			No suggested values
HL7	0027	Priority		
	0027		S	Stat (do immediately)
	0027		A	As soon as possible (a priority lower than stat)
	0027		R	Routine
	0027		P	Preoperative (to be done prior to surgery)
	0027		T	Timing critical (do as near as possible to requested time)
User	0032	Charge/Price Indicator		
	0032			No suggested values
HL7	0038	Order Status		
	0038		A	Some, but not all, results available
	0038		CA	Order was canceled
	0038		CM	Order is completed
	0038		DC	Order was discontinued
	0038		ER	Error, order not found
	0038		HD	Order is on hold
	0038		IP	In process, unspecified
	0038		RP	Order has been replaced



## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0038		SC	In process, scheduled
User	0042	Company Plan Code		
	0042			No suggested values
User	0043	Condition Code		
	0043			No suggested values
User	0044	Contract Code		
	0044			No suggested values
User	0045	Courtesy Code		
	0045			No suggested values
User	0046	Credit Rating		
	0046			No suggested values
HL7	0048	What Subject Filter		
	0048		ADV	Advice/diagnosis
	0048		ANU	Nursing unit lookup (returns patients in beds, excluding empty beds)
	0048		APN	Patient name lookup
	0048		APP	Physician lookup
	0048		ARN	Nursing unit lookup (returns patients in beds, including empty beds)
	0048		APM	Medical record number query, returns visits for a medical record number
	0048		APA	Account number query, return matching visit
	0048		CAN	Cancel. Used to cancel a query
	0048		DEM	Demographics
	0048		FIN	Financial
	0048		GOL	Goals
	0048		MRI	Most recent inpatient
	0048		MRO	Most recent outpatient
	0048		NCK	Network clock
	0048		NSC	Network status change
	0048		NST	Network statistic
	0048		ORD	Order
	0048		OTH	Other
	0048		PRB	Problems
	0048		PRO	Procedure
	0048		RES	Result
	0048		RAR	Pharmacy administration information
	0048		RER	Pharmacy encoded order information
	0048		RDR	Pharmacy dispense information
	0048		RGR	Pharmacy give information
	0048		ROR	Pharmacy prescription information
	0048		STA	Status
	0048		VXI	Vaccine Information
User	0049	Department Code		
	0049			No suggested values
User	0050	Accident Code		
	0050			No suggested values
User	0051	Diagnosis Code		
	0051			No suggested values

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
User	0052	Diagnosis Type		
	0052		A	Admitting
	0052		W	Working
	0052		F	Final
HL7	0053	Diagnosis Coding Method		
	0053			needs values or to become user table
User	0055	DRG Code		
	0055			No suggested values
User	0056	DRG Grouper Review Code		
	0056			No suggested values
User	0059	Consent Code		
	0059			No suggested values
HL7	0061	Check Digit Scheme		
	0061		M10	Mod 10 algorithm
	0061		M11	Mod 11 algorithm
User	0062	Event Reason		
	0062		01	Patient request
	0062		02	Physician order
	0062		03	Census management
User	0063	Relationship		
	0063			No suggested values
User	0064	Financial Class		
	0064			No suggested values
HL7	0065	Specimen Action Code		
	0065		A	Add ordered tests to the existing specimen
	0065		G	Generated order; reflex order
	0065		L	Lab to obtain specimen from patient
	0065		O	Specimen obtained by service other than Lab
	0065		P	Pending specimen; Order sent prior to delivery
	0065		R	Revised order
	0065		S	Schedule the tests specified below
User	0066	Employment Status		
	0066			No suggested values
User	0068	Guarantor Type		
	0068			No suggested values
User	0069	Hospital Service		
	0069			No suggested values
HL7	0070	Specimen Source Codes		
	0070		ABS	Abcess
	0070		AMN	Amniotic fluid
	0070		ASP	Aspirate
	0070		BPH	Basophils
	0070		BIFL	Bile fluid
	0070		BLDA	Blood arterial
	0070		BBL	Blood bag
	0070		BLDC	Blood capillary
	0070		BPU	Blood product unit
	0070		BLDV	Blood venous

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0070		BON	Bone
	0070		BRTH	Breath (use EXHLD)
	0070		BRO	Bronchial
	0070		BRN	Burn
	0070		CALC	Calculus (=Stone)
	0070		CDM	Cardiac muscle
	0070		CNL	Cannula
	0070		CTP	Catheter tip
	0070		CSF	Cerebral spinal fluid
	0070		CVM	Cervical mucus
	0070		CVX	Cervix
	0070		COL	Colostrum
	0070		CBLD	Cord blood
	0070		CNJT	Conjunctiva
	0070		CUR	Curettage
	0070		CYST	Cyst
	0070		DIAF	Dialysis fluid
	0070		DOSE	Dose med or substance
	0070		DRN	Drain
	0070		DUFL	Duodenal fluid
	0070		EAR	Ear
	0070		EARW	Ear wax (cerumen)
	0070		ELT	Electrode
	0070		ENDC	Endocardium
	0070		ENDM	Endometrium
	0070		EOS	Eosinophils
	0070		RBC	Erythrocytes
	0070		EYE	Eye
	0070		EXHLD	Exhaled gas (=breath)
	0070		FIB	Fibroblasts
	0070		FLT	Filter
	0070		FIST	Fistula
	0070		FLU	Body fluid, unsp
	0070		GAS	Gas
	0070		GAST	Gastric fluid/contents
	0070		GEN	Genital
	0070		GENC	Genital cervix
	0070		GENL	Genital lochia
	0070		GENV	Genital vaginal
	0070		HAR	Hair
	0070		IHG	Inhaled Gas
	0070		IT	Intubation tube
	0070		ISLT	Isolate
	0070		LAM	Lamella
	0070		WBC	Leukocytes
	0070		LN	Line
	0070		LNA	Line arterial
	0070		LNV	Line venous

**Appendix A: Data Definition Tables**

Type	Table	Name	Value	Description
	0070		LIQ	Liquid NOS
	0070		LYM	Lymphocytes
	0070		MAC	Macrophages
	0070		MAR	Marrow
	0070		MEC	Meconium
	0070		MBLD	Menstrual blood
	0070		MLK	Milk
	0070		MILK	Breast milk
	0070		NAIL	Nail
	0070		NOS	Nose (nasal passage)
	0070		ORH	Other
	0070		PAFL	Pancreatic fluid
	0070		PAT	Patient
	0070		PRT	Peritoneal fluid /ascites
	0070		PLC	Placenta
	0070		PLAS	Plasma
	0070		PLB	Plasma bag
	0070		PLR	Pleural fluid (thoracentesis fld)
	0070		PMN	Polymorphonuclear neutrophils
	0070		PPP	Patelet poor plasma
	0070		PRP	Platelet rich plasma
	0070		PUS	Pus
	0070		RT	Route of medicine
	0070		SAL	Saliva
	0070		SEM	Seminal fluid
	0070		SER	Serum
	0070		SKN	Skin
	0070		SKM	Skeletal muscle
	0070		SPRM	Spermatozoa
	0070		SPT	Sputum
	0070		SPTC	Sputum - coughed
	0070		SPTT	Sputum - tracheal aspirate
	0070		STON	Stone (use CALC)
	0070		STL	Stool = Fecal
	0070		SWT	Sweat
	0070		SNV	Synovial fluid (Joint fluid)
	0070		TEAR	Tears
	0070		THRT	Throat
	0070		THRB	Thrombocyte (platelet)
	0070		TISS	Tissue
	0070		TISG	Tissue gall bladder
	0070		TLGI	Tissue large intestine
	0070		TLNG	Tissue lung
	0070		TISPL	Tissue placenta
	0070		TSMI	Tissue small intestine
	0070		TISU	Tissue ulcer
	0070		TUB	Tube NOS
	0070		ULC	Ulcer

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0070		UMB	Umbilical blood
	0070		UMED	Unknown medicine
	0070		URTH	Urethra
	0070		UR	Urine
	0070		URC	Urine clean catch
	0070		URT	Urine catheter
	0070		URNS	Urine sediment
	0070		USUB	Unknown substance
	0070		VOM	Vomit
	0070		BLD	Whole blood
	0070		BDY	Whole body
	0070		WAT	Water
	0070		WICK	Wick
	0070		WND	Wound
	0070		WNDA	Wound abscess
	0070		WNDE	Wound exudate
	0070		WNDD	Wound drainage
	0070		XXX	To be specified in another part of the message
User	0072	Insurance Plan ID		
	0072			No suggested values
User	0073	Interest Rate Code		
	0073			No suggested values
HL7	0074	Diagnostic Service Section ID		
	0074		AU	Audiology
	0074		BG	Blood gases
	0074		BLB	Blood bank
	0074		CUS	Cardiac Ultrasound
	0074		CTH	Cardiac catheterization
	0074		CT	CAT scan
	0074		CH	Chemistry
	0074		CP	Cytopathology
	0074		EC	Electrocardiac (e.g., EKG, EEC, Holter)
	0074		EN	Electroneuro (EEG, EMG,EP,PSG)
	0074		HM	Hematology
	0074		ICU	Bedside ICU Monitoring
	0074		IMM	Immunology
	0074		LAB	Laboratory
	0074		MB	Microbiology
	0074		MCB	Mycobacteriology
	0074		MYC	Mycology
	0074		NMS	Nuclear medicine scan
	0074		NMR	Nuclear magnetic resonance
	0074		NRS	Nursing service measures
	0074		OUS	OB Ultrasound
	0074		OT	Occupational Therapy
	0074		OTH	Other
	0074		OSL	Outside Lab
	0074		PHR	Pharmacy

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0074		PT	Physical Therapy
	0074		PHY	Physician (Hx. Dx, admission note, etc.)
	0074		PF	Pulmonary function
	0074		RAD	Radiology
	0074		RX	Radiograph
	0074		RUS	Radiology ultrasound
	0074		RC	Respiratory Care (therapy)
	0074		RT	Radiation therapy
	0074		SR	Serology
	0074		SP	Surgical Pathology
	0074		TX	Toxicology
	0074		VUS	Vascular Ultrasound
	0074		VR	Virology
	0074		XRC	Cineradiograph
HL7	0076	Message Type		
	0076		ACK	General acknowledgment message
	0076		ADR	ADT response
	0076		ADT	ADT message
	0076		ARD	Ancillary RPT (display)
	0076		BAR	Add/change billing account
	0076		CNQ	Cancel query
	0076		CSU	Unsolicited clinical study data
	0076		DFT	Detail financial transaction
	0076		DSR	Display response
	0076		EDR	Enhanced display response
	0076		ERP	Event replay response
	0076		ERQ	Event replay query
	0076		EQQ	Embedded query language query
	0076		MCF	Delayed acknowledgment
	0076		MDM	Documentation message
	0076		MFN	Master files notification
	0076		MFK	Master files application acknowledgment
	0076		MFD	Master files delayed application acknowledgment
	0076		MFQ	Master files query
	0076		MFR	Master files query response
	0076		ORF	Observation result/record response
	0076		ORM	Order message
	0076		ORR	Order acknowledgment message
	0076		ORU	Observation result/unsolicited
	0076		OSQ	Order status query
	0076		OSR	Order status response
	0076		QRY	Query, original Mode
	0076		PEX	Product experience
	0076		PGL	Patient goal
	0076		PGR	Patient goal response
	0076		PGQ	Patient goal query
	0076		PIN	Patient Insurance Information
	0076		PPP	Patient pathway (problem-oriented)

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0076		PPR	Patient problem
	0076		PPR	Patient problem
	0076		PPT	Patient pathway (goal oriented)
	0076		PPV	Patient goal response
	0076		PRQ	Patient care problem query
	0076		PRR	Patient problem response
	0076		PTQ	Patient pathway (problem-oriented) query
	0076		PTR	Patient pathway (problem-oriented) response
	0076		PTU	Patient pathway (goal-oriented) query
	0076		PTV	Patient pathway (goal-oriented) response
	0076		PIN	Patient information
	0076		RCI	Return clinical information
	0076		RAR	Pharmacy administration information
	0076		RCL	Return clinical list
	0076		RAS	Pharmacy administration message
	0076		RDE	Pharmacy encoded order message
	0076		RDR	Pharmacy dispense information
	0076		RDS	Pharmacy dispense message
	0076		RGV	Pharmacy give message
	0076		RGR	Pharmacy dose information
	0076		REF	Patient referral
	0076		RER	Pharmacy encoded order information
	0076		ROC	Request clinical information
	0076		ROD	Request patient demographics
	0076		ROR	Pharmacy prescription order response
	0076		RPA	Return patient authorization
	0076		RPI	Return patient information
	0076		RPL	Return patient display list
	0076		RPR	Return patient list
	0076		RQA	Request patient authorization
	0076		RQI	Request patient information
	0076		RRA	Pharmacy administration acknowledgment
	0076		RRD	Pharmacy dispense acknowledgment
	0076		RRE	Pharmacy encoded order acknowledgment
	0076		RRG	Pharmacy give acknowledgment
	0076		RRI	Return patient referral
	0076		SIU	Schedule information unsolicited
	0076		SPQ	Stored procedure request
	0076		SQM	Schedule query
	0076		SQR	Schedule query response
	0076		SRM	Study registration
	0076		SRM	Schedule request
	0076		SRR	Scheduled request response
	0076		TBR	Tabular response
	0076		UDM	Unsolicited display message
	0076		VQQ	Virtual table query
	0076		VXQ	Query for vaccination record
	0076		VXX	Vaccination query response with multiple PID matches

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0076		VXR	Vaccination query record response
	0076		VXU	Unsolicited vaccination record update
HL7	0078	Abnormal Flags		
	0078		L	Below low normal
	0078		H	Above high normal
	0078		LL	Below lower panic limits
	0078		HH	Above upper panic limits
	0078		<	Below absolute low -off instrument scale
	0078		>	Above absolute high-off instrument scale
	0078		N	Normal (applies to non-numeric results)
	0078		A	Abnormal (applies to non-numeric results)
	0078		AA	Very abnormal (applies to non-numeric units, analogous to panic limits for numeric units)
	0078		null	No range defined, or normal ranges don't apply
	0078		U	Significant change up
	0078		D	Significant change down
	0078		B	Better--use when direction not relevant
	0078		W	Worse--use when direction not relevant
	0078		S	Sensitive (microbiology sensitivities only)
	0078		R	Resistant (microbiology sensitivities only)
	0078		I	Intermediate (microbiology sensitivities only)
	0078		MS	Moderately sensitive (microbiology sensitivities only)
	0078		VS	Very sensitive (microbiology sensitivities only)
User	0079	Location		
	0079			No suggested values
HL7	0080	Nature of Abnormal Testing		
	0080		A	An age-based population
	0080		N	None - generic normal range
	0080		R	A race-based population
	0080		S	A sex-based population
User	0083	Outlier Type		
	0083			No suggested values
User	0084	Performed By		
	0084			No suggested values
HL7	0085	Observation Result Status Codes Interpretation		
	0085		C	Record coming over is a correction and thus replaces a final result
	0085		D	Deletes the OBX record
	0085		F	Final results; Can only be changed with a corrected result.
	0085		I	Specimen in lab; results pending
	0085		P	Preliminary results
	0085		R	Results entered -- not verified
	0085		S	Partial results
	0085		X	Results cannot be obtained for this observation
	0085		U	Results status change to Final. Results did not change (don't transmit test). E.g., radiology changes status from preliminary to final
	0085		W	Post original as wrong, e.g., transmitted for wrong patient
User	0086	Plan ID		



## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0086			No suggested values
User	0087	Pre-admit Test Indicator		
	0087			No suggested values
User	0088	Procedure Code		
	0088			No suggested values
User	0089	Procedure Coding Method		
	0089			No suggested values
HL7	0091	Query Priority		
	0091		D	Deferred
	0091		I	Immediate
User	0092	Re-admission Indicator		
	0092		R	Readmission
User	0093	Release Information		
	0093		Y	Yes
	0093		Null	
	0093		N	No
	0093			or user-defined codes
User	0098	Type of agreement		
User	0098	Type of Agreement		
	0098		S	Standard
	0098			No suggested values
	0098		U	Unified
	0098		M	Maternity
User	0099	VIP Indicator		
	0099			No suggested values
HL7	0100	When to Charge		
	0100		D	On discharge
	0100		O	On receipt of order
	0100		R	At time service is completed
	0100		S	At time service is started
	0100		T	At a designated date/time
HL7	0102	Delayed Acknowledgment Type		
	0102		D	Message received, stored for later processing
	0102		F	Acknowledgment after processing
HL7	0103	Processing ID		
	0103		D	Debugging
	0103		P	Production
	0103		T	Training
HL7	0104	Version ID		
	0104		2.0	Release 2.0 September 1988
	0104		2.0D	Demo 2.0 October 1988
	0104		2.1	Release 2.1 March 1990
	0104		2.2	Release 2.2 December 1994
	0104		2.3	Release 2.3 ?? 1996
HL7	0105	Source of Comment		
	0105		L	Ancillary (filler) department is source of comment
	0105		P	Orderer (placer) is source of comment
	0105		O	Other system is source of comment

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
HL7	0106	Query/Response Format Code		
	0106		D	Response is in display format
	0106		R	Response is in record-oriented format
	0106		T	Response is in tabular format
HL7	0107	Deferred Response Type		
	0107		B	Before the date/time specified
	0107		L	Later than the date/time specified
HL7	0108	Query Results Level		
	0108		O	Order plus order status
	0108		R	Results without bulk text
	0108		S	Status only
	0108		T	Full results (default)
HL7	0109	Report Priority		
	0109		R	Routine
	0109		S	STAT
User	0110	Transfer to Bad Debt Code		
	0110			No suggested values
User	0111	Delete Account Code		
	0111			No suggested values
User	0112	Discharged Disposition		
	0112			No suggested values
User	0113	Discharged to Location		
	0113			No suggested values
User	0114	Diet Type		
	0114			No suggested values
User	0115	Servicing Facility		
	0115			No suggested values
User	0116	Bed Status		
	0116		C	Closed
	0116		H	Housekeeping
	0116		O	Occupied
	0116		U	Unoccupied
	0116		K	Contaminated
	0116		I	Isolated
User	0117	Account Status		
	0117			No suggested values
User	0118	Major Diagnostic Category		
	0118			No suggested values
HL7	0119	Order Control Code		
	0119		NW	New Order
	0119		OK	Order accepted and OK
	0119		UA	Unable to accept order
	0119		CA	Cancel order request
	0119		OC	Order canceled
	0119		CR	Canceled as requested
	0119		UC	Unable to cancel
	0119		DC	Discontinue order request
	0119		OD	Order discontinued

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0119		DR	Discontinued as requested
	0119		UD	Unable to discontinue
	0119		HD	Hold order request
	0119		OH	Order held
	0119		UH	Unable to put on hold
	0119		HR	On hold as requested
	0119		RL	Release previous hold
	0119		OE	Order released
	0119		OR	Released as requested
	0119		UR	Unable to release
	0119		RP	Order replace request
	0119		RU	Replaced unsolicited
	0119		RO	Replacement order
	0119		RQ	Replaced as requested
	0119		UM	Unable to replace
	0119		PA	Parent order
	0119		CH	Child order
	0119		XO	Change order request
	0119		XX	Order changed, unsolicited
	0119		UX	Unable to change
	0119		XR	Changed as requested
	0119		DE	Data Errors
	0119		RE	Observations to follow
	0119		RR	Request received
	0119		SR	Response to send order status request
	0119		SS	Send order status request
	0119		SC	Status changed
	0119		SN	Send order number
	0119		NA	Number assigned
	0119		CN	Combined result
	0119		RF	Refill order request
	0119		AF	Order refill request approval
	0119		DF	Order refill request denied
	0119		FU	Order refilled, unsolicited
	0119		OF	Order refilled as requested
	0119		UF	Unable to refill
	0119		LI	Link order to patient care message
	0119		UN	Unlink order from patient care message
HL7	0121	Response Flag		
	0121		E	Report exceptions only
	0121		R	Same as E, also Replacement and Parent-Child
	0121		D	Same as R, also other associated segments
	0121		F	Same as D, plus confirmations explicitly
	0121		N	Only the MSA segment is returned
HL7	0122	Charge Type		
	0122		CH	Charge
	0122		CO	Contract
	0122		CR	Credit

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0122		DP	Department
	0122		GR	Grant
	0122		NC	No Charge
	0122		PC	Professional
	0122		RS	Research
HL7	0123	Result Status		
	0123		O	Order received; specimen not yet received
	0123		I	No results available; specimen received, procedure incomplete
	0123		S	No results available; procedure scheduled, but not done
	0123		A	Some, but not all, results available
	0123		P	Preliminary: A verified early result is available, final results not yet obtained
	0123		C	Correction to results
	0123		R	Results stored; not yet verified
	0123		F	Final results; results stored and verified. Can only be changed with a corrected result.
	0123		X	No results available; Order canceled.
	0123		Y	No order on record for this test. (Used only on queries)
	0123		Z	No record of this patient. (Used only on queries)
HL7	0124	Transportation Mode		
	0124		CART	Cart - patient travels on cart or gurney
	0124		PORT	The examining device goes to patient's location
	0124		WALK	Patient walks to diagnostic service
	0124		WHLC	Wheelchair
HL7	0125	Value Type		
	0125		AD	Address
	0125		CE	Coded Entry
	0125		CF	Coded Element With Formatted Values
	0125		CK	Composite ID With Check Digit
	0125		CN	Composite ID And Name
	0125		CP	Composite Price
	0125		CX	Extended Composite ID With Check Digit
	0125		DT	Date
	0125		ED	Encapsulated Data
	0125		FT	Formatted Text (Display)
	0125		ID	Coded Value
	0125		MO	Money
	0125		NM	Numeric
	0125		PN	Person Name
	0125		RP	Reference Pointer
	0125		SN	Structured Numeric
	0125		ST	String Data
	0125		TM	Time
	0125		TN	Telephone Number
	0125		TS	Time Stamp (Date & Time)
	0125		TX	Text Data (Display)
	0125		XAD	Extended Address
	0125		XCN	Extended Composite Name And Number For Persons
	0125		XON	Extended Composite Name And Number For Organizations

