

### Legend

Dataset Level: **N** National    **S** State    **D** Deprecated

Usage:  M = Mandatory , R = Required , E = Recommended, or O = Optional

Attributes: N = Not Values, P = Pertinent Negatives , L = Nillable, C = Correlation ID, and/or U = UUID

ePatient

|       |  |   |   |         |         |
|-------|--|---|---|---------|---------|
| 0 : 1 | ePatient.01 - EMS Patient ID                 | O |   |         |         |
| 0 : 1 | ePatient.PatientNameGroup                    |   |   |         |         |
| 0 : 1 | ePatient.02 - Last Name                      | S | E | N, L, P |         |
| 0 : 1 | ePatient.03 - First Name                     | S | E | N, L, P |         |
| 0 : 1 | ePatient.04 - Middle Initial/Name            | O |   |         |         |
| 0 : 1 | ePatient.05 - Patient's Home Address         | S | O | L, P    |         |
| 0 : 1 | ePatient.06 - Patient's Home City            | S | O | L, P    |         |
| 1 : 1 | ePatient.07 - Patient's Home County          | N | S | R       | N, L    |
| 1 : 1 | ePatient.08 - Patient's Home State           | N | S | R       | N, L    |
| 1 : 1 | ePatient.09 - Patient's Home ZIP Code        | N | S | R       | N, L    |
| 0 : 1 | ePatient.10 - Patient's Country of Residence | S | O |         |         |
| 0 : 1 | ePatient.11 - Patient Home Census Tract      | O |   |         |         |
| 0 : 1 | ePatient.12 - Social Security Number         | O |   | L, P    |         |
| 1 : 1 | ePatient.13 - Gender                         | N | S | R       | N, L    |
| 1 : M | ePatient.14 - Race                           | N | S | R       | N, L, C |
| 1 : 1 | ePatient.AgeGroup                            |   |   |         |         |
| 1 : 1 | ePatient.15 - Age                            | N | S | R       | N, L    |
| 1 : 1 | ePatient.16 - Age Units                      | N | S | R       | N, L    |
| 0 : 1 | ePatient.17 - Date of Birth                  | S | E | N, L, P |         |
| 0 : M | ePatient.18 - Patient's Phone Number         | O |   | L, P, C |         |
| 0 : M | ePatient.19 - Patient's Email Address        | O |   | C       |         |
| 0 : 1 | ePatient.20 - State Issuing Driver's License | O |   |         |         |
| 0 : 1 | ePatient.21 - Driver's License Number        | O |   |         |         |
| 0 : 1 | ePatient.22 - Alternate Home Residence       | E |   | N, L    |         |

ePatient