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0125		XPN	Extended Person Number
	0125		XTN	Extended Telecommunications Number
HL7	0126	Quantity Limited Request		
	0126		CH	Characters
	0126		LI	Lines
	0126		PG	Pages
	0126		RD	Records
	0126		ZO	Locally defined
User	0127	Allergy Type		
	0127		DA	Drug Allergy
	0127		FA	Food Allergy
	0127		MA	Miscellaneous Allergy
	0127		MC	Miscellaneous Contraindication
User	0128	Allergy Severity		
	0128		SV	Severe
	0128		MO	Moderate
	0128		MI	Mild
User	0129	Accommodation Code		
	0129			No suggested values
User	0130	Visit User Code		
	0130			No suggested values
User	0131	Contact Role		
	0131		CP	Contact person
	0131		EP	Emergency contact person
	0131		BP	Billing contact person
	0131		PR	Person preparing referral
User	0132	Transaction Code		
	0132			No suggested values
User	0133	Procedure Practitioner Identifier Code Type		
	0133		AN	Anesthesiologist
	0133		PR	Procedure MD (surgeon)
	0133		RD	Radiologist
	0133		RS	Resident
	0133		NP	Nurse Practitioner
	0133		CM	Certified Nurse Midwife
	0133		SN	Scrub Nurse
	0133		PS	Primary Surgeon
	0133		AS	Assistant Surgeon
User	0135	Assignment of Benefits		
	0135		Y	Yes
	0135		N	No
	0135		M	Modified assignment
HL7	0136	Yes/No Indicator		
	0136		Y	Yes
	0136		N	No
User	0137	Mail Claim Party		
	0137		E	Employer

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0137		G	Guarantor
	0137		I	Insurance Company
	0137		O	Other
	0137		P	Patient
User	0139	Employer Information Data		
	0139			No suggested values
User	0140	Champus Service		
	0140			No suggested values
User	0141	Champus Rank/Grade		
	0141			No suggested values
User	0142	Champus Status		
	0142			No suggested values
User	0143	Non-covered Insurance Code		
	0143			No suggested values
User	0144	Eligibility Source		
	0144		1	Insurance company
	0144		2	Employer
	0144		3	Insured presented policy
	0144		4	Insured presented card
	0144		5	Signed statement on file
	0144		6	Verbal Information
	0144		7	None
User	0145	Room Type		
	0145		PRI	Private room
	0145		2PRI	Second private room
	0145		SPR	Semi-private room
	0145		2SPR	Second semi-private room
	0145		ICU	Intensive care unit
	0145		2ICU	Second intensive care unit
User	0146	Amount Type		
	0146		DF	Differential
	0146		LM	Limit
	0146		PC	Percentage
	0146		RT	Rate
	0146		UL	Unlimited
User	0147	Policy Type		
	0147		ANC	Ancillary
	0147		2ANC	Second ancillary
	0147		MMD	Major medical
	0147		2MMD	Second major medical
	0147		3MMD	Third major medical
User	0148	Penalty Type		
	0148		AT	Current amount
	0148		PC	Percentage
User	0149	Days Type		
	0149		AP	Approved
	0149		DE	Denied
	0149		PE	Pending

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
User	0150	Pre-certification Patient Type		
	0150		ER	Emergency
	0150		IPE	Inpatient elective
	0150		OPE	Outpatient elective
	0150		UR	Urgent
User	0151	Second Opinion Status		
	0151			No suggested values
User	0152	Second Opinion Documentation Received		
	0152			No suggested values
User	0153	Value Code		
	0153			No suggested values
HL7	0155	Accept/Application Acknowledgment Conditions		
	0155		AL	Always
	0155		NE	Never
	0155		ER	Error/reject conditions only
	0155		SU	Successful completion only
HL7	0156	Which Date/Time Qualifier		
	0156		ORD	Order date/time
	0156		CAN	Cancellation date/time
	0156		SCHED	Schedule date/time
	0156		COL	Collection date/time, equivalent to film or sample collection date/time
	0156		RCT	Specimen receipt date/time, receipt of specimen in filling ancillary (Lab)
	0156		REP	Report date/time, report date/time at filling ancillary (i.e., Lab)
	0156		ANY	Any date/time within a range
HL7	0157	Which Date/Time Status Qualifier		
	0157		PRE	Preliminary
	0157		REP	Report completion date/time
	0157		CFN	Current final value, whether final or corrected
	0157		FIN	Final only (no corrections)
	0157		COR	Corrected only (no final with corrections)
	0157		ANY	Any status
HL7	0158	Date/Time Selection Qualifier		
	0158		1ST	First value within range
	0158		ALL	All values within the range
	0158		LST	Last value within the range
	0158		REV	All values within the range returned in reverse chronological order (Default if not otherwise specified.)
HL7	0159	Diet Type		
	0159		D	Diet
	0159		S	Supplement
	0159		P	Preference
HL7	0160	Tray Type		
	0160		EARLY	Early tray
	0160		LATE	Late tray
	0160		GUEST	Guest tray

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0160		NO	No tray
	0160		MSG	Tray message only
HL7	0161	Allow Substitution		
	0161		N	Substitutions are NOT authorized. (This is the default - null.)
	0161		G	Allow generic substitutions
	0161		T	Allow therapeutic substitutions
HL7	0162	Route of Administration		
	0162		AP	Apply Externally
	0162		B	Buccal
	0162		DT	Dental
	0162		EP	Epidural
	0162		ET	Endotrachial Tube*
	0162		GTT	Gastronomy Tube
	0162		GU	GU Irrigant
	0162		IMR	Immerse (Soak) Body Part
	0162		IA	Intra-arterial
	0162		IB	Intrabursal
	0162		IC	Intracardiac
	0162		ICV	Intracervical (uterus)
	0162		ID	Intradermal
	0162		IH	Inhalation
	0162		MM	Mucous Membrane
	0162		NS	Nasal
	0162		NG	Nasogastric
	0162		NP	Nasal Prongs*
	0162		NT	Nasotrachial Tube
	0162		OP	Ophthalmic
	0162		OT	Otic
	0162		OTH	Other/Miscellaneous
	0162		PF	Perfusion
	0162		PO	Oral
	0162		PR	Rectal
	0162		RM	Rebreather Mask*
	0162		SD	Soaked Dressing
	0162		SC	Subcutaneous
	0162		SL	Sublingual
	0162		TP	Topical
	0162		TRA	Tracheostomy*
	0162		TD	Transdermal
	0162		TL	Translingual
	0162		UR	Urethral
	0162		VG	Vaginal
	0162		VM	Ventimask
	0162		WND	Wound
	0162		*	Used primarily for respiratory therapy and anesthesia delivery
HL7	0163	Administrative Site		
	0163		BE	Bilateral Ears
	0163		OU	Bilateral Eyes



## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0163		BN	Bilateral Nares
	0163		BU	Buttock
	0163		CT	Chest Tube
	0163		LA	Left Arm
	0163		LAC	Left Anterior Chest
	0163		LACF	Left Antecubital Fossa
	0163		LD	Left Deltoid
	0163		LE	Left Ear
	0163		LEJ	Left External Jugular
	0163		OS	Left Eye
	0163		LF	Left Foot
	0163		LG	Left Gluteus Medius
	0163		LH	Left Hand
	0163		LJ	Left Internal Jugular
	0163		LLAQ	Left Lower Abd Quadrant
	0163		LLFA	Left Lower Forearm
	0163		LMFA	Left Mid Forearm
	0163		LN	Left Naris
	0163		LPC	Left Posterior Chest
	0163		LSC	Left Subclavian
	0163		LT	Left Thigh
	0163		LUA	Left Upper Arm
	0163		LUAQ	Left Upper Abd Quadrant
	0163		LUFA	Left Upper Forearm
	0163		LVG	Left Ventragluteal
	0163		LVL	Left Vastus Lateralis
	0163		NB	Nebulized
	0163		PA	Perianal
	0163		PERIN	Perineal
	0163		RA	Right Arm
	0163		RAC	Right Anterior Chest
	0163		RACF	Right Antecubital Fossa
	0163		RD	Right Deltoid
	0163		RE	Right Ear
	0163		REJ	Right External Jugular
	0163		OD	Right Eye
	0163		RF	Right Foot
	0163		RG	Right Gluteus Medius
	0163		RH	Right Hand
	0163		RJ	Right Internal Jugular
	0163		RLAQ	Rt Lower Abd Quadrant
	0163		RLFA	Right Lower Forearm
	0163		RMFA	Right Mid Forearm
	0163		RN	Right Naris
	0163		RPC	Right Posterior Chest
	0163		RSC	Right Subclavian
	0163		RT	Right Thigh
	0163		RUA	Right Upper Arm

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0163		RUAQ	Right Upper Abd Quadrant
	0163		RUFA	Right Upper Forearm
	0163		RVL	Right Vastus Lateralis
	0163		RVG	Right Ventragluteal
HL7	0164	Administration Device		
	0164		AP	Appliator
	0164		BT	Buretrol
	0164		HL	Heparin Lock
	0164		IPPB	IPPB
	0164		IVP	IV Pump
	0164		IVS	IV Soluset
	0164		MI	Metered Inhaler
	0164		NEB	Nebulizer
	0164		PCA	PCA Pump
HL7	0165	Administration Method		
	0165		CH	Chew
	0165		DI	Dissolve
	0165		DU	Dust
	0165		IF	Infiltrate
	0165		IS	Insert
	0165		IR	Irrigate
	0165		IVPB	IV Piggyback
	0165		IVP	IV Push
	0165		NB	Nebulized
	0165		PT	Pain
	0165		PF	Perfuse
	0165		SH	Shampoo
	0165		SO	Soak
	0165		WA	Wash
	0165		WI	Wipe
HL7	0166	RX Component Type		
	0166		B	Base
	0166		A	Additive
HL7	0167	Substitution Status		
	0167		N	No substitute was dispensed. This is equivalent to the default (null) value.
	0167		G	A generic substitution was dispensed
	0167		T	A therapeutic substitution was dispensed
HL7	0168	Processing Priority		
	0168		S	Stat (do immediately)
	0168		A	As soon as possible (a priority lower than stat)
	0168		R	Routine
	0168		P	Preoperative (to be done prior to surgery)
	0168		T	Timing critical (do as near as possible to requested time)
	0168		C	Measure continuously (e.g., arterial line blood pressure)
	0168		B	Do at bedside or portable (may be used with other codes)
HL7	0169	Reporting Priority		
	0169		C	Call back results
	0169		R	Rush reporting

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
HL7	0170	Derived Specimen		
	0170		P	Parent Observation
	0170		C	Child Observation
	0170		N	Not Applicable
User	0171	Citizenship		
	0171			No suggested values or use ISO 3166
User	0172	Veterans Military Status		
	0172			No suggested values
User	0173	Coordination of Benefits		
	0173		CO	Coordination
	0173		IN	Independent
HL7	0174	Nature of Test/Observation		
	0174		P	Profile or battery consisting of many independent atomic observations (e.g., SMA12, electrolytes), usually done at one instrument on one specimen
	0174		F	Functional procedure that may consist of one or more interrelated measures (e.g., glucose tolerance test, creatine clearance), usually done at different times and/or on different specimens
	0174		A	Atomic test/observation (test code or treatment code)
	0174		S	Superset--a set of batteries or procedures ordered under a single code unit but processed as separate batteries (e.g., routines = CBC, UA, electrolytes) This set indicates that the code being described is used to order multiple test/observation batteries. For example, a client who routinely orders a CBC, a differential, and a thyroxine as an outpatient profile might use a single, special code to order all three test batteries, instead of having to submit three separate order codes.
	0174		C	Single observation calculated via a rule or formula from other independent observations (e.g., Alveolar--arterial ratio, cardiac output)
HL7	0175	Master File Identifier Code		
	0175		CDM	Charge description master file
	0175		CM0	Clinical study master
	0175		CM1	Clinical study phase master
	0175		CM2	Clinical study Data Schedule Master
	0175		LOC	Location master file
	0175		OM1-OM6	Observation test master file segments
	0175		PRA	Practitioner master file
	0175		STF	Staff Master File
User	0176	Master File Application Identifier		
	0176			No suggested values
User	0177	Confidentiality code		
	0177		V	Very restricted
	0177		R	Restricted
	0177		U	Usual control
	0177		EMP	Employee
	0177		UWM	Unwed mother
	0177		VIP	Very important person or celebrity
	0177		PSY	Psychiatric patient
	0177		AID	AIDS patient
	0177		HIV	HIV(+) patient

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
HL7	0177		ETH	Alcohol/drug treatment patient
	0178	File Level Event Code		
	0178		REP	Replace current version of this master file with the version contained in this message
	0178		UPD	Change file records as defined in the record level event codes for each record that follows
HL7	0179	Response Level		
	0179		NE	Never. no application level response needed
	0179		ER	Error/Reject conditions only. Only MFA segments denoting errors must be returned via the application level acknowledgment for this message
	0179		AL	Always. All MFA segments (whether denoting errors or not) must be returned via the application level acknowledgment message
	0179		SU	Success. Only MFA segments denoting success must be returned via the application level acknowledgment for this message
HL7	0180	Record Level Event Code		
	0180		MAD	Add record to master file
	0180		MDL	Delete record from master file
	0180		MUP	Update record for master file
	0180		MDC	Deactivate: discontinue using record in master file, but do not delete from database
	0180		MAC	Reactivate deactivated record
User	0181	MFN Record Level Error Return		
	0181		S	Successful posting of the record defined by the MFE segment
	0181		U	Unsuccessful posting of the record defined by the MFE segment
User	0182	Staff Type		
	0182			No suggested values
HL7	0183	Active/Inactive		
	0183		A	Active staff
	0183		I	Inactive staff
User	0184	Department		
	0184			No suggested values
HL7	0185	Preferred Method of Contact		
	0185		H	Home Phone Number
	0185		O	Office Phone Number
	0185		F	FAX Number
	0185		C	Cellular Phone Number
	0185		B	Beeper Number
	0185		E	E-Mail Address (Not In TN Format)
	0185		M	Mail
User	0186	Practitioner Category		
	0186			No suggested values
HL7	0187	Provider Billing		
	0187		P	Provider does own billing
	0187		I	Institution bills for provider
User	0188	Operator ID		
	0188			No suggested values
User	0189	Ethnic Group		
	0189			No suggested values
HL7	0190	Address Type		

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0190		C	Current or Temporary
	0190		P	Permanent
	0190		M	Mailing
	0190		B	Business
	0190		O	Office
	0190		H	Home
	0190		B	Birth
	0190		F	County of Origin
HL7	0191	Main Type of Reference Data		
	0191		SI	Scanned Image
	0191		NS	Non-scanned Image
	0191		SD	Scanned Document
	0191		TX	Machine Readable Text Document
	0191		FT	Formatted Text
	0191		IM	Image Data
	0191		AU	Audio Data
	0191		AP	Other application data, typically uninterpreted binary data
User	0192	Visit ID Type		
	0192			No suggested values
User	0193	Amount Class		
	0193		AT	Amount
	0193		LM	Limit
	0193		PC	Percentage
	0193		UL	Unlimited
HL7	0200	Name Type		
	0200		A	Alias Name
	0200		L	Legal Name
	0200		D	Display Name
	0200		M	Maiden Name
	0200		C	Adopted Name
	0200		O	Other
HL7	0201	Telecommunication Use Code		
	0201		PRN	Primary Residence Number
	0201		ORN	Other Residence Number
	0201		WPN	Work Number
	0201		VHN	Vacation Home Number
	0201		ASN	Answering Service Number
	0201		EMR	Emergency Number
	0201		NET	Network (email) Address
	0201		BPN	Beeper Number
HL7	0202	Telecommunication Equipment Type		
	0202		PH	Telephone
	0202		FX	Fax
	0202		MD	Modem
	0202		CP	Cellular Phone
	0202		BP	Beeper/Pager
	0202		Internet	Internet Address: Use only if telecommunication use code is NET
	0202		X.400	X.400 email address: use only if telecommunication use code is

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
				NET
User	0203	Identifier Type		
	0203		AM	American Express
	0203		BR	Birth Registry Number
	0203		DI	Diner's Club Card
	0203		DL	Driver's License Number
	0203		DN	Doctor Number
	0203		DS	Discover Card
	0203		EI	Employee Number
	0203		EN	Employer Number
	0203		GI	Guarantor Internal Identifier
	0203		GN	Guarantor External Identifier
	0203		MS	Master Card
	0203		MA	Medicaid Number
	0203		MC	Medicare Number
	0203		MR	Medical Record Number
	0203		PI	Patient Internal Identifier
	0203		PT	Patient External Identifier
	0203		RR	Railroad Retirement Number
	0203		SS	Social Security Number
	0203		XX	Organization Identifier
	0203		VS	VISA
	0203		VN	Visit Number
	0203		AN	Account Number
User	0204	Organizational Name Type		
	0204		A	Alias Name
	0204		L	Legal Name
	0204		D	Display Name
	0204		SL	Stock Exchange Listing Name
HL7	0205	Price Type		
	0205		AP	Administrative Price or Handling Fee
	0205		PF	Professional Fee for Performing Provider
	0205		UP	Unit Price, may be based on length of procedure or service
	0205		TF	Technology Fee for Use of Equipment
	0205		DC	Direct Unit Cost
	0205		IC	Indirect Unit Cost
	0205		TP	Total Price
HL7	0206	Segment Action Code		
	0206		A	Add/Insert
	0206		D	Delete
	0206		U	Update
HL7	0207	Processing Mode		
	0207		a	Archive
	0207		r	Restore from Archive
	0207		i	Initial Load
	0207		not present	Not Present (the default, meaning current processing)
User	0208	Query Response Status		
	0208		OK	Data found, no errors (this is the default)
	0208		NF	No data found, no errors

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0208		AR	Application reject
HL7	0209	Relational Operator		
	0209		EQ	Equal
	0209		NE	Not equal
	0209		LT	Less than
	0209		GT	Greater than
	0209		LE	Less than or equal
	0209		GE	Greater than or equal
	0209		CT	Contains
	0209		GN	Generic
HL7	0210	Relational Conjunction		
	0210		AND	Default
	0210		OR	
HL7	0211	Alternate Character Sets		
	0211		ASCII	The printable 7-bit ASCII character set . (This is the default if this field is omitted)
	0211		8859/1	The printable characters from the ISO 8859/1 Character set
	0211		8859/2	The printable characters from the ISO 8859/2 Character set
	0211		8859/3	The printable characters from the ISO 8859/3 Character set
	0211		8859/4	The printable characters from the ISO 8859/4 Character set
	0211		8859/5	The printable characters from the ISO 8859/5 Character set
	0211		8859/6	The printable characters from the ISO 8859/6 Character set
	0211		8859/7	The printable characters from the ISO 8859/7 Character set
	0211		8859/8	The printable characters from the ISO 8859/8 Character set
	0211		8859/9	The printable characters from the ISO 8859/9 Character set
	0211		JAS2020	A subset of ISO2020 used for most Kanjii transmissions
	0211		UNICODE	<needs document reference>
	0211		JIS X 0202	ISO 2022 with escape sequences for Kanjii
User	0212	Nationality		
	0212			No suggested values or use ISO 3166
User	0213	Purge Status		
	0213		P	Marked for purge. User is no longer able to update the visit.
	0213		D	The visit is marked for deletion and the user cannot enter new data against it
	0213		I	The visit is marked inactive and the user cannot enter new data against it
User	0214	Special Program Codes		
	0214			No suggested values
User	0215	Publicity Code		
	0215			No suggested values
User	0216	Patient Status		
	0216			No suggested values
User	0217	Visit Priority		
	0217			No suggested values
User	0218	Charge Adjustment		
	0218			No suggested values
User	0219	Recurring Service		
	0219			No suggested values
User	0220	Living Arrangement		

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0220		A	Alone
	0220		F	Family
	0220		I	Institution
	0220		R	Relative
	0220		U	Unknown
	0220		S	Spouse Only
User	0222	Contact Reason		
	0222			No suggested values
User	0223	Living Dependency		
	0223		D	Spouse dependent
	0223		M	Medical supervision required
	0223		S	Small children
	0223		WU	Walk up
	0223		CB	Common bath
HL7	0224	Transport Arranged		
	0224		A	Arranged
	0224		N	Not Arranged
	0224		U	Unknown
HL7	0225	Escort Required		
	0225		R	Required
	0225		N	Not Required
	0225		U	Unknown
HL7	0227	Manufacturers of vaccines (code = MVX)		
	0227		AB	Abbott
	0227		AD	Adams
	0227		ALP	Alpha
	0227		AR	Armour
	0227		BA	Baxter
	0227		BAY	Bayer
	0227		BP	Berna
	0227		CON	Connaught
	0227		EVN	Evans
	0227		GRE	Greer
	0227		IUS	Immuno-US
	0227		KGC	Korea Green Cross
	0227		LED	Lederle
	0227		MA	Massachusetts Public Health
	0227		MSD	Merck
	0227		IM	Merieux
	0227		MIP	Michigan Dept Public Health
	0227		JPN	Microbial Dis/Osaka U
	0227		MIL	Miles
	0227		NYB	New York Blood Center
	0227		NAB	North American Biologicals, Inc.
	0227		OTC	Organon Teknika
	0227		OTH	Other
	0227		PD	Parke Davis
	0227		PRX	Praxis Biologics



## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0227		SCL	Sclavo
	0227		SKB	SmithKline
	0227		SI	Swiss Serum and Vaccine Inst.
	0227		WA	Wyeth-Ayerst
	0227		UNK	Unknown manufacturer
User	0228	Diagnosis Classification		
	0228		C	Consultation
	0228		D	Diagnosis
	0228		M	Medication (antibiotic)
	0228		O	Other
	0228		R	Radiological scheduling (not using ICDA codes)
	0228		S	Sign and symptom
	0228		T	Tissue diagnosis
	0228		I	Invasive procedure not classified elsewhere (I.V., catheter, etc.)
User	0229	Outlier Type		
	0229		M	Medicare
	0229		C	Champus
	0229		G	Managed Care Organization
User	0230	Procedure Functional Type		
	0230		A	Anesthesia
	0230		P	Procedure for treatment (therapeutic includes operations)
	0230		I	Invasive procedure not classified elsewhere (e.g., IV, catheter, etc.)
	0230		D	Diagnostic procedure
User	0231	Student Status		
	0231		F	Full-time student
	0231		P	Part-time student
	0231		N	Not a student
User	0232	Insurance Company Contact Reason		
	0232		01	Medicare claim status
	0232		02	Medicaid claim status
	0232		03	Name/address change
User	0233	Non-concur Code/Description		
	0233			No suggested values
HL7	0234	Report Timing		
	0234		CO	Correction
	0234		AD	Additional information
	0234		RQ	Requested information
	0234		DE	Device evaluation
	0234		PD	Periodic
	0234		3D	3 day report
	0234		7D	7 day report
	0234		10D	10 day report
	0234		15D	15 day report
	0234		30D	30 day report
HL7	0235	Report Source		
	0235		C	Clinical trial
	0235		L	Literature

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0235		H	Health professional
	0235		R	Regulatory agency
	0235		D	Database/registry/poison control center
	0235		N	Non-health care professional
	0235		P	Patient
	0235		M	Manufacturer/marketing authority holder
	0235		E	Distributor
	0235		O	Other
HL7	0236	Reported To		
	0236		M	Manufacturer
	0236		L	Local facility/user facility
	0236		R	Regulatory agency
	0236		D	Distributor
HL7	0237	Event Qualification		
	0237		I	Interaction
	0237		O	Overdose
	0237		A	Abuse
	0237		M	Misuse
	0237		D	Dependency
	0237		L	Lack of expect therapeutic effect
	0237		W	Drug withdrawal
	0237		B	Unexpected beneficial effect
HL7	0238	Event Seriousness		
	0238		Y	Yes
	0238		S	Significant
	0238		N	No
HL7	0239	Event Expected		
	0239		Y	Yes
	0239		N	No
	0239		U	Unknown
HL7	0240	Event Consequence		
	0240		D	Death
	0240		L	Life threatening
	0240		H	Caused hospitalized
	0240		P	Prolonged hospitalization
	0240		C	Congenital anomaly/birth defect
	0240		I	Incapacity which is significant, persistent or permanent
	0240		J	Disability which is significant, persistent or permanent
	0240		R	Required intervention to prevent permanent impairment/damage
	0240		O	Other
HL7	0241	Patient Outcome		
	0241		D	Died
	0241		R	Recovering
	0241		N	Not recovering/unchanged
	0241		W	Worsening
	0241		S	Sequelae
	0241		F	Fully recovered
	0241		U	Unknown

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
HL7	0242	Primary Observer's Qualification		
	0242		P	Physician (osteopath, homeopath)
	0242		R	Pharmacist
	0242		M	Mid-level professional (nurse, nurse practitioner, physician's assistant)
	0242		H	Other health professional
	0242		C	Health care consumer/patient
	0242		L	Lawyer/attorney
	0242		O	Other non-health professional
HL7	0243	Identity may be Divulged		
	0243		Y	Yes
	0243		N	No
	0243		NA	Not applicable
User	0244	Single Use Device		
	0244			No suggested values
User	0245	Product Problem		
	0245			No suggested values
User	0246	Product Available for Inspection		
	0246			No suggested values
HL7	0247	Start of Evaluation		
	0247		Y	Evaluation completed
	0247		P	Evaluation in progress
	0247		K	Problem already known, no evaluation necessary
	0247		X	Product not made by company
	0247		A	Evaluation anticipated, but not yet begun
	0247		D	Product discarded -- unable to follow up
	0247		C	Product received in condition which made analysis impossible
	0247		I	Product remains implanted -- unable to follow up
	0247		U	Product unavailable for follow up investigation
	0247		Q	Product under quarantine -- unable to follow up
	0247		R	Product under recall/corrective action
	0247		O	Other
HL7	0248	Product Source		
	0248		A	Actual product involved in incident was evaluated
	0248		L	A product from the same lot as the the actual product involved was evaluated
	0248		R	A product from a reserve sample was evaluated
	0248		N	A product from a controlled/non-related inventory was evaluated
User	0249	Generic Product		
	0249			No suggested values
HL7	0250	Relatedness Assessment		
	0250		H	Highly probable
	0250		M	Moderately probable
	0250		S	Somewhat probable
	0250		I	Improbable
	0250		N	Not related
HL7	0251	Action Taken in Response to the Event		
	0251		WP	Product withdrawn permanently

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0251		WT	Product withdrawn temporarily
	0251		DR	Product dose or frequency of use reduced
	0251		DI	Product dose or frequency of use increased
	0251		OT	Other
	0251		N	None
HL7	0252	Causality Observations		
	0252		AW	Abatement of event after product withdrawn
	0252		BE	Event recurred after product reintroduced
	0252		LI	Literature reports association of product with event
	0252		IN	Event occurred after product introduced
	0252		EX	Alternative explanations for the event available
	0252		PL	Effect observed when patient receives placebo
	0252		TC	Toxic levels of product documented in blood or body fluids
	0252		DR	Dose response observed
	0252		SE	Similar events in past for this patient
	0252		OE	Occurrence of event was confirmed by objective evidence
	0252		OT	Other
HL7	0253	Indirect Exposure Mechanism		
	0253		B	Breast milk
	0253		P	Transplacental
	0253		F	Father
	0253		X	Blood product
	0253		O	Other
HL7	0254	Kind of Quantity		
	0254			See Chapter 8 Section ?? for values
HL7	0255	Duration Categories		
	0255			See Chapter 8 Section ?? for values
HL7	0256	Time Delay Post Challenge		
	0256			See Chapter 8 Section ?? for values
HL7	0257	Nature of Challenge		
	0257		CFST	Fasting (no calorie intake) for the period specified in the time component of the term, e.g., 1H POST CFST
	0257		EXCZ	Exercise undertaken as challenge (can be quantified)
	0257		FFST	No fluid intake for the period specified in the time component of the term
HL7	0258	Relationship Modifier		
	0258		CONTROL	Control
	0258		PATIENT	Patient
	0258		DONOR	Donor
	0258		BPU	Blood product unit
User	0259	Modality		
	0259		AS	Angioscopy
	0259		BS	Biomagnetic imaging
	0259		CD	Color Flow Doppler
	0259		CP	Colposcopy
	0259		CR	Computed Radiography
	0259		CS	Cystoscopy
	0259		CT	Computed Tomography
	0259		DD	Duplex Doppler

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0259		DG	Diapanography
	0259		DM	Digital microscopy
	0259		EC	Echocardiography
	0259		ES	Endoscopy
	0259		FA	Fluorescein Angiography
	0259		FS	Fundoscopy
	0259		LP	Laparoscopy
	0259		LS	Laser surface scan
	0259		MA	Magnetic Resonance Angiography
	0259		MS	Magnetic Resonance Spectroscopy
	0259		NM	Nuclear medicine (radioisotope study)
	0259		OT	Other
	0259		PT	Positron Emission Tomography (PET)
	0259		RF	RadioFluoroscopy
	0259		ST	Single Photon Emission Computed Tomography (SPECT)
	0259		TG	Thermography
	0259		US	Ultrasound
	0259		XA	X-Ray Angiography
User	0260	Patient Location Type		
	0260		N	Nursing Unit
	0260		R	Room
	0260		B	Bed
	0260		E	Exam Room
	0260		O	Operating Room
	0260		C	Clinic
	0260		D	Department
	0260		L	Other Location
User	0261	Location Equipment		
	0261		OXY	Oxygen
	0261		SUC	Suction
	0261		VIT	Vital signs monitor
	0261		INF	Infusion pump
	0261		IVP	IV pump
	0261		EEG	Electro-Encephalogram
	0261		EKG	Electro-Cardiogram
	0261		VEN	Ventilator
User	0262	Privacy Level		
	0262		F	Isolation
	0262		P	Private Room
	0262		J	Private Room - Medically Justified
	0262		Q	Private Room - Due To Overflow
	0262		S	Semi-Private Room
	0262		W	Ward
User	0263	Level of Care		
	0263		A	Ambulatory
	0263		E	Emergency
	0263		F	Isolation
	0263		N	Intensive Care

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0263		C	Critical Care
	0263		R	Routine
	0263		S	Surgery
User	0264	Location Department		
	0264			No suggested values
User	0265	Specialty Type		
	0265		AMB	Ambulatory
	0265		PSY	Psychiatric
	0265		PPS	Pediatric Psychiatric
	0265		REH	Rehabilitation
	0265		PRE	Pediatric Rehabilitation
	0265		ISO	Isolation
	0265		OBG	Obstetrics, Gynecology
	0265		PIN	Pediatric/Neonatal Intensive Care
	0265		INT	Intensive Care
	0265		SUR	Surgery
	0265		PSI	Psychiatric Intensive Care
	0265		EDI	Education
	0265		CAR	Coronary/Cardiac Care
	0265		NBI	Newborn, Nursery, Infants
	0265		CCR	Critical Care
	0265		PED	Pediatrics
	0265		EMR	Emergency
	0265		OBS	Observation
	0265		WIC	Walk-In Clinic
	0265		PHY	General/Family Practice
	0265		ALC	Allergy
	0265		FPC	Family Planning
	0265		CHI	Chiropractic
	0265		CAN	Cancer
	0265		NAT	Naturopathic
	0265		OTH	Other Specialty
User	0266	Gender Indicator		
	0266		M	Only Male Patients
	0266		F	Only Female Patients
	0266		E	Either Male Or Female Patients
HL7	0267	Days of the Week		
	0267		SAT	Saturday
	0267		SUN	Sunday
	0267		MON	Monday
	0267		TUE	Tuesday
	0267		WED	Wednesday
	0267		THU	Thursday
	0267		FRI	Friday
User	0268	Override		
	0268		X	Override not allowed
	0268		A	Override Allowed
	0268		R	Override Required

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
User	0269	Charge on Indicator		
	0269		O	Charge on order
	0269		R	Charge on result
User	0270	Document Type		
	0270		AR	Autopsy report
	0270		CD	Cardiodiagnostics
	0270		CN	Consultation
	0270		DI	Diagnostic imaging
	0270		DS	Discharge summary
	0270		ED	Emergency department report
	0270		HP	History and physical examination
	0270		OP	Operative report
	0270		PC	Psychiatric consultation
	0270		PH	Psychiatric history and physical examination
	0270		PN	Procedure note
	0270		PR	Progress note
	0270		SP	Surgical pathology
	0270		TS	Transfer summary
HL7	0271	Document Completion Status		
	0271		DI	Dictated
	0271		DO	Documented
	0271		IP	In progress
	0271		IN	Incomplete
	0271		PA	Pre-authenticated
	0271		AU	Authenticated
	0271		LA	Legally authenticated
HL7	0272	Document Confidentiality Status		
	0272		VR	Very restricted
	0272		RE	Restricted
	0272		UC	Usual control
HL7	0273	Document Availability Status		
	0273		AV	Available for patient care
	0273		UN	Unavailable for patient care
HL7	0274	Document Modification Status		
	0274		RP	Replacement
	0274		IN	Incremental
HL7	0275	Document Storage Status		
	0275		AC	Active
	0275		AA	Active and archived
	0275		AR	Archived (not active)
	0275		PU	Purged
User	0276	Appointment Reason Codes		
	0276		ROUTINE	Routine appointment - default if not valued
	0276		WALKIN	A previously unscheduled walk-in visit
	0276		CHECKUP	A routine check-up, such as an annual physical.
	0276		FOLLOWUP	A follow up visit from a previous appointment.
	0276		EMERGENCY	Emergency appointment
User	0277	Appointment Type Codes		

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0277		NORMAL	Routine schedule request type - default if not valued
	0277		TENTATIVE	A request for a tentative (e.g., "penciled in") appointment
	0277		COMPLETE	A request to add a completed appointment, used to maintain records of completed appointments that did not appear in the schedule (e.g., STAT, walk-in, etc.)
User	0278	Filler Status Codes		
	0278		PENDING	Appointment has not yet been confirmed
	0278		WAITLIST	Appointment has been placed on a waiting list for a particular slot, or set of slots
	0278		BOOKED	The indicated appointment is booked
	0278		STARTED	The indicated appointment has begun and is currently in progress
	0278		COMPLETE	The indicated appointment has completed normally (was not discontinued, canceled, or deleted)
	0278		CANCELLED	The indicated appointment was stopped from occurring (cancelled prior to starting)
	0278		DC	The indicated appointment was discontinued (DC'ed while in progress, discontinued parent appointment, or discontinued child appointment)
	0278		DELETED	The indicated appointment was deleted from the filler application
	0278		BLOCKED	The indicated time slot(s) is(are) blocked. Not used in the AIS, AIG, AIL, AIP segments.
	0278		OVERBOOK	The appointment has been confirmed; however it is confirmed in an overbooked state
User	0279	Allow Substitution Codes		
	0279		NO	Substitution of this resource is not allowed
	0279		CONFIRM	Contact the Placer Contact Person prior to making any substitutions of this resource
	0279		NOTIFY	Notify the Placer Contact Person, through normal institutional procedures, that a substitution of this resource has been made
	0279		YES	Substitution of this resource is allowed
User	0280	Referral Priority		
	0280		S	STAT
	0280		A	ASAP
	0280		R	Routine
User	0281	Referral Type		
	0281		LAB	Laboratory
	0281		RAD	Radiology
	0281		MED	Medical
	0281		SKN	Skilled Nursing
	0281		PSY	Psychiatric
	0281		HOM	Home Care
User	0282	Referral Disposition		
	0282		WR	Send Written Report
	0282		RP	Return Patient After Evaluation
	0282		AM	Assume Management
	0282		SO	Second Opinion
User	0283	Referral Status		
	0283		A	Accepted
	0283		P	Pending
	0283		R	Rejected
	0283		E	Expired
User	0284	Referral Category		



## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0284		I	Inpatient
	0284		O	Outpatient
	0284		A	Ambulatory
	0284		E	Emergency
User	0285	Insurance Company ID Codes		
	0285			No suggested values
User	0286	Provider Role		
	0286		RP	Referring Provider
	0286		PP	Primary Care Provider
	0286		CP	Consulting Provider
	0286		RT	Referred to Provider
HL7	0287	Action Code		
	0287		AD	ADD
	0287		CO	CORRECT
	0287		DE	DELETE
	0287		LI	LINK
	0287		UC	UNCHANGED
	0287		UN	UNLINK
	0287		UP	UPDATE
User	0288	Census Tract		
	0288			No suggested values
User	0289	County/parish		
	0289			No suggested values
HL7	0290	MIME base64 encoding Characters		
	0290			See chapter 2 Section 2.4.5.12.2 for values
HL7	0291	Subtype of Referenced Data		
	0291		TIFF	TIFF image data
	0291		PICT	PICT format image data
	0291		DICOM	Digital Imaging and Communications in Medicine
	0291		FAX	Facsimile data
	0291		JOT	Electronic ink data (Jot 1.0 standard)
	0291		BASIC	ISDN PCM audio data
	0291		Octet-stream	Uninterpreted binary data
	0291		PostScript	PostScript program
	0291		JPEG	Needs formal description
	0291		GIF	Needs formal description
	0291		HTML	Hypertext Markup Language
	0291		RTF	Rich Text Format
HL7	0292	Vaccines Administered		
	0292		24	Anthrax
	0292		19	BCG
	0292		27	Botulinum antitoxin
	0292		26	Cholera
	0292		29	CMVIG
	0292		12	Diphtheria antitoxin
	0292		28	DT(pediatric)
	0292		20	DTaP
	0292		50	Dtap-Hib

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0292		01	DTP
	0292		22	DTP-Hib
	0292		30	HBIG
	0292		31	Hep A - pediatric
	0292		52	Hep A - adult
	0292		08	Hep B - adolescent or pediatric
	0292		42	Hep B - adolescent/high risk infant
	0292		43	Hep B-adult
	0292		44	Hep B-dialysis
	0292		45	Hep B-other or unspecified
	0292		17	Hib-unspecified
	0292		46	Hib-PRP-D
	0292		47	Hib-HbOC
	0292		48	Hib-PRP-T
	0292		49	Hib-PRP-OMP
	0292		51	Hib-Hep B
	0292		14	IG
	0292		15	Influenza-split (incl. purified surface antigen)
	0292		16	Influenza-whole
	0292		10	IPV
	0292		39	Japanese encephalitis
	0292		03	MMR
	0292		04	M/R
	0292		05	Measles
	0292		32	Meningococcal
	0292		07	Mumps
	0292		11	Pertussis
	0292		23	Plague
	0292		33	Pneumococcal
	0292		02	OPV
	0292		18	Rabies-intramuscular injection
	0292		40	Rabies-intradermal injection
	0292		34	RIG
	0292		06	Rubella
	0292		38	Rubella/Mumps
	0292		09	Td (Adult)
	0292		35	Tetanus toxoid
	0292		13	TIG
	0292		25	Typhoid-oral
	0292		41	Typhoid-parenteral
	0292		21	Varicella
	0292		36	VZIG
	0292		37	Yellow fever
User	0293	Billing Category		
	0293			No suggested values
User	0294	Time Selection Criteria Parameter Class Codes		
	0294		PREFSTART	The preferred start time for the appointment request, service or resource. Any legal time specification in the format HHMM, using

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
				24-hour clock notation
	0294		PREFEND	The preferred end time for the appointment request, service or resource. Any legal time specification in the format HHMM, using 24-hour clock notation
	0294		MON	An indicator that Monday is or is not preferred for the day on which the appointment will occur. OK = Preferred appointment day NO = Day is not preferred
	0294		TUE	An indicator that Tuesday is or is not preferred for the day on which the appointment will occur. OK = Preferred appointment day NO = Day is not preferred
	0294		WED	An indicator that Wednesday is or is not preferred for the day on which the appointment will occur. OK = Preferred appointment day NO = Day is not preferred
	0294		THU	An indicator that Thursday is or is not preferred for the day on which the appointment will occur. OK = Preferred appointment day NO = Day is not preferred
	0294		FRI	An indicator that Friday is or is not preferred for the day on which the appointment will occur. OK = Preferred appointment day NO = Day is not preferred
	0294		SAT	An indicator that Saturday is or is not preferred for the day on which the appointment will occur. OK = Preferred appointment day NO = Day is not preferred
	0294		SUN	An indicator that Sunday is or is not preferred for the day on which the appointment will occur. OK = Preferred appointment day NO = Day is not preferred
User	0295	Handicap		
	0295			No suggested values
User	0296	Language		
	0296			No suggested values or ISO 639
User	0309	Coverage Type		
	0309		H	Hospital/institutional
	0309		P	Physician/professional
	0309		B	Both hospital and physician
User	0310	Handicap		
	0310			No suggested values
User	0311	Job Status		
	0311			No suggested values
User	0312	Policy Scope		
	0312			No suggested values
User	0313	Policy Source		
	0313			No suggested values
HL7	0314	Document Change Reason		
	0314			Waiting for values from Wayne Tracy
HL7	0315	Living Will		
	0315		Y	Yes, patient has a living will
	0315		F	Yes, patient has a living will but it is not on file
	0315		N	No, patient does not have a living will and no information was provided
	0315		I	No, patient does not have a living will but information was provided
	0315		U	Unknown
HL7	0316	Organ Donor		
	0316		Y	Yes, patient is a donor and card is on file

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0316		F	Yes, patient is a donor, but card is not on file
	0316		N	No, patient is not a donor
	0316		U	Unknown
User	0317	Annotations		
	0317		9900	Pace spike
	0317		9901	SAS marker
	0317		9902	Sense marker
	0317		9903	Beat marker
	0317		9904	etc.
HL7	0318	Confirmation Provided By		
	0318			No suggested values
User	0319	Department Cost Center		
	0319			No suggested values
User	0320	Item Natural Account Code		
	0320			No suggested values
HL7	0321	Dispense Method		
	0321		TR	Traditional
	0321		UD	Unit Dose
	0321		F	Floor Stock
	0321		AD	Automatic Dispensing
HL7	0322	Completion Status		
	0322		CP	Complete
	0322		RE	Refused
	0322		NA	Not Administered
	0322		PA	Partially Administered
	0323		D	Delete
	0323		U	Update
HL7	0323	Action Code		
	0323		A	Add
User	0324	Location Characteristic ID		
	0324		SMK	Smoking
	0324		LIC	Licensed
	0324		IMP	Implant: can be used for radiation implant patients
	0324		SHA	Shadow: a temporary holding location that does not physically exist
	0324		INF	Infectious disease: this location can be used for isolation
	0324		PRL	Private Level: indicating a level of private versus non-private room
	0324		LCR	Level of care
	0324		OVR	Overflow
	0324		STF	Bed is staffed
	0324		SET	Bed is set up
	0324		GEN	Gender of patient(s)
	0324		TEA	Teaching location
User	0325	Location Relationship ID		
	0325		RX	Nearest Pharmacy
	0325		RX2	Second Pharmacy
	0325		LAB	Nearest Lab
	0325		LB2	Second Lab

## Appendix A: Data Definition Tables

Type	Table	Name	Value	Description
	0325		DTY	Nearest Dietary
	0325		ALI	Location alias(es)
	0325		PAR	Parent location
User	0326	Visit Indicator		
	0326		A	Account level
	0326		V	Visit level
User	0327	Job Class		
	0327			No suggested values
User	0328	Employee Classification		
	0328			No suggested values
HL7	0329	Quantity Method		
	0329		A	Actual Count
	0329		E	Estimated (see comment)
HL7	0330	Marketing Basis		
	0330		510K	510 (K)
	0330		510E	510 (K) exempt
	0330		PMA	Premarketing authorization
	0330		PRE	Preamendment
	0330		TXN	Transitional
	0330		522S	Post marketing study (522)
HL7	0331	Facility Type		
	0331		U	User
	0331		M	Manufacturer
	0331		D	Distributor
	0331		A	Agent for a foreign manufacturer
HL7	0332	Network Source Type		
	0332		I	Initiate
	0332		A	Accept
User	0334	Disabled Person		
	0334		PT	Patient
	0334		GT	Guarantor
	0334		IN	Insured
	0334		AP	Associated Party
HL7	0337	Certification Status		
	0337		E	Eligible
	0337		C	Certified
User	0338	Practitioner ID number type		
	0338		UPIN	University Physician Id. No.
	0338		SL	State License Number
	0338		MCD	Medicaid Number
	0338		GL	General Ledger Number
	0338		CY	County Number
	0338		TAX	Tax ID Number
	0338		DEA	Drug Enforcement Agency No.
	0338		MCR	Medicare Number
	0338		L&I	Labor and Industries Number
	0338		QA	QA Number
	0338		TRL	Training License Number

## A.6 DATA ELEMENT NAMES

This section reflects the HL7 database which is available through HL7 Headquarters (see the last section in Chapter 1 for information on how to contact HL7).

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Abnormal Flags	00576	OBX	008	7	5	ID	Yes	5	0078
Abnormal Text/Codes for Categorical Observations	00639	OM3	005	8	200	CE	No		
Absolute Range for Ordinal & Continuous Obs	00633	OM2	008	8	200	CM	No		
Accept Acknowledgment Type	00015	MSH	015	2	2	ID	No		0155
Accident Code	00528	ACC	002	6	60	CE	No		0050
Accident Date/Time	00527	ACC	001	6	26	TS	No		
Accident Death Indicator	00814	ACC	006	6	2	ID	No		0136
Accident Job Related Indicator	00813	ACC	005	6	2	ID	No		0136
Accident Location	00529	ACC	003	6	25	ST	No		
Accommodation Code	00182	PV2	002	3	60	CE	No		0129
Accommodation Type	00980	LCC	003	8	60	CE	Yes		
Account ID	00236	BLG	003	4	100	CK	No		
Account Status	00171	PV1	041	3	2	IS	No		0117
Acknowledgment Code	00018	MSA	001	2	2	ID	No		0008
Action By	00233	ORC	019	4	120	XCN	No		
Action Code	00816	GOL	001	12	2	ID	No		0287
Action Code	00816	PRB	001	12	2	ID	No		0287
Action Code	01224	RXA	021	4	2	ID	No		0323
Action Code	00816	PTH	001	12	2	ID	No		0287
Action Code	00816	ROL	002	12	2	ID	No		0287
Action Date/Time	00817	GOL	002	12	26	TS	No		
Action Date/Time	00817	PRB	002	12	26	TS	No		
Action Taken In Response To The Event	01118	PCR	021	7	2	ID	Yes	6	0251
Activation Date	00680	STF	012	8	26	CM	Yes		
Activation Date	00969	LDP	007	8	26	TS	No		
Active/Inactive Flag	00675	LDP	006	8	1	ID	No		0183
Active/Inactive Flag	00675	STF	007	8	1	ID	No		0183
Active/Inactive Flag	00675	PRC	016	8	1	ID	No		0183
Active/Inactive Flag	00675	CDM	008	8	1	ID	No		0183
Activity Date/Time	00917	TXA	004	9	26	TS	No		
Actual Dispense Amount	00337	RXD	004	4	20	NM	No		
Actual Dispense Units	00338	RXD	005	4	60	CE	No		
Actual Dosage Form	00339	RXD	006	4	60	CE	No		
Actual Length of Inpatient Stay	00712	PV2	011	3	3	NM	No		
Actual Problem Resolution Date/Time	00844	PRB	009	12	26	TS	No		
Actual Strength	01132	RXD	016	4	20	NM	No		
Actual Strength Unit	01133	RXD	017	4	60	CE	No		
Addendum Continuation Pointer	00066	ADD	001	2	65536	ST	No		
Additional Insured on Auto	01275	STF	021	8	1	ID	No		0136
Additive	00647	OM4	007	8	60	CE	No		
Address	00193	NK1	004	3	106	XAD	Yes		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Address of Outside Site(s)	00613	OM1	028	8	1000	XAD	No		
Administered Amount	00348	RXA	006	4	20	NM	No		
Administered Code	00347	RXA	005	4	100	CE	No		0292
Administered Dosage Form	00350	RXA	008	4	60	CE	No		
Administered Per (Time Unit)	00354	RXA	012	4	20	ST	No		
Administered Strength	01134	RXA	013	4	20	NM	No		
Administered Strength Units	01135	RXA	014	4	60	CE	No		
Administered Units	00349	RXA	007	4	60	CE	No		
Administered-at Location	00353	RXA	011	4	200	CM	No		
Administering Provider	00352	RXA	010	4	200	XCN	No		
Administration Device	00311	RXR	003	4	60	CE	No		0164
Administration Method	00312	RXR	004	4	60	CE	No		0165
Administration Notes	00351	RXG	009	4	200	CE	Yes		
Administration Notes	00351	RXA	009	4	200	CE	Yes		
Administration Sub-ID Counter	00344	RXA	002	4	4	NM	No		
Admission Type	00134	PV1	004	3	2	IS	No		0007
Admit Date/Time	00174	PV1	044	3	26	TS	No		
Admit Reason	00183	PV2	003	3	60	CE	No		
Admit Source	00144	PV1	014	3	3	IS	No		0023
Admitting Doctor	00147	PV1	017	3	60	XCN	Yes		0010
Allergy Code/Mnemonic/ Description	00205	AL1	003	3	60	CE	No		
Allergy Reaction	00207	AL1	005	3	15	ST	No		
Allergy Severity	00206	AL1	004	3	2	IS	No		0128
Allergy Type	00204	AL1	002	3	2	IS	No		0127
Allow Substitution Code	00895	AIS	009	10	10	IS	No		0279
Allow Substitution Code	00895	AIP	011	10	10	IS	No		0279
Allow Substitution Code	00895	AIG	013	10	10	IS	No		0279
Allow Substitution Code	00895	AIL	011	10	10	IS	No		0279
Allow Substitutions	00300	RXO	009	4	1	ID	No		0161
Alternate Patient ID - CSR	01039	CSR	005	7	30	CX	No		
Alternate Patient ID - PID	00107	PID	004	3	20	ST	Yes		
Alternate Study ID	01036	CSR	002	7	60	EI	No		
Alternate Study ID	01012	CM0	003	8	60	CE	Yes	3	
Alternate Visit ID	00180	PV1	050	3	20	CX	No		0192
Ambulatory Status	00145	PV1	015	3	2	IS	Yes		0009
Ambulatory Status	00145	GT1	034	6	2	IS	No		0009
Ambulatory Status	00145	NK1	018	3	2	IS	Yes		0009
Ambulatory Status	00145	IN2	032	6	2	IS	No		0009
Anesthesia Code	00399	PR1	009	6	2	IS	No		0019
Anesthesia Minutes	00400	PR1	010	6	4	NM	No		
Anesthesiologist	00398	PR1	008	6	120	XCN	Yes		0010
Anticipated Price	00285	RQ1	001	4	10	ST	No		
Anticipated Problem Resolution Date/Time	00843	PRB	008	12	26	TS	No		
Appeal Reason	00518	IN3	017	6	60	CE	No		
Application Acknowledgment Type	00016	MSH	016	2	2	ID	No		0155
Appointment Reason	00869	ARQ	010	10	200	CE	No		
Appointment Duration	00868	SCH	009	10	20	NM	No		
Appointment Duration	00868	ARQ	009	10	20	NM	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Appointment Duration Units	01304	SCH	010	10	200	CE	No		
Appointment Reason	00866	SCH	007	10	200	CE	No		0276
Appointment Reason	00866	ARQ	007	10	200	CE	No		0276
Appointment Timing Quantity	00884	SCH	011	10	200	TQ	Yes		
Appointment Type	00867	ARQ	008	10	200	CE	No		0277
Appointment Type	00867	SCH	008	10	200	CE	No		0277
Assigned Document Authenticator	00923	TXA	010	9	60	XCN	Yes		
Assigned Patient Location	00133	PV1	003	3	80	PL	No		
Assigned Patient Location	00133	FT1	016	6	12	PL	No		
Assignment of Benefits	00445	IN1	020	6	2	IS	No		0135
Assistant Result Interpreter	00265	OBR	033	4	200	CM	Yes		
Associated Diagnosis Code	00772	PR1	015	6	80	CE	No		
Associated Party's Identifiers	00751	NK1	033	3	32	CX	Yes		
Attending Doctor	00137	PV1	007	3	60	XCN	Yes		0010
Attestation Date/Time	00768	DG1	019	6	26	TS	No		
Authentication Person, Time Stamp	00934	TXA	022	9	60	CM	Yes		
Authorization Effective Date	01149	AUT	004	11	26	TS	No		
Authorization Expiration Date	01150	AUT	005	11	26	TS	No		
Authorization Identifier	01151	AUT	006	11	30	EI	No		
Authorization Information	00439	IN1	014	6	55	CM	No		
Authorized Number of Treatments	01154	AUT	009	11	2	NM	No		
Authorizing Payor, Company ID	01147	AUT	002	11	200	CE	No		0285
Authorizing Payor, Company Name	01148	AUT	003	11	45	ST	No		
Authorizing Payor, Plan Code	01146	AUT	001	11	200	CE	No		0072
Auto Accident State	00812	ACC	004	6	60	CE	No		
Auto Ins. Expires	01232	STF	024	8	8	DT	No		
Baby Coverage	00490	IN2	019	6	1	ID	No		0136
Baby Detained Indicator	00738	PV2	037	3	1	ID	No		0136
Backup Person ID	00682	STF	014	8	60	CE	Yes		
Bad Debt Agency Code	00161	PV1	031	3	10	IS	No		0021
Bad Debt Recovery Amount	00163	PV1	033	3	12	NM	No		
Bad Debt Transfer Amount	00162	PV1	032	3	12	NM	No		
Batch Comment	00090	BHS	010	2	80	ST	No		
Batch Comment	00090	BTS	002	2	80	ST	No		
Batch Control ID	00091	BHS	011	2	20	ST	No		
Batch Creation Date/Time	00087	BHS	007	2	26	TS	No		
Batch Encoding Characters	00082	BHS	002	2	3	ST	No		
Batch Field Separator	00081	BHS	001	2	1	ST	No		
Batch Message Count	00093	BTS	001	2	10	ST	No		
Batch Name/ID/Type	00089	BHS	009	2	20	ST	No		
Batch Receiving Application	00085	BHS	005	2	15	ST	No		
Batch Receiving Facility	00086	BHS	006	2	20	ST	No		
Batch Security	00088	BHS	008	2	40	ST	No		
Batch Sending Application	00083	BHS	003	2	15	ST	No		
Batch Sending Facility	00084	BHS	004	2	20	ST	No		
Batch Totals	00095	BTS	003	2	100	NM	Yes		
Bed Location	00209	NPU	001	3	80	PL	No		
Bed Status	00170	NPU	002	3	1	IS	No		0116



## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Bed Status	00170	PV1	040	3	1	IS	No		0116
Billing Category	01007	PRC	014	8	60	CE	Yes		0293
Billing Media Code	00733	PV2	032	3	1	ID	No		0136
Billing Status	00457	IN1	032	6	2	IS	No		0022
Birth Order	00128	PID	025	3	2	NM	No		
Birth Place	00126	PID	023	3	60	ST	No		
Blood Deductible	00492	IN2	021	6	1	ST	No		
Blood Deductible (43)	00531	UB1	002	6	1	NM	No		
Blood Furnished Pints Of (40)	00532	UB1	003	6	2	NM	No		
Blood Not Replaced Pints(42)	00534	UB1	005	6	2	NM	No		
Blood Replaced Pints (41)	00533	UB1	004	6	2	NM	No		
Brand Name	01249	PDC	003	7	60	ST	No	0	
Business Phone Number	00195	NK1	006	3	40	XTN	Yes		
Call Back Phone Number	00228	ORC	014	4	40	XTN	Yes	2	
Case Manager	00522	IN3	021	6	48	ST	No		
Catalogue Identifier	01253	PDC	007	7	60	ST	No	0	
Cause Of Death	01090	PEO	018	7	60	CE	Yes		
Certainty of Problem	00854	PRB	019	12	60	CE	No		
Certification Agency	00519	IN3	018	6	60	CE	No		
Certification Agency Phone Number	00520	IN3	019	6	40	XTN	Yes		
Certification Begin Date	00510	IN3	009	6	8	DT	No		
Certification Contact	00516	IN3	015	6	48	ST	No		
Certification Contact Phone Number	00517	IN3	016	6	40	XTN	Yes		
Certification Date/Time	00507	IN3	006	6	26	TS	No		
Certification End Date	00511	IN3	010	6	8	DT	No		
Certification Modify Date/Time	00508	IN3	007	6	26	TS	No		
Certification Number	00503	IN3	002	6	59	CX	No		
Certification Required	00505	IN3	004	6	1	ID	No		0136
Certified By	00504	IN3	003	6	60	XCN	Yes		
Chairman of Study	01014	CM0	005	8	60	XCN	No		
Challenge Information	00939	OM1	044	8	200	TX	No		
Champus ID Number	00481	IN2	010	6	20	ST	No		
Champus Non-Avail Cert on File	00489	IN2	018	6	1	ID	No		0136
Champus Organization	00483	IN2	012	6	25	ST	No		
Champus Rank/Grade	00486	IN2	015	6	2	IS	No		0141
Champus Retire Date	00488	IN2	017	6	8	DT	No		
Champus Service	00485	IN2	014	6	14	IS	No		0140
Champus Sponsor Name	00480	IN2	009	6	48	XPB	Yes		
Champus Station	00484	IN2	013	6	25	ST	No		
Champus Status	00487	IN2	016	6	3	IS	No		0142
Change Pathway Lifecycle Status Date/Time	01211	PTH	006	12	26	TS	No		
Character Set	00692	MSH	018	2	6	ID	Yes	3	0211
Charge Code	00981	LCC	004	8	60	CE	Yes		0132
Charge Code Alias	00983	CDM	002	8	200	CE	Yes		
Charge Description Long	00985	CDM	004	8	250	ST	No		
Charge Description Short	00984	CDM	003	8	20	ST	No		
Charge On Indicator	01009	PRC	018	8	1	ID	No		0269
Charge Price Indicator	00151	PV1	021	3	2	IS	No		0032

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Charge To Practice	00256	OBR	023	4	40	CM	No		
Charge Type	00235	BLG	002	4	50	ID	No		0122
Chargeable Flag	01008	PRC	015	8	1	ID	No		0136
Checksum Errors Received	01182	NST	010	C	10	NM	No		
Citizenship	00129	GT1	035	6	4	IS	No		0171
Citizenship	00129	NK1	019	3	4	IS	Yes		0171
Citizenship	00129	IN2	033	6	4	IS	No		0171
Citizenship	00129	PID	026	3	4	IS	Yes		0171
Clinic Organization Name	00724	PV2	023	3	90	XON	Yes		
Co Insurance Days (25)	00535	UB1	006	6	2	NM	No		
Co-Insurance Days (9)	00554	UB2	002	6	3	ST	No		
Coded Representation of Method	00599	OM1	014	8	200	CE	No		
Collection Volume	00243	OBR	009	4	20	CQ	No		
Collector Identifier	00244	OBR	010	4	60	XCN	Yes		
Collector's Comment	01030	OBR	039	4	200	CE	Yes		
Column Description	00702	RDF	002	2	40	CM	Yes		
Column Value	00703	RDT	1-n	2	Variable	Variable	No		
Combine Baby Bill	00491	IN2	020	6	1	ID	No		0136
Comment	00098	NTE	003	2	65536	FT	Yes		
Company Plan Code	00460	IN1	035	6	8	IS	No		0042
Completion Status	01223	RXA	020	4	2	ID	No		0322
Component Amount	00315	RXC	003	4	20	NM	No		
Component Code	00314	RXC	002	4	100	CE	No		
Component Strength	01124	RXC	005	4	20	NM	No		
Component Strength Units	01125	RXC	006	4	60	CE	No		
Component Units	00316	RXC	004	4	60	CE	No		
Condition Code (24-30)	00555	UB2	003	6	2	IS	Yes	7	0043
Condition Code (35-39)	00536	UB1	007	6	14	IS	Yes	5	0043
Confidential Indicator	00767	DG1	018	6	1	ID	No		0136
Confidential Indicator	00767	DRG	010	6	1	ID	No		0136
Confidentiality Code	00615	OM1	030	8	1	IS	No		0177
Confirmation Provided By	01095	PEO	023	7	1	ID	No		0242
Connect Timeouts	01185	NST	013	C	10	NM	No		
Consent Code	00403	PR1	013	6	60	CE	No		0059
Consulting Doctor	00139	PV1	009	3	60	XCN	Yes		0010
Contact Address	01268	FAC	007	7	200	XAD	Yes	0	
Contact Address	01166	CTD	003	11	60	XAD	No		
Contact Communication Information	01168	CTD	005	11	100	XTN	Yes		
Contact for Study	01018	CM0	009	8	60	XCN	No		
Contact Identifiers	01171	CTD	007	11	100	CM	Yes		
Contact Location	01167	CTD	004	11	60	EI	No		
Contact Name	01165	CTD	002	11	106	XPN	Yes		
Contact Person	01266	FAC	005	7	60	XCN	Yes	0	
Contact Person Social Security Number	00754	NK1	037	3	16	ST	No		
Contact Person's Address	00750	NK1	032	3	106	XAD	Yes		
Contact Person's Name	00748	NK1	030	3	48	XPN	Yes		
Contact Person's Name	00748	GT1	045	6	48	XPN	Yes		
Contact Person's Telephone Number	00749	NK1	031	3	40	XTN	Yes		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Contact Person's Telephone Number	00749	GT1	046	6	40	XTN	Yes		
Contact Phone	00978	LDP	011	8	40	XTN	No		
Contact Reason	00747	GT1	047	6	80	CE	No		0222
Contact Reason	00747	NK1	029	3	80	CE	Yes		0222
Contact Relationship Code	00784	GT1	048	6	2	IS	No		0063
Contact Role	00196	NK1	007	3	60	CE	No		0131
Contact Telecommunication	01269	FAC	008	7	44	XTN	Yes	0	
Contact Title	01267	FAC	006	7	60	ST	Yes	0	
Contact's Address	01020	CM0	011	8	100	XAD	No		
Contact's Tel. Number	01019	CM0	010	8	40	XTN	No		
Container Description	00643	OM4	003	8	60	TX	No		
Container Units	00645	OM4	005	8	60	CE	No		
Container Volume	00644	OM4	004	8	20	NM	No		
Continuation Pointer	00014	DSC	001	2	180	ST	No		
Continuation Pointer	00014	MSH	014	2	180	ST	No		
Contract Amount	00156	PV1	026	3	12	NM	Yes		
Contract Code	00154	PV1	024	3	2	IS	Yes		0044
Contract Effective Date	00155	PV1	025	3	8	DT	Yes		
Contract Number	00992	CDM	011	8	200	CK	Yes		
Contract Organization	00993	CDM	012	8	200	XON	No		
Contract Period	00157	PV1	027	3	3	NM	Yes		
Contraindications to Observations	00618	OM1	033	8	65536	CE	No		
Coord of Ben. Priority	00447	IN1	022	6	2	ST	No		
Coordination of Benefits	00446	IN1	021	6	2	IS	No		0173
Copay Limit Flag	00807	IN2	067	6	2	ID	No		0136
Copy Auto Ins	01229	STF	023	8	1	ID	No		0136
Corresponding SI Units of Measure	00629	OM2	004	8	60	CE	No		
Cost	00989	PRC	017	8	12	CP	No		
Country	01248	PDC	002	7	60	CE	No	0	
Country Code	00017	MSH	017	2	2	ID	No		
County Code	00115	PID	012	3	4	IS	No		
Courtesy Code	00152	PV1	022	3	2	IS	No		0045
Coverage Type	01277	IN1	047	6	3	IS	No		0309
Covered Days (23)	00537	UB1	008	6	3	NM	No		
Covered Days (7)	00556	UB2	004	6	3	ST	No		
Credit Rating	00153	PV1	023	3	2	IS	No		0046
Critical Range for Ordinal & Continuous Obs	00632	OM2	007	8	200	CM	No		
Critical Text Codes for Categorical Observations	00640	OM3	006	8	200	CE	No		
Current Application	01191	NSC	004	C	30	ST	No		
Current CPU	01189	NSC	002	C	30	ST	No		
Current Facility	01192	NSC	005	C	30	ST	No		
Current Fileserver	01190	NSC	003	C	30	ST	No		
Current Goal Review Date/Time	00828	GOL	012	12	26	TS	No		
Current Goal Review Status	00827	GOL	011	12	80	CE	No		
Current Patient Balance	00176	PV1	046	3	12	NM	No		
D/T of Most Recent Refill or Dose Dispensed	00328	RXE	018	4	26	TS	No		
Daily Deductible	00501	IN2	030	6	25	CM	No		
Danger Code	00246	OBR	012	4	60	CE	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Data Line	00063	DSP	003	2	300	TX	No		
Date Entered Practice	01296	PRA	008	8	8	DT	No		
Date First Marked	01260	PDC	014	7	26	TS	No	0	
Date Last DMV Review	01298	STF	025	8	8	DT	No		
Date Last Marked	01261	PDC	015	7	26	TS	No	0	
Date Last Obs Normal Values	00580	OBX	012	7	26	TS	No		
Date Needed	00284	RQD	010	4	8	DT	No		
Date Next DMV Review	01234	STF	026	8	8	DT	No		
Date Product Returned To Manufacturer	01115	PCR	018	7	26	TS	No		
Date/Time Dispensed	00336	RXD	003	4	26	TS	No		
Date/Time End of Administration	00346	RXA	004	4	26	TS	No		
Date/time Ended Study	01049	CSR	015	7	26	TS	No		
Date/Time Goal Established	00822	GOL	007	12	26	TS	No		
Date/Time of Birth	00110	NK1	016	3	26	TS	No		
Date/Time of Birth	00110	STF	006	8	26	TS	No		
Date/Time of Birth	00110	PID	007	3	26	TS	No		
Date/Time of Event	00100	EVN	002	3	26	TS	No		
Date/Time of Message	00007	MSH	007	2	26	TS	No		
Date/Time of Patient Study Registration	01040	CSR	006	7	26	TS	No		
Date/Time of the Observation	00582	OBX	014	7	26	TS	No		
Date/Time of Transaction	00223	ORC	009	4	26	TS	No		
Date/time Patient Study Consent Signed	01043	CSR	009	7	26	TS	No		
Date/Time Planned Event	00101	EVN	003	3	26	TS	No		
Date/Time Problem Established	00842	PRB	007	12	26	TS	No		
Date/Time Selection Qualifier	00044	QRF	008	2	12	ID	Yes		0158
Date/Time Stamp for Any Change in Def Attri for Obs	00606	OM1	021	8	26	TS	No		
Date/Time Start of Administration	00345	RXA	003	4	26	TS	No		
Date/time Study Phase Began	01052	CSP	002	7	26	TS	No		
Date/time Study Phase Ended	01053	CSP	003	7	26	TS	No		
Days	00512	IN3	011	6	3	CM	No		0149
Deferred Response Date/Time	00030	QRD	006	2	26	TS	No		
Deferred Response Type	00029	QRD	005	2	1	ID	No		0107
Delay Before L. R. Day	00459	IN1	034	6	4	NM	No		
Delayed Acknowledgment Type	00022	MSA	005	2	1	ID	No		0102
Delete Account Date	00165	PV1	035	3	8	DT	No		
Delete Account Indicator	00164	PV1	034	3	1	IS	No		0111
Deliver To ID	00283	RQD	009	4	60	CE	No		
Deliver-to Location	00299	RXE	008	4	200	CM	No		
Deliver-to Location	00299	RXO	008	4	200	CM	No		
Delta Check Criteria	00634	OM2	009	8	200	CM	Yes		
Department	00676	STF	008	8	200	CE	Yes		0184
Department	00996	PRC	003	8	60	CE	Yes		
Department Code	00367	FT1	013	6	60	CE	No		0049
Dependent of Campus Recipient	00482	IN2	011	6	80	CE	No		
Dept. Cost Center	00281	RQD	007	4	30	IS	No		0319
Derivation Rule	00657	OM6	002	8	10240	TX	No		
Derived Specimen	00642	OM4	002	8	1	ID	No		0170
Description of Study Phase	01023	CM1	003	8	300	ST	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Description of Test Methods	00626	OM1	041	8	65536	TX	No		
Description of Time Point	01026	CM2	003	8	300	ST	No		
Description Override Indicator	00986	CDM	005	8	1	IS	No		0268
Device Family Name	01250	PDC	004	7	60	ST	No	0	
Device Operator Qualifications	01116	PCR	019	7	1	ID	No		0242
Disabled Indicator	01286	DB1	004	3	1	ID	No	0	0136
Diagnosing Clinician	00390	DG1	016	6	60	XCN	Yes		
Diagnosis Classification	00766	DG1	017	6	3	IS	No		0228
Diagnosis Code	00377	DG1	003	6	60	CE	No		0051
Diagnosis Code	00371	FT1	019	6	60	CE	Yes		0051
Diagnosis Coding Method	00376	DG1	002	6	2	ID	No		0053
Diagnosis Date/Time	00379	DG1	005	6	26	TS	No		
Diagnosis Description	00378	DG1	004	6	40	ST	No		
Diagnosis/DRG Priority	00389	DG1	015	6	2	NM	No		
Diagnosis/DRG Type	00380	DG1	006	6	2	IS	No		0052
Diagnostic Related Group	00382	DRG	001	6	60	CE	No		0055
Diagnostic Related Group	00382	DG1	008	6	60	CE	No		0055
Diagnostic Serv Sect ID	00257	OBR	024	4	10	ID	No		0074
Diet Type	00168	PV1	038	3	2	IS	No		0114
Diet, Supplement, or Preference Code	00271	ODS	003	4	60	CE	Yes	20	
Disability end date	01288	DB1	006	3	8	DT	No	0	
Disability return to work date	01289	DB1	007	3	8	DT	No	0	
Disability start date	01287	DB1	005	3	8	DT	No	0	
Disability unable to work date	01290	DB1	008	3	8	DT	No	0	
Disabled person code	01284	DB1	002	3	2	IS	No	0	0034
Disabled person identifier	01285	DB1	003	3	32	CX	Yes	0	
Discharge Date/Time	00175	PV1	045	3	26	TS	No		
Discharge Disposition	00166	PV1	036	3	3	IS	No		0112
Discharged to Location	00167	PV1	037	3	25	CM	No		0113
Dispense Amount	00323	RXE	010	4	20	NM	No		
Dispense Notes	00340	RXD	009	4	200	CE	Yes		
Dispense Package Method	01222	RXE	030	4	2	ID	No		0321
Dispense Package Method	01222	RXD	024	4	2	ID	No		0321
Dispense Package Size	01220	RXE	028	4	20	NM	No		
Dispense Package Size	01220	RXD	022	4	20	NM	No		
Dispense Package Size Unit	01221	RXE	029	4	60	CE	No		
Dispense Package Size Unit	01221	RXD	023	4	60	CE	No		
Dispense Sub-ID Counter	00334	RXD	001	4	4	NM	No		
Dispense Sub-ID Counter	00334	RXG	002	4	4	NM	No		
Dispense Units	00324	RXE	011	4	60	CE	No		
Dispense-to Location	01303	RXD	013	4	200	CM	No		
Dispense-to Location	01303	RXG	011	4	200	CM	No		
Dispense/Give Code	00335	RXD	002	4	100	CE	No		0292
Dispensing Provider	00341	RXD	010	4	200	XCN	No		
Display Level	00062	DSP	002	2	4	SI	No		
Distributed Copies (Code and Name of Recipients)	00935	TXA	023	9	60	XCN	Yes		
Document Availability Status	00930	TXA	019	9	2	ID	No		0273
Document Change Reason	00933	TXA	021	9	30	ST	No		0

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Document Completion Status	00928	TXA	017	9	2	ID	No		0271
Document Confidentiality Status	00929	TXA	018	9	2	ID	No		0272
Document Content Presentation	00916	TXA	003	9	2	ID	No		0191
Document Control Number	00564	UB2	012	6	23	ST	Yes	3	
Document Storage Status	00932	TXA	020	9	2	ID	No		0275
Document Type	00915	TXA	002	9	30	IS	No		0270
Documented Date/Time	01213	VAR	002	12	26	TS	No		
DRG Approval Indicator	00383	DRG	003	6	2	ID	No		0136
DRG Approval Indicator	00383	DG1	009	6	2	ID	No		0136
DRG Assigned Date/Time	00769	DRG	002	6	26	TS	No		
DRG Grouper Review Code	00384	DRG	004	6	2	IS	No		0056
DRG Grouper Review Code	00384	DG1	010	6	2	IS	No		0056
DRG Payor	00770	DRG	008	6	1	IS	No		0229
Driver's License - Patient	00123	PID	020	3	25	CM	No		
Driver's License - Staff	01302	STF	022	8	25	CM	No		
Duplicate Patient	00762	PD1	010	3	2	CX	Yes		0
Duration	00893	AIS	007	10	20	NM	No		
Duration	00893	AIG	011	10	20	NM	No		
Duration	00893	AIP	009	10	20	NM	No		
Duration	00893	AIL	009	10	20	NM	No		
Duration Units	00894	AIG	012	10	200	CE	No		
Duration Units	00894	AIP	010	10	200	CE	No		
Duration Units	00894	AIL	010	10	200	CE	No		
Duration Units	00894	AIS	008	10	200	CE	No		
E-mail Address	00683	STF	015	8	40	ST	Yes		
Edit Date/Time	00921	TXA	008	9	26	TS	Yes		
Effective Date	01143	RF1	007	11	26	TS	No		
Effective Date/Time	00662	MFI	005	8	26	TS	No		
Effective Date/Time	00662	MFE	003	8	26	TS	No		
Effective Date/Time of Change in Test Procedure that Make Results Non-Comparable	00607	OM1	022	8	26	TS	No		
Effective End Date	01005	PRC	012	8	26	TS	No		
Effective End Date of Role	01164	PRD	009	11	26	TS	No		
Effective Start Date	01004	PRC	011	8	26	TS	No		
Effective Start Date of Role	01163	PRD	008	11	26	TS	No		
Eligibility Source	00498	IN2	027	6	1	IS	No		0144
Employer Contact Person Name	00789	IN2	049	6	48	XP	Yes		0311
Employer Contact Person Phone Number	00790	IN2	050	6	40	XTN	Yes		
Employer Contact Reason	00791	IN2	051	6	2	IS	No		0222
Employer Information Data	00475	IN2	004	6	1	IS	No		0139
Employment Illness Related Indicator	00716	PV2	015	3	1	ID	No		0136
Employment Start Date	00787	IN2	044	6	8	DT	No		
Employment Status	01276	STF	020	8	2	ID	No		0066
Employment Stop Date	00783	GT1	032	6	8	DT	No		
Employment Stop Date	00783	IN2	045	6	8	DT	No		
Encoding Characters	00002	MSH	002	2	4	ST	No		
End Date	00198	NK1	009	3	8	DT	No		
Entered By	00224	ORC	010	4	120	XCN	No		
Entered By Code	00765	FT1	024	6	120	XCN	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Entered by Location	00880	SCH	022	10	80	PL	No	0	
Entered By Location	00880	ARQ	021	10	80	PL	No		
Entered By Person	00878	ARQ	019	10	48	XCN	No		
Entered by Person	00878	SCH	020	10	48	XCN	No	0	
Entered by Phone Number	00879	SCH	021	10	40	XTN	Yes	0	
Entered By Phone Number	00879	ARQ	020	10	40	XTN	Yes		
Entered Date/Time	00661	MFI	004	8	26	TS	No		
Enterer's Location	00227	ORC	013	4	80	PL	No		
Entering Device	00232	ORC	018	4	60	CE	No		
Entering Organization	00231	ORC	017	4	60	CE	No		
Episode of Care ID	00820	GOL	005	12	60	EI	No		
Episode of Care ID	00820	PRB	005	12	60	EI	No		
EQL Query Name	00709	EQL	003	2	60	CE	No		
EQL Query Statement	00710	EQL	004	2	4096	ST	No		
Error Code and Location	00024	ERR	001	2	80	CM	Yes		
Error Condition	00023	MSA	006	2	100	CE	No		
Error Return Code and/or Text	00669	MFA	004	8	60	CE	No		0181
Escort Required	01033	OBR	042	4	1	ID	No		0225
Estimated Length of Inpatient Stay	00711	PV2	010	3	3	NM	No		
Ethnic Group	00125	NK1	028	3	3	IS	No		0189
Ethnic Group	00125	PID	022	3	3	IS	No		0189
Ethnic Group	00125	GT1	044	6	3	IS	No		0189
Ethnic Group	00125	IN2	042	6	3	IS	No		0189
Evaluated Product Source	01114	PCR	017	7	8	ID	No		0248
Event Occurred	01278	EVN	006		26	TS	No	0	
Event Causality Observations	01119	PCR	022	7	2	ID	Yes	6	0232
Event Completion Date/Time	00668	MFA	003	8	26	TS	No		
Event Description From Autopsy	01089	PEO	017	7	600	FT	Yes		
Event Description From Others	01085	PEO	013	7	600	FT	Yes		
Event Description From Patient	01087	PEO	015	7	600	FT	Yes		
Event Description From Practitioner	01088	PEO	016	7	600	FT	Yes		
Event Ended Data/Time	01078	PEO	006	7	26	TS	No		
Event Exacerbation Date/Time	01076	PEO	004	7	26	TS	No		
Event Expected	01082	PEO	010	7	1	ID	No		0239
Event From Original Reporter	01086	PEO	014	7	600	FT	Yes		
Event Identifier	00706	ERQ	002	2	60	CE	No		
Event Identifiers Used	01073	PEO	001	7	60	CE	Yes		
Event Improved Date/Time	01077	PEO	005	7	26	TS	No		
Event Location Occurred Address	01079	PEO	007	7	106	XAD	No		
Event Onset Date/Time	01075	PEO	003	7	26	TS	No		
Event Outcome	01083	PEO	011	7	1	ID	Yes		0240
Event Qualification	01080	PEO	008	7	1	ID	Yes		0237
Event Reason	00883	SCH	006	10	200	CE	No		
Event Reason Code	00102	EVN	004	3	3	IS	No		0062
Event Report Date	01069	PES	010	7	26	TS	No		
Event Report Source	01071	PES	012	7	1	ID	No		0235
Event Report Timing/Type	01070	PES	011	7	3	ID	Yes	2	0234
Event Reported To	01072	PES	013	7	1	ID	Yes		0236

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Event Serious	01081	PEO	009	7	1	ID	No		0238
Event Symptom/Diagnosis Code	01074	PEO	002	7	60	CE	Yes		
Event Type Code	00099	EVN	001	3	3	ID	No		0003
Events Scheduled This Time Point	01027	CM2	004	8	60	CE	Yes	200	
Expected Admit Date	00188	PV2	008	3	8	DT	No		
Expected Discharge Date	00189	PV2	009	3	8	DT	No		
Expected Discharge Disposition	00728	PV2	027	3	2	IS	No		0112
Expected Goal Achievement Date/Time	00824	GOL	008	12	26	TS	No		
Expected Number of Insurance Plans	00721	PV2	020	3	1	NM	No		
Expected Sequence Number	00021	MSA	004	2	15	NM	No		
Expected Shelf Life	01259	PDC	013	7	12	CQ	No	0	
Expected Surgery Date & Time	00734	PV2	033	3	26	TS	No		
Expiration Date	01144	RF1	008	11	26	TS	No		
Exploding Charges	00987	CDM	006	8	60	CE	Yes		
External Referral Identifier	01300	RF1	011	11	30	EI	Yes		
Facility Address	01264	FAC	003	7	200	XAD	No	0	
Facility ID	01262	FAC	001	7	20	EI	No	0	
Facility ID	00995	PRC	002	8	60	CE	Yes		
Facility Telecommunication	01265	FAC	004	7	44	XTN	No	0	
Facility Type	01263	FAC	002	7	1	ID	No	0	0331
Factors that may Effect the Observation	00624	OM1	039	8	200	TX	No		
Family/Significant Other Awareness of Problem/Prognosis	00859	PRB	024	12	200	ST	No		
Fee Schedule	00370	FT1	017	6	1	IS	No		0024
Field Separator	00001	MSH	001	2	1	ST	No		
File Batch Count	00079	FTS	001	2	10	NM	No		
File Control ID	00077	FHS	011	2	20	ST	No		
File Creation Date/Time	00073	FHS	007	2	26	TS	No		
File Encoding Characters	00068	FHS	002	2	4	ST	No		
File Field Separator	00067	FHS	001	2	1	ST	No		
File Header Comment	00076	FHS	010	2	80	ST	No		
File Name/ID	00075	FHS	009	2	20	ST	No		
File Receiving Application	00071	FHS	005	2	15	ST	No		
File Receiving Facility	00072	FHS	006	2	20	ST	No		
File Security	00074	FHS	008	2	40	ST	No		
File Sending Application	00069	FHS	003	2	15	ST	No		
File Sending Facility	00070	FHS	004	2	20	ST	No		
File Trailer Comment	00080	FTS	002	2	80	ST	No		
File-Level Event Code	00660	MFI	003	8	3	ID	No		0178
Filler Appointment ID	00861	SCH	002	10	22	EI	No		
Filler Appointment ID	00861	ARQ	002	10	22	EI	No		
Filler Contact Address	00887	SCH	018	10	106	XAD	No		
Filler Contact Location	00888	SCH	019	10	80	PL	No		
Filler Contact Person	00885	SCH	016	10	38	XCN	No		
Filler Contact Phone Number	00886	SCH	017	10	40	XTN	No		
Filler Field 1	00253	OBR	020	4	60	ST	No		
Filler Field 2	00254	OBR	021	4	60	ST	No		
Filler Order Number	00217	TXA	015	9	22	EI	No		
Filler Order Number	00217	ORC	003	4	22	EI	No		



## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Filler Order Number	00217	FT1	023	6	22	EI	No		
Filler Order Number	00217	OBR	003	4	22	EI	No		
Filler Override Criteria	00912	APR	005	10	80	CM	Yes		
Filler Status Code	00889	AIG	014	10	200	CE	No		0278
Filler Status Code	00889	AIP	012	10	200	CE	No		0278
Filler Status Code	00889	AIL	012	10	200	CE	No		0278
Filler Status Code	00889	SCH	025	10	200	CE	No		0278
Filler Status Code	00889	AIS	010	10	200	CE	No		0278
Financial Class	00150	PV1	020	3	50	CM	Yes		0064
First Similar Illness Date	00730	PV2	029	3	8	DT	No		
Fixed Canned Message	00621	OM1	036	8	65536	CE	No		
Formula	00999	PRC	006	8	200	ST	Yes		
Generic Name	01251	PDC	005	7	60	CE	No	0	
Generic Product	01099	PCR	002	7	1	IS	No		0239
Give Amount - Maximum	00319	RXE	004	4	20	NM	No		
Give Amount - Maximum	00319	RXG	006	4	20	NM	No		
Give Amount - Minimum	00318	RXE	003	4	20	NM	No		
Give Amount - Minimum	00318	RXG	005	4	20	NM	No		
Give Code	00317	RXG	004	4	100	CE	No		0292
Give Code	00317	RXE	002	4	100	CE	No		0292
Give Dosage Form	00321	RXG	008	4	60	CE	No		
Give Dosage Form	00321	RXE	006	4	60	CE	No		
Give Indication	01128	RXE	027	4	200	CE	Yes		
Give Per (Time Unit)	00331	RXG	014	4	20	ST	No		
Give Per (Time Unit)	00331	RXE	022	4	20	ST	No		
Give Rate Amount	00332	RXE	023	4	6	ST	No		
Give Rate Amount	00332	RXG	015	4	6	ST	No		
Give Rate Units	00333	RXE	024	4	60	CE	No		
Give Rate Units	00333	RXG	016	4	60	CE	No		
Give Strength	01126	RXG	017	4	20	NM	No		
Give Strength	01126	RXE	025	4	20	NM	No		
Give Strength Units	01127	RXE	026	4	60	CE	No		
Give Strength Units	01127	RXG	018	4	60	CE	No		
Give Sub-ID Counter	00342	RXA	001	4	4	NM	No		
Give Sub-ID Counter	00342	RXG	001	4	4	NM	No		
Give Units	00320	RXE	005	4	60	CE	No		
Give Units	00320	RXG	007	4	60	CE	No		
Goal Classification	00825	GOL	009	12	80	CE	No		
Goal Evaluation	00832	GOL	016	12	80	CE	No		
Goal Evaluation Comment	00833	GOL	017	12	300	ST	Yes		
Goal ID	00818	GOL	003	12	80	CE	No		
Goal Instance ID	00819	GOL	004	12	60	EI	No		
Goal Life Cycle Status	00834	GOL	018	12	80	CE	No		
Goal Life Cycle Status Date/Time	00835	GOL	019	12	26	TS	No		
Goal Management Discipline	00826	GOL	010	12	80	CE	No		
Goal Review Interval	00831	GOL	015	12	200	TQ	No		
Goal Target Name	00837	GOL	021	12	80	XP	Yes		
Goal Target Type	00836	GOL	020	12	80	CE	Yes		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Group Name	00434	IN1	009	6	130	XON	Yes		
Group Number	00433	IN1	008	6	12	ST	No		
Grouper Version and Type	00388	DG1	014	6	4	ST	No		
Guarantor Address	00409	GT1	005	6	106	XAD	Yes		
Guarantor Billing Hold Flag	00773	GT1	022	6	1	ID	No		0136
Guarantor Charge Adjustment Code	00777	GT1	026	6	80	CE	No		0218
Guarantor Credit Rating Code	00774	GT1	023	6	80	CE	No		
Guarantor Date - Begin	00417	GT1	013	6	8	DT	No		
Guarantor Date - End	00418	GT1	014	6	8	DT	No		
Guarantor Date/Time of Birth	00412	GT1	008	6	26	TS	No		
Guarantor Death Date And Time	00775	GT1	024	6	26	TS	No		
Guarantor Death Flag	00776	GT1	025	6	1	ID	No		0136
Guarantor Employ Phone Number	00422	GT1	018	6	40	XTN	Yes		
Guarantor Employee ID Number	00423	GT1	019	6	20	CX	Yes		
Guarantor Employer Address	00421	GT1	017	6	106	XAD	Yes		
Guarantor Employer ID Number	00780	GT1	029	6	20	CX	Yes		
Guarantor Employer Name	00420	GT1	016	6	130	XPN	Yes		
Guarantor Employer's Organization Name	01299	GT1	051	6	130	XON	Yes		
Guarantor Employment Status	00424	GT1	020	6	2	IS	No		0066
Guarantor Financial Class	01231	GT1	054	6	0	CM	No		
Guarantor Hire Effective Date	00782	GT1	031	6	8	DT	No		
Guarantor Household Annual Income	00778	GT1	027	6	10	CP	No		
Guarantor Household Size	00779	GT1	028	6	3	NM	No		
Guarantor Marital Status Code	00781	GT1	030	6	1	IS	No		0002
Guarantor Name	00407	GT1	003	6	48	XPN	Yes		
Guarantor Number	00406	GT1	002	6	59	CX	Yes		
Guarantor Organization	00425	GT1	021	6	130	XON	Yes		
Guarantor Ph Num- Home	00410	GT1	006	6	40	XTN	Yes		
Guarantor Ph Num-Business	00411	GT1	007	6	40	XTN	Yes		
Guarantor Priority	00419	GT1	015	6	2	NM	No		
Guarantor Race	01291	GT1	055	6	1	IS	No	0	0005
Guarantor Relationship	00415	GT1	011	6	2	IS	No		0063
Guarantor Sex	00413	GT1	009	6	1	IS	No		0001
Guarantor Spouse Name	00408	GT1	004	6	48	XPN	Yes		
Guarantor SSN	00416	GT1	012	6	11	ST	No		
Guarantor Type	00414	GT1	010	6	2	IS	No		0068
Guarantor's Relationship To Insured	00802	IN2	062	6	2	IS	No		0063
Handicap	00753	NK1	036	3	2	IS	No		0295
Handicap	00753	IN1	048	6	2	IS	No		0310
Handicap	00753	GT1	052	6	2	IS	No		0310
Handicap	00753	PD1	006	3	2	IS	No		0295
HCFA Patient Relationship to Insured	00811	IN2	072	6	60	CE	No		
Hospital Item Code	00278	RQD	004	4	60	CE	No		
Hospital Service	00140	PV1	010	3	3	IS	No		0069
Identification Date	00208	AL1	006	3	8	DT	No		
Identity of Instrument Used to Perform this Study	00598	OM1	013	8	60	CE	Yes		
Implicated Product	01098	PCR	001	7	60	CE	No		
Inactivated Reason	00971	LDP	009	8	80	ST	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Inactivation Date - LDP	00970	LDP	008	8	26	TS	No		
Inactivation Date - STF	00681	STF	013	8	26	CM	Yes		
Indication	01123	RXD	021	4	200	CE	Yes		
Indication	01123	RXG	022	4	200	CE	Yes		
Indication	01123	RXA	019	4	200	CE	Yes		
Indication	01123	RXO	020	4	200	CE	Yes		
Indication For Product Use	01107	PCR	010	7	60	CE	No		
Indirect Exposure Mechanism	01120	PCR	023	7	1	ID	Yes	3	0253
Individual Awareness of Problem	00856	PRB	021	12	80	CE	No		
Individual Awareness of Prognosis	00858	PRB	023	12	80	CE	No		
Input Parameter List	00705	SPR	004	2	256	CM	Yes		
Input Parameter List	00705	ERQ	003	2	256	CM	Yes		
Institution Registering the Patient	01037	CSR	003	7	60	CE	No		
Insurance Amount	00369	FT1	015	6	12	CP	No		
Insurance Co Contact Phone Number	00798	IN2	058	6	40	XTN	No		
Insurance Co Phone Number	00432	IN1	007	6	40	XTN	Yes		
Insurance Co. Contact Person	00431	IN1	006	6	48	XPN	Yes		
Insurance Co. Contact Reason	00797	IN2	057	6	2	IS	No		0232
Insurance Company Address	00430	IN1	005	6	106	XAD	Yes		
Insurance Company ID	00428	IN1	003	6	59	CX	Yes		
Insurance Company Name	00429	IN1	004	6	130	XON	Yes		
Insurance Plan ID	00368	IN1	002	6	60	CE	No		0072
Insurance Plan ID	00368	FT1	014	6	60	CE	No		0072
Insured Employer Organization Name And ID	00810	IN2	070	6	130	XON	Yes		
Insured Organization Name And ID	00809	IN2	069	6	130	XON	Yes		
Insured's Address	00444	IN1	019	6	106	XAD	Yes		
Insured's Contact Person Reason	00794	IN2	054	6	2	IS	Yes		0222
Insured's Contact Person Telephone Number	00793	IN2	053	6	40	XTN	Yes		
Insured's Contact Person's Name	00792	IN2	052	6	48	XPN	Yes		
Insured's Date of Birth	00443	IN1	018	6	26	TS	No		
Insured's Employee ID	00472	IN2	001	6	59	CX	Yes		
Insured's Employer Address	00469	IN1	044	6	106	XAD	Yes		
Insured's Employer Name	00474	IN2	003	6	130	XCN	Yes		
Insured's Employer Telephone Number	00804	IN2	064	6	40	XTN	Yes		
Insured's Employment Status	00467	IN1	042	6	60	CE	No		0066
Insured's Group Emp ID	00436	IN1	011	6	130	XON	Yes		
Insured's Group Emp Name	00435	IN1	010	6	12	CX	Yes		
Insured's ID Number	01230	IN1	049	6	12	CX	No		
Insured's Relationship to Patient	00442	IN1	017	6	2	IS	No		0063
Insured's Sex	00468	IN1	043	6	1	IS	No		0001
Insured's Social Security Number	00473	IN2	002	6	11	ST	No		
Insured's Telephone Number - Home	00803	IN2	063	6	40	XTN	Yes		
Interest Code	00158	PV1	028	3	2	IS	No		0073
Interpretation of Observations	00617	OM1	032	8	65536	TX	No		
Inventory Number	00990	CDM	009	8	60	CE	Yes		
Item Code - External	00277	RQD	003	4	60	CE	No		
Item Code - Internal	00276	RQD	002	4	60	CE	No		
Item Natural Account Code	00282	RQD	008	4	30	IS	No		0320

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Job Code/Class	00786	IN2	047	6	20	CM	No		
Job Code/Class	00786	GT1	050	6	20	CM	No		
Job Code/Class	00786	STF	019	8	20	CM	No		
Job Status	00752	GT1	053	6	2	IS	No		0311
Job Status	00752	IN2	048	6	2	IS	No		
Job Status	00752	NK1	034	3	2	IS	No		0311
Job Title	00785	GT1	049	6	20	ST	No		
Job Title	00785	STF	018	8	240	ST	No		
Job Title	00785	IN2	046	6	20	ST	No		
Kind of Quantity Observed	00937	OM1	042	8	60	CE	No		0254
Labeled Shelf Life	01258	PDC	012	7	12	CQ	No	0	
Last Accrual Date	01017	CM0	008	8	8	DT	No		
Last IRB Approval Date	01015	CM0	006	8	8	DT	No		
Length Errors Received	01183	NST	011	C	10	NM	No		
License Number	00951	LOC	007	8	60	CE	Yes		
Lifetime Reserve Days	00458	IN1	033	6	4	NM	No		
Living Arrangement	00742	GT1	037	6	2	IS	No		0220
Living Arrangement	00742	PD1	002	3	2	IS	No		0220
Living Arrangement	00742	NK1	021	3	2	IS	No		0220
Living Arrangement	00742	IN2	035	6	2	IS	No		0220
Living Dependency	00755	IN2	031	6	2	IS	No		0223
Living Dependency	00755	PD1	001	3	2	IS	Yes		0223
Living Dependency	00755	NK1	017	3	2	IS	Yes		0223
Living Dependency	00755	GT1	033	6	2	IS	No		0223
Living Will	00759	PD1	007	3	2	IS	No		0315
Location Address	00948	LOC	005	8	106	XAD	No		
Location Characteristic ID	01295	LCH	004	8	80	CE	No	0	0324
Location Characteristic Value	01294	LCH	005	8	80	CE	No	0	
Location Department	00964	LCC	002	8	10	IS	No		0264
Location Department	00964	LDP	002	8	10	IS	No		0264
Location Description	00944	LOC	002	8	48	ST	No		
Location Equipment	00953	LOC	008	8	3	IS	Yes		0261
Location Group	00905	AIL	005	10	200	CE	No		
Location Phone	00949	LOC	006	8	40	XTN	Yes		
Location Relationship ID	01227	LRL	004	8	80	CE	No		0325
Location Resource ID	00903	AIL	003	10	80	PL	No		
Location Selection Criteria	00910	APR	003	10	80	CM	Yes		
Location Service	00965	LDP	003	8	3	IS	Yes		0069
Location Type	00904	AIL	004	10	200	CE	No		
Location Type	00945	LOC	003	8	2	IS	Yes		0260
Logical Break Point	00064	DSP	004	2	2	ST	No		
Mail Claim Party	00476	IN2	005	6	1	IS	Yes		0137
Major Diagnostic Category	00381	DG1	007	6	60	CE	No		0118
Manufactured ID	00286	RQ1	002	4	60	CE	No		
Manufacturer's Catalog	00287	RQ1	003	4	16	ST	No		
Manufacturer/Distributor	01247	PDC	001	7	80	XON	No	0	
Marital Status	00119	NK1	014	3	2	IS	No		0002
Marital Status	00119	PID	016	3	1	IS	No		0002

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Marital Status	00119	STF	017	8	1	IS	No		0002
Marital Status	00119	IN2	043	6	1	IS	Yes		0002
Marketing Approval Identifier	01257	PDC	011	7	60	ST	No	0	
Marketing Basis	01256	PDC	010	7	4	ID	No	0	0330
Master File Application Identifier	00659	MFI	002	8	180	HD	No		
Master File Identifier	00658	MFI	001	8	60	CE	No		0175
Master Goal List Number	00821	GOL	006	12	60	NM	No		
Master Problem List Number	00841	PRB	006	12	60	NM	No		
Maximum Price	01003	PRC	010	8	12	CP	No		
Maximum Quantity	01001	PRC	008	8	4	NM	No		
Medicaid Case Name	00478	IN2	007	6	48	XPX	Yes		
Medicaid Case Number	00479	IN2	008	6	15	ST	No		
Medicare Health Ins Card Number	00477	IN2	006	6	15	ST	No		
Message Control ID	00010	MSH	010	2	20	ST	No		
Message Control ID	00010	MSA	002	2	20	ST	No		
Message Type	00009	MSH	009	2	7	CM	No		
Messages Received	01180	NST	008	C	10	NM	No		
Messages Sent	01181	NST	009	C	10	NM	No		
MFN Control ID	00665	MFA	002	8	20	ST	No		
MFN Control ID	00665	MFE	002	8	20	ST	No		
Military Handicapped Program	00805	IN2	065	6	60	CE	No		
Military Non-Availabilty Code	00736	PV2	035	3	2	ID	No		0136
Military Partnership Code	00735	PV2	034	3	2	ID	No		0136
Minimum Collection Volume	00651	OM4	011	8	20	CQ	No		
Minimum Meaningful Increments	00635	OM2	010	8	20	NM	No		
Minimum Price	01002	PRC	009	8	12	CP	No		
Minimum Quantity	01000	PRC	007	8	4	NM	No		
Modality of Imaging Measurement	00942	OM1	047	8	200	CE	No		0259
Model Identifier	01252	PDC	006	7	60	ST	Yes	0	
Mother's Identifier	00124	PID	021	3	20	CX	Yes		
Mother's Maiden Name	00746	GT1	042	6	48	XPX	No		
Mother's Maiden Name	00109	PID	006	3	48	XPX	No		
Mother's Maiden Name	00746	IN2	040	6	48	XPX	No		
Mother's Maiden Name	00746	NK1	026	3	48	XPX	No		
Multiple Birth Indicator	00127	PID	024	3	2	ID	No		0136
Name	00191	NK1	002	3	48	XPX	Yes		
Name of Insured	00441	IN1	016	6	48	XPX	Yes		
Nationality	00739	NK1	027	3	80	CE	No		0212
Nationality	00739	GT1	043	6	80	CE	No		0212
Nationality	00739	IN2	041	6	80	CE	No		0212
Nationality	00739	PID	028	3	80	CE	No		0212
Nature of Abnormal Test	00578	OBX	010	7	2	ID	Yes		0080
Nature of Test/Observation	00603	OM1	018	8	1	IS	No		0174
Needs Human Review	00307	RXG	012	4	1	ID	No		0136
Needs Human Review	00307	RXD	014	4	1	ID	No		0136
Needs Human Review	00307	RXO	016	4	1	ID	No		0136
Needs Human Review	00307	RXE	020	4	1	ID	No		0136
Network Change Type	01188	NSC	001	C	4	ID	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Network Errors	01187	NST	015	C	10	NM	No		
New Application	01195	NSC	008	C	30	ST	No		
New CPU	01193	NSC	006	C	30	ST	No		
New Facility	01196	NSC	009	C	30	ST	No		
New Fileserver	01194	NSC	007	C	30	ST	No		
Newborn Baby Indicator	00737	PV2	036	3	1	ID	No		0136
Next Goal Review Date/Time	00829	GOL	013	12	26	TS	No		
Next of Kin Job/Associated Parties Code/Class	00200	NK1	011	3	20	CM	No		
Next of Kin/Associated Parties Employee Number	00201	NK1	012	3	20	CX	No		
Next of Kin/Associated Parties Job Title	00199	NK1	010	3	60	ST	No		
Non Covered Days (24)	00538	UB1	009	6	3	NM	No		
Non-Concur Code/Description	00513	IN3	012	6	60	CE	No		0233
Non-Concur Effective Date/Time	00514	IN3	013	6	26	TS	No		
Non-Covered Days (8)	00557	UB2	005	6	4	ST	No		
Non-Covered Insurance Code	00495	IN2	024	6	8	IS	Yes		0143
Normal Collection Volume	00650	OM4	010	8	20	CQ	No		
Normal Text/Codes for Categorical Observations	00638	OM3	004	8	200	CE	Yes		
Notice of Admission Date	00449	IN1	024	6	8	DT	No		
Notice of Admission Flag	00448	IN1	023	6	2	ID	No		0136
Number of Columns per Row	00701	RDF	001	2	3	NM	No		
Number Of Grace Days (90)	00540	UB1	011	6	2	NM	No		
Number of Product Experience Reports Filed by Distributor	01246	PSH	014	7	2	NM	Yes	8	
Number of Product Experience Reports Filed by Facility	01245	PSH	013	7	2	NM	Yes	8	
Number of Refills	00304	RXE	012	4	3	NM	No		
Number of Refills	00304	RXO	013	4	3	NM	No		
Number of Refills Remaining	00326	RXD	008	4	20	NM	No		
Number of Refills Remaining	00326	RXE	016	4	20	NM	No		
Number of Refills/Doses Dispensed	00327	RXE	017	4	20	NM	No		
Number Of Sample Containers	01028	OBR	037	4	4	NM	No		
Observ Result Status	00579	OBX	011	7	1	ID	No		0085
Observation Date/Time	00241	OBR	007	4	26	TS	No		
Observation Description	00591	OM1	006	8	200	CE	No		
Observation End Date/Time	00242	OBR	008	4	26	TS	No		
Observation ID Suffixes	00656	OM5	003	8	200	ST	No		
Observation Identifier	00571	OBX	003	7	590	CE	No		
Observation Method	00936	OBX	017	7	60	CE	Yes		
Observation Producing Department/Section	00601	OM1	016	8	60	CE	Yes		
Observation Sub-ID	00572	OBX	004	7	20	ST	No		
Observation Value	00573	OBX	005	7	65536	Varies	Yes		
Observations Required to Interpret the Obs	00616	OM1	031	8	200	CE	No		
Occur Span End Date (33)	00548	UB1	019	6	8	DT	No		
Occur Span Start Date(33)	00547	UB1	018	6	8	DT	No		
Occurrence (28 32)	00545	UB1	016	6	20	CM	Yes	5	
Occurrence Code & Date (32-35)	00559	UB2	007	6	11	CM	Yes	8	0153
Occurrence Number	00862	ARQ	003	10	5	NM	No		
Occurrence Number	00862	SCH	003	10	5	NM	No		
Occurrence Span (33)	00546	UB1	017	6	2	CE	No		0

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Occurrence Span Code/Dates (36)	00560	UB2	008	6	28	CM	Yes	2	
Office/Home Address	00679	STF	011	8	106	XAD	Yes		
Operator	00509	IN3	008	6	60	XCN	Yes		
Operator ID	00103	EVN	005	3	60	XCN	No		0188
Order Callback Phone Number	00250	OBR	017	4	40	XTN	Yes	2	
Order Control	00215	ORC	001	4	2	ID	No		0119
Order Control Code Reason	00230	ORC	016	4	200	CE	No		
Order Effective Date/Time	00229	ORC	015	4	26	TS	No		
Order Status	00219	ORC	005	4	2	ID	No		0038
Orderability	00597	OM1	012	8	1	ID	No		0136
Ordered By Code	00373	FT1	021	6	120	XCN	No		
Ordering Provider	00226	OBR	016	4	80	XCN	Yes		
Ordering Provider	00226	ORC	012	4	120	XCN	No		
Ordering Provider's DEA Number	00305	RXE	013	4	60	XCN	No		
Ordering Provider's DEA Number	00305	RXO	014	4	60	XCN	No		
Organ Donor	00760	PD1	008	3	2	IS	No		0316
Organization Name	00202	NK1	013	3	60	XON	Yes		
Organization Name	00947	LOC	004	8	90	XON	No		
Organizational Location Relationship Value	01301	LRL	005	8	80	XON	No		
Originating Referral Identifier	01142	RF1	006	11	30	EI	No		
Origination Date/Time	00919	TXA	006	9	26	TS	No		
Originator Code/Name	00922	TXA	009	9	60	XCN	No		
Other Errors Received	01184	NST	012	C	10	NM	No		
Other Healthcare Provider	01274	PV1	052	3	60	XCN	Yes		0010
Other Identifier	01254	PDC	008	7	60	ST	Yes	0	
Other Names	00593	OM1	008	8	200	ST	Yes		
Other QRY Subject Filter	00041	QRF	005	2	60	ST	Yes		
Other Test/Observation IDs for the Observation	00592	OM1	007	8	200	CE	No		
Outlier Cost	00387	DG1	013	6	12	CP	No		
Outlier Cost	00387	DRG	007	6	12	CP	No		
Outlier Days	00386	DRG	006	6	3	NM	No		
Outlier Days	00386	DG1	012	6	3	NM	No		
Outlier Reimbursement	00771	DRG	009	6	9	CP	No		
Outlier Type	00385	DRG	005	6	60	CE	No		0083
Outlier Type	00385	DG1	011	6	60	CE	No		0083
Outside Site(s) Where Observation may be Performed	00612	OM1	027	8	200	CE	Yes		
Parent	00222	ORC	008	4	200	CM	No		
Parent Document Number	00926	TXA	013	9	30	ST	No		
Parent Filler Appointment ID	00882	ARQ	023	10	22	EI	No		
Parent Filler Appointment ID	00882	SCH	024	10	22	EI	No		
Parent Number	00261	OBR	029	4	150	CM	No		
Parent Placer Appointment ID	00881	ARQ	022	10	22	EI	No		
Parent Placer Appointment ID	00881	SCH	023	10	22	EI	No		
Parent Result	00259	OBR	026	4	400	CM	No		
Pathway Established Date/Time	01209	PTH	004	12	26	TS	No		
Pathway ID	01207	PTH	002	12	80	CE	No		
Pathway Instance ID	01208	PTH	003	12	60	EI	No		

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Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Pathway Lifecycle Status	01210	PTH	005	12	80	CE	No		
Patient Account Number	00121	PID	018	3	20	CX	No		
Patient Address	00114	PID	011	3	106	XAD	Yes		
Patient Alias	00112	PID	009	3	48	XPX	Yes		
Patient Charge Adjustment Code	00731	PV2	030	3	3	IS	No		0218
Patient Class	00132	PV1	002	3	1	IS	No		0004
Patient Death Date and Time	00740	PID	029	3	26	TS	No		
Patient Death Indicator	00741	PID	030	3	1	ID	No		0136
Patient Evaluability Status	01048	CSR	014	7	60	CE	No		
Patient ID (External ID)	00105	PID	002	3	20	CK	No		
Patient ID (Internal ID)	00106	PID	003	3	20	CX	Yes		
Patient Location Relationship Value	01292	LRL	006		80	PL	No	0	
Patient Member Number	00801	IN2	061	6	60	CX	No		
Patient Name	00108	PID	005	3	48	XPX	No		
Patient Outcome	01084	PEO	012	7	1	ID	No		0241
Patient Preparation	00622	OM1	037	8	200	TX	No		
Patient Primary Care Provider Name & ID No.	00757	PD1	004	3	90	XCN	Yes		
Patient Primary Facility	00756	PD1	003	3	90	XON	Yes		
Patient Status Code	00725	PV2	024	3	2	IS	No		0216
Patient Study Eligibility Status	01044	CSR	010	7	60	CE	No		
Patient Type	00148	FT1	018	6	2	IS	No		0018
Patient Type	00148	PV1	018	3	2	IS	No		0018
Patient Valuables	00185	PV2	005	3	25	ST	Yes		
Patient Valuables Location	00186	PV2	006	3	25	ST	No		
Payor ID	00496	IN2	025	6	59	CX	Yes		
Payor Subscriber ID	00497	IN2	026	6	59	CX	Yes		
Penalty	00506	IN3	005	6	10	CM	No		0148
Pending Location	00172	PV1	042	3	80	PL	No		
Performed By Code	00372	FT1	020	6	120	XCN	No		0084
Permitted Data Types	00588	OM1	003	8	12	ID	Yes		0125
Person Performing Study Registration	01041	CSR	007	7	60	XCN	No		
Personnel Resource ID	00913	AIP	003	10	80	XCN	No		
Pharmacist/Treatment Supplier's Verifier ID	00306	RXO	015	4	60	XCN	No		
Pharmacist/Treatment Supplier's Verifier ID	00306	RXE	014	4	60	XCN	No		
Pharmacy/Treatment Supplier Special Administration Instructions	00343	RXG	013	4	200	CE	Yes		
Pharmacy/Treatment Supplier's Special Dispensing Instructions	00330	RXD	015	4	200	CE	Yes		
Pharmacy/Treatment Supplier's Special Dispensing Instructions	00330	RXE	021	4	200	CE	Yes		
Phone	00678	STF	010	8	40	XTN	Yes		
Phone Number	00194	NK1	005	3	40	XTN	Yes		
Phone Number - Business	00117	PID	014	3	40	XTN	Yes		
Phone Number - Home	00116	PID	013	3	40	XTN	Yes		
Phone Number of Outside Site	00614	OM1	029	8	400	XTN	No		
Physician Reviewer	00515	IN3	014	6	60	XCN	Yes		
Placer Appointment ID	00860	ARQ	001	10	22	EI	No		
Placer Appointment ID	00860	SCH	001	10	22	EI	No		
Placer Contact Address	00876	ARQ	017	10	106	XAD	No		



## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Placer Contact Address	00876	SCH	014	10	106	XAD	No		
Placer Contact Location	00877	SCH	015	10	80	PL	No		
Placer Contact Location	00877	ARQ	018	10	80	PL	No		
Placer Contact Person	00874	ARQ	015	10	48	XCN	No		
Placer Contact Person	00874	SCH	012	10	48	XCN	No		
Placer Contact Phone Number	00875	ARQ	016	10	40	XTN	Yes		
Placer Contact Phone Number	00875	SCH	013	10	40	XTN	No		
Placer Field 1	00251	OBR	018	4	60	ST	No		
Placer Field 2	00252	OBR	019	4	60	ST	No		
Placer Group Number	00218	SCH	004	10	75	EI	No		
Placer Group Number	00218	ORC	004	4	22	EI	No		
Placer Group Number	00218	ARQ	004	10	75	EI	No		
Placer Order Number	00216	ORC	002	4	22	EI	No		
Placer Order Number	00216	OBR	002	4	22	EI	No		
Placer Order Number	00216	TXA	014	9	22	EI	Yes		
Plan Effective Date	00437	IN1	012	6	8	DT	No		
Plan Expiration Date	00438	IN1	013	6	8	DT	No		
Plan Type	00440	IN1	015	6	3	IS	No		0086
Planned Patient Transport Comment	01034	OBR	043	4	200	CE	Yes		
Point Versus Interval	00938	OM1	043	8	60	CE	No		0255
Policy Deductible	00462	IN1	037	6	12	CP	No		
Policy Limit - Amount	00463	IN1	038	6	12	CP	No		
Policy Limit - Days	00464	IN1	039	6	4	NM	No		
Policy Number	00461	IN1	036	6	15	ST	No		
Policy Scope	00799	IN2	059	6	2	IS	No		0312
Policy Source	00800	IN2	060	6	2	IS	No		0313
Policy Type/Amount	00500	IN2	029	6	25	CM	Yes		
Portable	00600	OM1	015	8	1	ID	No		0136
Practitioner Category	00687	PRA	003	8	3	IS	Yes		0186
Practitioner Group	00686	PRA	002	8	60	CE	Yes		
Practitioner ID Numbers	00690	PRA	006	8	100	CM	Yes		0338
Pre-Admit Cert (PAC)	00453	IN1	028	6	15	ST	No		
Pre-Certification Req/Window	00521	IN3	020	6	40	CM	Yes		0150
Preadmit Number	00135	PV1	005	3	20	CX	No		
Preadmit Test Indicator	00142	PV1	012	3	2	IS	No		0087
Preferred Coding System	00636	OM3	002	8	60	CE	No		
Preferred Long Name for the Observation	00596	OM1	011	8	200	ST	No		
Preferred Method of Contact	01161	PRD	006	11	200	CE	No		0185
Preferred Method of Contact	01170	CTD	006	11	200	CE	No		0185
Preferred Method of Contact	00684	STF	016	8	1	ID	No		0185
Preferred Report Name for the Observation	00594	OM1	009	8	30	ST	No		
Preferred Short Name or Mnemonic for Observation	00595	OM1	010	8	8	ST	No		
Preparation	00648	OM4	008	8	10240	TX	No		
Prescription Number	00325	RXD	007	4	20	ST	No		
Prescription Number	00325	RXE	015	4	20	ST	No		
Previous Goal Review Date/Time	00830	GOL	014	12	26	TS	No		
Previous Service Date	00715	PV2	014	3	8	DT	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Previous Treatment Date	00727	PV2	026	3	8	DT	No		
Price	00998	PRC	005	8	12	CP	Yes		
Price Override Flag	01006	PRC	013	8	1	IS	No		0268
Primary Activity Provider Code/Name	00918	TXA	005	9	60	XCN	No		
Primary Key Value - MFA	01308	MFA	005	8	60	CE	Yes		
Primary Key Value - MFE	00667	MFE	004	8	200	Varies	Yes		
Primary Key Value - CDM	01306	CDM	001	8	200	CE	No		0132
Primary Key Value - LCC	00979	LCC	001	8	200	PL	No		
Primary Key Value - LCH	01305	LCH	001	8	200	PL	No		
Primary Key Value - LDP	00963	LDP	001	8	200	PL	No		
Primary Key Value - LOC	01307	LOC	001	8	200	PL	No		
Primary Key Value - LRL	00943	LRL	001	8	200	PL	No		
Primary Key Value - PRA	00685	PRA	001	8	20	ST	No		
Primary Key Value - PRC	00982	PRC	001	8	200	CE	No		0132
Primary Key Value - STF	00671	STF	001	8	60	CE	No		
Primary Language	00118	GT1	036	6	60	CE	No		0296
Primary Language	00118	PID	015	3	60	CE	No		0296
Primary Language	00118	NK1	020	3	60	CE	No		0296
Primary Language	00118	IN2	034	6	60	CE	No		0296
Primary Observer Address	01092	PEO	020	7	106	XAD	Yes		
Primary Observer Aware Date/Time	01096	PEO	024	7	26	TS	No		
Primary Observer Name	01091	PEO	019	7	46	XPN	No		
Primary Observer Telephone	01093	PEO	021	7	40	XTN	Yes		
Primary Observer's Identity May Be Divulged	01097	PEO	025	7	1	ID	No		0243
Primary Observer's Qualification	01094	PEO	022	7	1	ID	No		0242
Principal Language of Message	00693	MSH	019	2	60	CE	No		
Principal Result Interpreter	00264	OBR	032	4	200	CM	No		
Prior Alternate Patient ID	00212	MRG	002	3	16	CX	Yes		
Prior Alternate Visit ID	01280	MRG	006	3	20	CX	No	0	
Prior Insurance Plan ID	00471	IN1	046	6	8	IS	No		0072
Prior Patient Account Number	00213	MRG	003	3	20	CX	No		
Prior Patient ID - External	00214	MRG	004	3	16	CX	No		
Prior Patient ID - Internal	00211	MRG	001	3	20	CX	Yes		
Prior Patient Location	00136	PV1	006	3	80	PL	No		
Prior Patient Name	01281	MRG	007	3	48	XPN	No	0	
Prior Pending Location	00181	PV2	001	3	80	PL	No		
Prior Temporary Location	00173	PV1	043	3	80	PL	No		
Prior Visit Number	01279	MRG	005	3	15	CX	No	0	
Priority	00871	ARQ	012	10	5	ST	No		
Priority	00239	OBR	005	4	2	ID	No		
Privileges	00691	PRA	007	8	200	CM	Yes		
Probability	00577	OBX	009	7	5	NM	No		
Probability of Problem (0-1)	00855	PRB	020	12	5	NM	No		
Problem Classification	00845	PRB	010	12	80	CE	No		
Problem Confirmation Status	00848	PRB	013	12	80	CE	No		
Problem Date of Onset	00851	PRB	016	12	26	TS	No		
Problem ID	00838	PRB	003	12	80	CE	No		
Problem Instance ID	00839	PRB	004	12	60	EI	No		

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Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Problem Life Cycle Status	00849	PRB	014	12	80	CE	No		
Problem Life Cycle Status Date/Time	00850	PRB	015	12	26	TS	No		
Problem Management Discipline	00846	PRB	011	12	80	CE	Yes		
Problem Onset Text	00852	PRB	017	12	80	ST	No		
Problem Persistence	00847	PRB	012	12	80	CE	No		
Problem Prognosis	00857	PRB	022	12	80	CE	No		
Problem Ranking	00853	PRB	018	12	80	CE	No		
Procedure Code	00988	CDM	007	8	200	CE	Yes		
Procedure Code	00393	PR1	003	6	80	CE	No		0088
Procedure Code	00393	FT1	025	6	80	CE	No		0088
Procedure Coding Method	00392	PR1	002	6	2	IS	No		0089
Procedure Date/Time	00395	PR1	005	6	26	TS	No		
Procedure Description	00394	PR1	004	6	40	ST	No		
Procedure Medication	00623	OM1	038	8	200	CE	No		
Procedure Minutes	00397	PR1	007	6	4	NM	No		
Procedure Practitioner	00402	PR1	012	6	230	XCN	Yes		0010
Procedure Priority	00404	PR1	014	6	2	NM	No		
Procedure Type	00396	PR1	006	6	2	IS	No		0230
Process Date	01145	RF1	009	11	26	TS	No		
Process Date	01145	AUT	010	11	26	TS	No		
Processing ID	00011	MSH	011	2	3	PT	No		
Processing Priority	00610	OM1	025	8	40	ID	Yes		0168
Processing Time	00609	OM1	024	8	20	NM	No		
Producer ID	00590	OM1	005	8	200	CE	No		
Producer's ID	00583	OBX	015	7	60	CE	No		
Producer's Test/Observation ID	00587	OM1	002	8	200	CE	No		
Product Available For Inspection	01110	PCR	013	7	1	IS	No		0239
Product Class	01100	PCR	003	7	60	CE	No		
Product Code	01255	PDC	009	7	60	CE	No	0	
Product Evaluation Performed	01111	PCR	014	7	60	CE	No		
Product Evaluation Results	01113	PCR	016	7	60	CE	No		
Product Evaluation Status	01112	PCR	015	7	60	CE	No		0247
Product Expiration Date	01103	PCR	006	7	26	TS	No		
Product Explanation Date	01105	PCR	008	7	26	TS	No		
Product Implantation Date	01104	PCR	007	7	26	TS	No		
Product Manufacture Date	01102	PCR	005	7	26	TS	No		
Product Problem	01108	PCR	011	7	8	IS	No		0239
Product Serial/Lot Number	01109	PCR	012	7	30	ST	Yes	3	
Protection Indicator	00744	IN2	037	6	1	ID	No		0136
Protection Indicator	00744	NK1	023	3	1	ID	No		0136
Protection Indicator	00744	GT1	039	6	1	ID	No		0136
Protection Indicator	01293	PD1	012	3	1	ID	No	0	0136
Provider Address	01157	PRD	003	11	60	XAD	No		
Provider Billing	00688	PRA	004	8	1	ID	No		0187
Provider Communication Information	01159	PRD	005	11	100	XTN	Yes		
Provider Identifiers	01162	PRD	007	11	100	CM	Yes		
Provider Location	01158	PRD	004	11	60	CM	No		
Provider Name	01156	PRD	002	11	106	XPN	Yes		

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Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Provider's Administration Instructions	00298	RXE	007	4	200	CE	Yes		
Provider's Administration Instructions	00298	RXO	007	4	200	CE	Yes		
Provider's Pharmacy Instructions	00297	RXO	006	4	200	CE	Yes		
PSRO/UR Approval Indicator (87)	00542	UB1	013	6	60	CE	No		0
PSRO/UR Approved Stay Fm (88)	00543	UB1	014	6	8	DT	No		
PSRO/UR Approved Stay To (89)	00544	UB1	015	6	8	DT	No		
Publicity Indicator	00743	PD1	011	3	80	CE	No	0	0125
Publicity Indicator	00743	IN2	036	6	80	CE	No	0	0215
Publicity Indicator	00743	NK1	022	3	80	CE	No	0	0215
Publicity Indicator	00743	GT1	038	6	80	CE	No	0	0215
Purge Status Code	00717	PV2	016	3	1	IS	No		0213
Purge Status Date	00718	PV2	017	3	8	DT	No		
Quantity Distributed	01239	PSH	007	7	12	CQ	No	0	
Quantity Distributed Comment	01241	PSH	009	7	600	FT	No	0	
Quantity Distributed Method	01240	PSH	008	7	1	ID	No	0	0329
Quantity in Use	01242	PSH	010	7	12	CQ	No	0	
Quantity in Use Comment	01244	PSH	012	7	600	FT	No	0	
Quantity in Use Method	01243	PSH	011	7	1	ID	No	0	0329
Quantity Limited Request	00031	QRD	007	2	10	CQ	No		0126
Quantity Manufactured	01238	PSH	006	7	12	CQ	No	0	
Quantity/Timing	00221	ORC	007	4	200	TQ	No		
Quantity/Timing	00221	OBR	027	4	200	TQ	Yes		
Quantity/Timing	00221	RXG	003	4	200	TQ	No		
Quantity/Timing	00221	RXE	001	4	200	TQ	No		
Query Date/Time	00025	QRD	001	2	26	TS	No		
Query Format Code	00026	QRD	002	2	1	ID	No		0106
Query ID	00028	QRD	004	2	10	ST	No		
Query Priority	00027	QRD	003	2	1	ID	No		0091
Query Response Status	00708	QAK	002	2	2	ID	No		0208
Query Results Level	00036	QRD	012	2	1	ID	No		0108
Query Tag	00696	ERQ	001	2	32	ST	No		
Query Tag	00696	QAK	001	2	32	ST	No		
Query Tag	00696	EQL	001	2	32	ST	No		
Query Tag	00696	VTQ	001	2	32	ST	No		
Query Tag	00696	SPR	001	2	32	ST	No		
Query/Response Format Code	00697	SPR	002	2	1	ID	No		0106
Query/Response Format Code	00697	EQL	002	2	1	ID	No		0106
Query/Response Format Code	00697	VTQ	002	2	1	ID	No		0106
R/U Date/Time	00045	URD	001	2	26	TS	No		
R/U Date/Time Selection Qualifier	00059	URS	008	2	12	ID	Yes		0158
R/U Display/Print Locations	00050	URD	006	2	20	ST	Yes		
R/U Other Results Subject Definition	00056	URS	005	2	20	ST	Yes		
R/U Quantity/Timing Qualifier	00695	URS	009	2	60	TQ	No		
R/U Results Level	00051	URD	007	2	1	ID	No		0108
R/U What Department Code	00049	URD	005	2	60	CE	Yes		
R/U What Subject Definition	00048	URD	004	2	60	CE	Yes		0048
R/U What User Qualifier	00055	URS	004	2	20	ST	Yes		
R/U When Data End Date/Time	00054	URS	003	2	26	TS	No		

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Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
R/U When Data Start Date/Time	00053	URS	002	2	26	TS	No		
R/U Where Subject Definition	00052	URS	001	2	20	ST	Yes		
R/U Which Date/Time Qualifier	00057	URS	006	2	12	ID	Yes		0156
R/U Which Date/Time Status Qualifier	00058	URS	007	2	12	ID	Yes		0157
R/U Who Subject Definition	00047	URD	003	2	60	XCN	Yes		
Race	00113	NK1	035	3	1	IS	No		0005
Race	00113	IN2	071	6	1	IS	No		0005
Race	00113	PID	010	3	1	IS	No		0005
Range of Decimal Precision	00628	OM2	003	8	10	NM	Yes		
Readmission Indicator	00143	PV1	013	3	2	IS	No		0092
Reason Ended Study	01050	CSR	016	7	60	CE	No		
Reason For Study	00263	OBR	031	4	300	CE	Yes		
Receive Character Count	01178	NST	006	C	10	NM	No		
Receive Timeouts	01186	NST	014	C	10	NM	No		
Receiving Application	00005	MSH	005	2	180	HD	No		
Receiving Facility	00006	MSH	006	2	180	HD	No		
Record-Level Event Code	00664	MFE	001	8	3	ID	No		0180
Record-Level Event Code	00664	MFA	001	8	3	ID	No		0180
Recurring Service Code	00732	PV2	031	3	2	IS	No		0219
Reference (Normal) Range - Ordinal & Continuous Obs	00631	OM2	006	8	200	CM	No		
Reference Batch Control ID	00092	BHS	012	2	20	ST	No		
Reference File Control ID	00078	FHS	012	2	20	ST	No		
References Range	00575	OBX	007	7	10	ST	No		
Referral Category	01141	RF1	005	11	200	CE	No		0284
Referral Disposition	01140	RF1	004	11	200	CE	Yes		0282
Referral Priority	01138	RF1	002	11	200	CE	No		0280
Referral Reason	01228	RF1	010	11	200	CE	Yes		0336
Referral Source Code	00714	PV2	013	3	90	XCN	No		
Referral Status	01137	RF1	001	11	200	CE	No		0283
Referral Type	01139	RF1	003	11	200	CE	No		0281
Referring Doctor	00138	PV1	008	3	60	XCN	Yes		0010
Reflex Tests/Observations	00619	OM1	034	8	200	CE	Yes		
Reimbursement Limit	01152	AUT	007	11	25	CP	No		
Relatedness Assessment	01117	PCR	020	7	1	ID	No		0250
Relationship	00192	NK1	003	3	60	CE	No		0063
Relationship Modifier	00940	OM1	045	8	200	CE	No		0258
Relationship To The Patient Start Date	00795	IN2	055	6	8	DT	No		
Relationship To The Patient Stop Date	00796	IN2	056	6	8	DT	Yes		
Release Information Code	00452	IN1	027	6	2	IS	No		0093
Relevant Clinical Info.	00247	OBR	013	4	300	ST	No		
Religion	00120	NK1	025	3	3	IS	No		0006
Religion	00120	GT1	041	6	3	IS	No		0006
Religion	00120	PID	017	3	3	IS	No		0006
Religion	00120	IN2	039	6	3	IS	No		0006
Repeating Interval	00872	ARQ	013	10	100	CM	No		
Repeating Interval Duration	00873	ARQ	014	10	5	ST	No		
Report Date	01235	PSH	003	7	26	TS	No	0	

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Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Report Display Order	00605	OM1	020	8	20	ST	No		
Report Form Identifier	01297	PSH	002	7	60	ST	No	0	
Report Interval End Date	01237	PSH	005	7	26	TS	No	0	
Report Interval Start Date	01236	PSH	004	7	26	TS	No	0	
Report Priority	00046	URD	002	2	1	ID	No		0109
Report Subheader	00604	OM1	019	8	200	CE	No		
Report Type	01233	PSH	001	7	60	ST	No	0	
Reporting Priority	00611	OM1	026	8	5	ID	No		0169
Request Event Reason	00865	ARQ	006	10	200	CE	No		
Requested Date/Time	00240	OBR	006	4	26	TS	No		
Requested Dispense Amount	00302	RXO	011	4	20	NM	No		
Requested Dispense Code	00301	RXO	010	4	100	CE	No		
Requested Dispense Units	00303	RXO	012	4	60	CE	No		
Requested Dosage Form	00296	RXO	005	4	60	CE	No		
Requested Give Amount - Maximum	00294	RXO	003	4	20	NM	No		
Requested Give Amount - Minimum	00293	RXO	002	4	20	NM	No		
Requested Give Code	00292	RXO	001	4	100	CE	No		
Requested Give Per (Time Unit)	00308	RXO	017	4	20	ST	No		
Requested Give Rate Amount	01218	RXO	021	4	6	ST	No		
Requested Give Rate Units	01219	RXO	022	4	60	CE	No		
Requested Give Strength	01121	RXO	018	4	20	NM	No		
Requested Give Strength Units	01122	RXO	019	4	60	CE	No		
Requested Give Units	00295	RXO	004	4	60	CE	No		
Requested Number of Treatments	01153	AUT	008	11	2	NM	No		
Requested Start Date/Time Range	00870	ARQ	011	10	53	CM	Yes		
Requisition Line Number	00275	RQD	001	4	4	SI	No		
Requisition Quantity	00279	RQD	005	4	6	NM	No		
Requisition Unit of Measure	00280	RQD	006	4	60	CE	No		
Resource Group	00899	AIP	005	10	200	CE	No		
Resource Group	00899	AIG	005	10	200	CE	Yes		
Resource Group ID	01204	RGS	003	10	200	CE	No		
Resource ID	00897	AIG	003	10	200	CE	No		
Resource Load	00991	CDM	010	8	12	NM	No		
Resource Quantity	00900	AIG	006	10	5	NM	No		
Resource Quantity Units	00901	AIG	007	10	200	CE	No		
Resource Role	00907	AIP	004	10	200	CE	No		
Resource Selection Criteria	00909	APR	002	10	80	CM	Yes		
Resource Type	00898	AIG	004	10	200	CE	No		
Response Flag	00220	ORC	006	4	1	ID	No		0121
Response Level Code	00663	MFI	006	8	2	ID	No		0179
Responsible Observer	00584	OBX	016	7	80	XCN	No		
Result Copies To	00260	OBR	028	4	150	XCN	Yes	5	
Result ID	00065	DSP	005	2	20	TX	No		
Result Status	00258	OBR	025	4	1	ID	No		0123
Results Rpt/Status Chng - Date/Time	00255	OBR	022	4	26	TS	No		
Retention Indicator	00720	PV2	019	3	1	ID	No		0136
Role	01155	CTD	001	11	200	CE	Yes		0131
Role	01197	ROL	003	12	80	CE	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Role	01155	PRD	001	11	200	CE	Yes		0286
Role Assumption Reason	01205	ROL	008	12	80	CE	No		
Role Begin Date/Time	01199	ROL	005	12	26	TS	No		
Role Duration	01201	ROL	007	12	80	CE	No		
Role End Date/Time	01200	ROL	006	12	26	TS	No		
Role Instance ID	01206	ROL	001	12	60	EI	No		
Role Person	01198	ROL	004	12	80	XCN	No		
Room Coverage Type/Amount	00499	IN2	028	6	25	CM	Yes		
Room Fee Indicator	00994	CDM	013	8	1	ID	No		0136
Room Rate - Private	00466	IN1	041	6	12	CP	No		
Room Rate - Semi-Private	00465	IN1	040	6	12	CP	No		
Route	00309	RXR	001	4	60	CE	No		0162
Rpt of Eligibility Flag	00450	IN1	025	6	2	ID	No		0136
Rpt of Eligibility Date	00451	IN1	026	6	8	DT	No		
Rules that Trigger Reflex Testing	00620	OM1	035	8	80	ST	No		
RX Component Type	00313	RXC	001	4	1	ID	No		0166
Schedule ID	00864	SCH	005	10	200	CE	No		
Schedule ID	00864	ARQ	005	10	200	CE	No		
Scheduled Date/Time	00268	OBR	036	4	26	TS	No		
Scheduled Time Point	01025	CM2	002	8	60	CE	No		
Second Opinion Date	00523	IN3	022	6	8	DT	No		
Second Opinion Documentation Received	00525	IN3	024	6	1	IS	Yes		0152
Second Opinion Physician	00526	IN3	025	6	60	XCN	Yes		
Second Opinion Status	00524	IN3	023	6	1	IS	No		0151
Security	00008	MSH	008	2	40	ST	No		
Security/Sensitivity	00823	PRB	025	12	80	CE	No		
Segment Action Code	00763	LCH	002	8	1	ID	No	0	0206
Segment Action Code	00763	LRL	002	8	3	ID	No	0	0206
Segment Action Code	00763	AIS	002	10	3	ID	No	0	0206
Segment Action code	00763	AIP	002	10	3	ID	No	0	0206
Segment Action Code	00763	AIL	002	10	1	ID	No	0	0206
Segment Action Code	00763	AIG	002	10	3	ID	No	0	0206
Segment Action Code	00763	RGS	002	10	3	ID	No	0	
Segment Unique Key	00764	LCH	003	8	80	EI	No	0	
Segment Unique Key	00764	LRL	003	8	80	EI	No	0	
Selection Criteria	00700	VTQ	005	2	256	QSC	Yes		
Send Character Count	01179	NST	007	C	10	NM	No		
Sender Address	01062	PES	003	7	200	XAD	Yes		
Sender Aware Date/Time	01068	PES	009	7	26	TS	No		
Sender Comment	01067	PES	008	7	600	FT	No		
Sender Event Description	01066	PES	007	7	600	FT	Yes		
Sender Event Identifier	01064	PES	005	7	75	EI	No		
Sender Individual Name	01060	PES	002	7	60	XCN	Yes		
Sender Organization Name	01059	PES	001	7	80	XON	No		
Sender Sequence Number	01065	PES	006	7	2	NM	No		
Sender Telephone	01063	PES	004	7	44	XTN	Yes		
Sending Application	00003	MSH	003	2	180	HD	No		
Sending Facility	00004	MSH	004	2	180	HD	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Separate Bill	00761	PD1	009	3	2	ID	No		0136
Sequence Number	00013	MSH	013	2	15	NM	No		
Sequence Number - Test/ Observation Master File	00586	OM4	001	8	4	NM	No		
Sequence Number - Test/ Observation Master File	00586	OM5	001	8	4	NM	No		
Sequence Number - Test/ Observation Master File	00586	OM3	001	8	4	NM	No		
Sequence Number - Test/ Observation Master File	00586	OM2	001	8	4	NM	No		
Sequence Number - Test/ Observation Master File	00586	OM1	001	8	4	NM	No		
Sequence Number - Test/ Observation Master File	00586	OM6	001	8	4	NM	No		
Service	00677	STF	009	8	200	CE	Yes		
Service Period	00270	ODT	002	4	60	CE	Yes	10	
Service Period	00270	ODS	002	4	60	CE	Yes	10	
Servicing Facility	00169	PV1	039	3	2	IS	No		0115
Set ID - AIG	00896	AIG	001	10	4	SI	No		
Set ID - AIL	00902	AIL	001	10	4	SI	No		
Set ID - AIP	00906	AIP	001	10	4	SI	No		
Set ID - AIS	00890	AIS	001	10	4	SI	No		
Set ID - AL1	00203	AL1	001	3	4	SI	No		
Set ID - CM0	01010	CM0	001	8	4	SI	No		
Set ID - CM1	01021	CM1	001	8	4	SI	No		
Set ID - CM2	01024	CM2	001	8	4	SI	No		
Set ID - DB1	01283	DB1	001	3	4	SI	No	0	
Set ID - DG1	00375	DG1	001	6	4	SI	No		
Set ID - DSP	00061	DSP	001	2	4	SI	No		
Set ID - FT1	00355	FT1	001	6	4	SI	No		
Set ID - GT1	00405	GT1	001	6	4	SI	No		
Set ID - IN1	00426	IN1	001	6	4	SI	No		
Set ID - IN3	00502	IN3	001	6	4	SI	No		
Set ID - NK1	00190	NK1	001	3	4	SI	No		
Set ID - NTE	00096	NTE	001	2	4	SI	No		
Set ID - OBR	00237	OBR	001	4	4	SI	No		
Set ID - OBX	00569	OBX	001	7	10	SI	No		
Set ID - PID	00104	PID	001	3	4	SI	No		
Set ID - PR1	00391	PR1	001	6	4	SI	No		
Set ID - PV1	00131	PV1	001	3	4	SI	No		
Set ID - RGS	01203	RGS	001	10	4	SI	No		
Set ID - UB1	00530	UB1	001	6	4	SI	No		
Set ID - UB2	00553	UB2	001	6	4	SI	No		
Set ID- TXA	00914	TXA	001	9	4	SI	No		
Sex	00111	PID	008	3	1	IS	No		0001
Sex	00111	STF	005	8	1	IS	No		0001
Sex	00111	NK1	015	3	1	IS	No		0001
SI Conversion Factor	00630	OM2	005	8	60	TX	No		
Signature Authority	01270	FAC	009	7	60	XCN	No	0	
Signature Authority Address	01272	FAC	011	7	200	XAD	No	0	
Signature Authority Telecommunication	01273	FAC	012	7	44	XTN	No	0	
Signature Authority Title	01271	FAC	010	7	60	ST	No	0	
Signature on File Date	00729	PV2	028	3	8	DT	No		
Single Use Device	01106	PCR	009	7	8	IS	No		0239



## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Site	00310	RXR	002	4	60	CE	No		0163
Slot Spacing Criteria	00911	APR	004	10	5	NM	No		
Source Identifier	01174	NST	002	C	30	ST	No		
Source of Comment	00097	NTE	002	2	8	ID	No		0105
Source Type	01175	NST	003	C	3	ID	No		
Spec Program Indicator (44)	00541	UB1	012	6	60	CE	No		0
Special Coverage Approval Name	00493	IN2	022	6	48	XPB	Yes		
Special Coverage Approval Title	00494	IN2	023	6	30	ST	No		
Special Handling Requirements	00649	OM4	009	8	10240	TX	No		
Special Program Code	00719	PV2	018	3	2	IS	No		0214
Special Visit Count	00815	UB2	017	6	3	NM	No		
Specialty Type	00966	LDP	004	8	60	CE	Yes		0265
Specialty	00689	PRA	005	8	100	CM	Yes		0337
Specimen	00646	OM4	006	8	60	CE	No		
Specimen Action Code	00245	OBR	011	4	1	ID	No		0065
Specimen Priorities	00653	OM4	013	8	1	ID	Yes		0027
Specimen Received Date/Time	00248	OBR	014	4	26	TS	No		
Specimen Required	00589	OM1	004	8	1	ID	No		0136
Specimen Requirements	00652	OM4	012	8	10240	TX	No		
Specimen Retention Time	00654	OM4	014	8	20	CQ	No		
Specimen Source	00249	OBR	015	4	300	CM	No		0070
Sponsor Patient ID	01038	CSR	004	7	30	CX	No		
Sponsor Study ID	01011	CM0	002	8	60	CE	No		
Sponsor Study ID	01035	CSR	001	7	60	EI	No		
Sponsor Study Identifier	01058	CTI	001	7	60	CE	No		
SSN Number - Patient	00122	PID	019	3	16	ST	No		
Staff ID Code	00672	STF	002	8	60	CE	Yes		
Staff Name	00673	STF	003	8	48	XPB	No		
Staff Type	00674	STF	004	8	2	IS	Yes		0182
Start Date	00197	NK1	008	3	8	DT	No		
Start Date/Time	01202	AIL	006	10	26	TS	No		
Start Date/Time	01202	AIS	004	10	26	TS	No		
Start Date/Time	01202	AIP	006	10	26	TS	No		
Start Date/Time	01202	AIG	008	10	26	TS	No		
Start Date/Time Offset	00891	AIP	007	10	20	NM	No		
Start Date/Time Offset	00891	AIS	005	10	20	NM	No		
Start Date/Time Offset	00891	AIL	007	10	20	NM	No		
Start Date/Time Offset	00891	AIG	009	10	20	NM	No		
Start Date/Time Offset Units	00892	AIP	008	10	200	CE	No		
Start Date/Time Offset Units	00892	AIG	010	10	200	CE	No		
Start Date/Time Offset Units	00892	AIS	006	10	200	CE	No		
Start Date/Time Offset Units	00892	AIL	008	10	200	CE	No		
Stated Variance Date/Time	01214	VAR	003	12	26	TS	No		
Statistics Available	01173	NST	001	C	1	ID	No		0136
Statistics End	01177	NST	005	C	26	TS	No		
Statistics Start	01176	NST	004	C	26	TS	No		
Stoploss Limit Flag	00808	IN2	068	6	2	ID	No		0136
Stored Procedure Name	00704	SPR	003	2	60	CE	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Stratum for Study Randomization	01047	CSR	013	7	200	CE	Yes	3	
Student Indicator	00745	GT1	040	6	2	IS	No		0231
Student Indicator	00745	PD1	005	3	2	IS	No		0231
Student Indicator	00745	NK1	024	3	2	IS	No		0231
Student Indicator	00745	IN2	038	6	2	IS	No		0231
Study Authorizing Provider	01042	CSR	008	7	60	XCN	No		
Study Phase Evaluability	01054	CSP	004	7	60	CE	No		
Study Phase Identifier	01051	CM1	002	8	60	CE	No	0	
Study Phase Identifier	01051	CSP	001	7	60	CE	No	0	
Study Phase Identifier	01051	CTI	002	7	60	CE	No	0	
Study Quality Control Codes	01057	CSS	003	7	60	CE	Yes	3	
Study Randomization Date/time	01045	CSR	011	7	26	TS	Yes	3	
Study Randomized Arm	01046	CSR	012	7	200	CE	Yes	3	
Study Scheduled Patient Time Point	01056	CSS	002	7	26	TS	No		
Study Scheduled Time Point	01055	CSS	001	7	60	CE	No		
Study Scheduled Time Point	01055	CTI	003	7	60	CE	No		
Substance Expiration Date	01130	RXD	019	4	26	TS	Yes		
Substance Expiration Date	01130	RXA	016	4	26	TS	Yes		
Substance Expiration Date	01130	RXG	020	4	26	TS	Yes		
Substance Lot Number	01129	RXD	018	4	20	ST	Yes		
Substance Lot Number	01129	RXG	019	4	20	ST	Yes		
Substance Lot Number	01129	RXA	015	4	20	ST	Yes		
Substance Manufacturer Name	01131	RXG	021	4	60	CE	Yes		
Substance Manufacturer Name	01131	RXA	017	4	60	CE	Yes		0227
Substance Manufacturer Name	01131	RXD	020	4	60	CE	Yes		
Substance Refusal Reason	01136	RXA	018	4	200	CE	Yes		
Substitute Allowed	00291	RQ1	007	4	1	ID	No		0136
Substitution Status	00322	RXE	009	4	1	ID	No		0167
Substitution Status	00322	RXD	011	4	1	ID	No		0167
Substitution Status	00322	RXG	010	4	1	ID	No		0167
Surgeon	00401	PR1	011	6	120	XCN	Yes		0010
Suspend Flag	00806	IN2	066	6	2	ID	No		0136
System Date/Time	01172	NCK	001	C	26	TS	No		
System Entry Date/Time	01225	RXA	022	4	26	TS	No		
Target Anatomic Site of Test	00941	OM1	046	8	200	CE	No		
Taxable	00290	RQ1	006	4	1	ID	No		0136
Technician	00266	OBR	034	4	200	CM	Yes		
Telephone Number of Section	00602	OM1	017	8	40	XTN	No		
Temporary Location	00141	PV1	011	3	80	PL	No		
Test/Observation Performance Schedule	00625	OM1	040	8	60	ST	Yes		
Test/Observations Included w/an Ordered Test Battery	00655	OM5	002	8	200	CE	Yes		
Text Instruction	00272	ODS	004	4	80	ST	Yes	2	
Text Instruction	00272	ODT	003	4	80	ST	No		
Text Message	00020	MSA	003	2	80	ST	No		
Time Selection Criteria	00908	APR	001	10	80	CM	Yes		0294
Title of Study	01013	CM0	004	8	300	ST	No		
Total Accrual to Date	01016	CM0	007	8	8	NM	No		
Total Adjustments	00178	PV1	048	3	12	NM	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
Total Charges	00177	PV1	047	3	12	NM	No		
Total Daily Dose	00329	RXE	019	4	10	CQ	No		
Total Daily Dose	00329	RXD	012	4	10	CQ	No		
Total Duration Of Therapy	01101	PCR	004	7	8	CQ	No		
Total Payments	00179	PV1	049	3	12	NM	No		
Transaction Amount - Extended	00365	FT1	011	6	12	CP	No		
Transaction Amount - Unit	00366	FT1	012	6	12	CP	No		
Transaction Batch ID	00357	FT1	003	6	10	ST	No		
Transaction Code	00361	FT1	007	6	80	CE	No		0132
Transaction Date	00358	FT1	004	6	26	TS	No		
Transaction Description	00362	FT1	008	6	40	ST	No		
Transaction Description - Alt	00363	FT1	009	6	40	ST	No		
Transaction ID	00356	FT1	002	6	12	ST	No		
Transaction Posting Date	00359	FT1	005	6	26	TS	No		
Transaction Quantity	00364	FT1	010	6	6	NM	No		
Transaction Type	00360	FT1	006	6	8	IS	No		0017
Transcription Date/Time	00920	TXA	007	9	26	TS	No		
Transcriptionist	00267	OBR	035	4	200	CM	Yes		
Transcriptionist Code/Name	00924	TXA	011	9	48	XCN	No		
Transfer Reason	00184	PV2	004	3	60	CE	No		
Transfer to Bad Debt Code	00159	PV1	029	3	1	IS	No		0110
Transfer to Bad Debt Date	00160	PV1	030	3	8	DT	No		
Transport Arranged	01032	OBR	041	4	30	ID	No		0224
Transport Arrangement Responsibility	01031	OBR	040	4	60	CE	No		
Transport Logistics Of Collected Sample	01029	OBR	038	4	60	CE	Yes		
Transportation Mode	00262	OBR	030	4	20	ID	No		0124
Tray Type	00273	ODT	001	4	60	CE	No		0160
Type	00269	ODS	001	4	1	ID	No		0159
Type of Agreement Code	00456	IN1	031	6	2	IS	No		0098
Typical Turn-Around Time	00608	OM1	023	8	20	NM	No		
UB 82 Locator 2	00549	UB1	020	6	30	ST	No		
UB 82 Locator 27	00551	UB1	022	6	8	ST	No		
UB 82 Locator 45	00552	UB1	023	6	17	ST	No		
UB 82 Locator 9	00550	UB1	021	6	7	ST	No		
UB92 Locator 11 (State)	00562	UB2	010	6	12	ST	Yes	2	
UB92 Locator 2 (State)	00561	UB2	009	6	29	ST	Yes	2	
UB92 Locator 31 (National)	00563	UB2	011	6	5	ST	No		
UB92 Locator 49 (National)	00565	UB2	013	6	4	ST	Yes	23	
UB92 Locator 56 (State)	00566	UB2	014	6	14	ST	Yes	5	
UB92 Locator 57 (National)	00567	UB2	015	6	27	ST	No		
UB92 Locator 78 (State)	00568	UB2	016	6	2	ST	Yes	2	
Unique Document File Name	00927	TXA	016	9	30	ST	No		
Unique Document Number	00925	TXA	012	9	30	EI	No		
Unit Cost	00374	FT1	022	6	12	CP	No		
Units	00574	OBX	006	7	60	CE	No		
Units of Measure	00627	OM2	002	8	60	CE	No		
Universal Service Identifier	00238	AIS	003	10	200	CE	No		
Universal Service Identifier	00238	OBR	004	4	200	CE	No		

## Appendix A: Data Definition Tables

Name	Item#	Seg	Seq#	Chp	Len	DT	Rep	Qty	Table
User Defined Access Checks	00581	OBX	013	7	20	ST	No		
Valid Coded "Answers"	00637	OM3	003	8	60	CE	No		
Valid Patient Classes	00967	PRC	004	8	1	IS	Yes		0004
Valid Patient Classes	00967	LDP	005	8	1	IS	Yes		0004
Value Amount & Code	00558	UB2	006	6	11	CM	Yes	12	
Value Amount & Code (46-49)	00539	UB1	010	6	12	CM	Yes	8	0153
Value Type	00570	OM3	007	8	3	ID	No		0125
Value Type	00570	OBX	002	7	2	ID	No		0125
Variance Classification	01216	VAR	005	12	60	CE	No		
Variance Description	01217	VAR	006	12	512	ST	Yes		
Variance Instance ID	01212	VAR	001	12	60	EI	No		
Variance Originator	01215	VAR	004	12	860	XCN	No		
Vendor Catalog	00288	RQ1	005	4	16	ST	No		
Vendor ID	00289	RQ1	004	4	60	CE	No		
Verification By	00455	IN1	030	6	60	XPN	No		
Verification Date/Time	00454	IN1	029	6	26	TS	No		
Verification Status	00470	IN1	045	6	2	ST	No		
Verified By	00225	ORC	011	4	120	XCN	No		
Version ID	00012	MSH	012	2	8	ID	No		0104
Veterans Military Status	00130	PID	027	3	60	CE	No		0172
VIP Indicator	00146	PV1	016	3	2	IS	No		0099
Virtual Table Name	00699	VTQ	004	2	60	CE	No		
Visit Description	00713	PV2	012	3	50	ST	No		
Visit Indicator	01226	PV1	051	3	1	IS	No		0326
Visit Number	00149	PV1	019	3	20	CX	No		
Visit Priority Code	00726	PV2	025	3	1	IS	No		0217
Visit Protection Indicator	00723	PV2	022	3	1	ID	No		0136
Visit Publicity Code	00722	PV2	021	3	1	IS	No		0215
Visit User Code	00187	PV2	007	3	2	IS	No		0130
Visiting Hours	00976	LDP	010	8	80	CM	Yes		0267
VT Query Name	00698	VTQ	003	2	60	CE	No		
What Data Code Value Qual.	00035	QRD	011	2	20	ST	Yes		
What Department Data Code	00034	QRD	010	2	60	CE	Yes		
What Subject Filter	00033	QRD	009	2	60	CE	Yes		0048
What User Qualifier	00040	QRF	004	2	60	ST	Yes		
When Data End Date/Time	00039	QRF	003	2	26	TS	No		
When Data Start Date/Time	00038	QRF	002	2	26	TS	No		
When Quantity/Timing Qualifier	00694	QRF	009	2	60	TQ	No		
When to Charge	00234	BLG	001	4	40	CM	No		0100
Where Subject Filter	00037	QRF	001	2	20	ST	Yes		
Which Date/Time Qualifier	00042	QRF	006	2	12	ID	Yes		0156
Which Date/Time Status Qualifier	00043	QRF	007	2	12	ID	Yes		0157
Who Subject Filter	00032	QRD	008	2	60	XCN	Yes		