Integrating the Healthcare Enterprise

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IHE IT Infrastructure
Technical Framework

Volume 2a
(ITI TF-2a)

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Transactions Part A –
Sections 3.1 – 3.28

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July 24, 2018

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1 Introduction

This document, Volume 2 of the IHE IT Infrastructure (ITI) Technical Framework, defines transactions used in IHE IT Infrastructure profiles.

1.1 Introduction to IHE

Integrating the Healthcare Enterprise (IHE) is an international initiative to promote the use of standards to achieve interoperability among health information technology (HIT) systems and effective use of electronic health records (EHRs). IHE provides a forum for care providers, HIT experts and other stakeholders in several clinical and operational domains to reach consensus on standards-based solutions to critical interoperability issues.

The primary output of IHE is system implementation guides, called IHE Profiles. IHE publishes each profile through a well-defined process of public review and trial implementation and gathers profiles that have reached final text status into an IHE Technical Framework, of which this volume is a part.

For more general information regarding IHE, refer to www.ihe.net. It is strongly recommended that, prior to reading this volume, readers familiarize themselves with the concepts defined in the *IHE Technical Frameworks General Introduction*.

1.2 Introduction to IHE IT Infrastructure (ITI) Technical Framework

This document, the IHE IT Infrastructure Technical Framework (ITI TF), defines specific implementations of established standards to achieve integration goals that promote appropriate sharing of medical information to support optimal patient care. It is expanded annually, after a period of public review, and maintained regularly through the identification and correction of errata. The latest version of the document is always available at http://ihe.net/Technical_Frameworks/.

The IHE IT Infrastructure Technical Framework identifies a subset of the functional components of the healthcare enterprise, called IHE actors, and specifies their interactions in terms of a set of coordinated, standards-based transactions. It describes this body of transactions in progressively greater depth. The present volume (ITI TF-1) provides a high-level view of IHE functionality, showing the transactions organized into functional units called integration profiles that highlight their capacity to address specific IT Infrastructure requirements.

1.3 Intended Audience

The intended audience of IHE Technical Frameworks Volume 2 is:

- Those interested in integrating healthcare information systems and workflows
- IT departments of healthcare institutions
- Technical staff of vendors participating in the IHE initiative
- Experts involved in standards development

1.4 Prerequisites and Reference Material

For more general information regarding IHE, refer to www.ihe.net. It is strongly recommended that, prior to reading this volume, readers familiarize themselves with the concepts defined in the *IHE Technical Frameworks General Introduction*.

210 ## 1.5 Overview of Technical Framework Volumes 2a, 2b, 2x, and 3

The remainder of Section 1 further describes the general nature, purpose and function of the Technical Framework. Section 2 presents the conventions used in this volume to define IHE transactions.

Section 3 defines transactions in detail, specifying the roles for each actor, the standards
215 employed, the information exchanged, and in some cases, implementation options for the transaction. Section 3 is divided into two parts:

- Volume 2a: Sections 3.1 - 3.28 corresponding to transactions [ITI-1] through [ITI-28].
- Volume 2b: Sections 3.29 - 3.64 corresponding to transactions [ITI-29] through [ITI-64].

Volume 2x contains all appendices, providing technical details associated with the transactions.

220 Volume 3, Section 4 contains specifications that are used by multiple transactions.

Volume 3, Section 5 contains Content Specifications.

Code and message samples are stored on the IHE ftp server at ftp://ftp.ihe.net/TF_Implementation_Material. Explicit links to the ftp server will be provided in the transaction text.

225 ## 1.6 Comment Process

IHE International welcomes comments on this document and the IHE initiative. Comments on the IHE initiative can be submitted by sending an email to the co-chairs and secretary of the IT Infrastructure domain committees at iti@ihe.net. Comments on this document can be submitted at http://ihe.net/ITI_Public_Comments.

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1.7.1 Copyright of Base Standards

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1.10 History of Document Changes

This section provides a brief summary of changes and additions to the IT Infrastructure Technical Framework.

Date	Document Revision	Change Summary
2015 - 2018	Various	Refer to the *ITI Technical Framework – Log of Integrated Change Proposals (CPs)* for details on updates to the ITI Technical Framework Volumes and Trial Implementation Supplements.

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[1] HL7 is the registered trademark of Health Level Seven International.

Date	Document Revision	Change Summary
July 2018	ITI TF Rev. 15.0	Integrate the "Delayed Document Assembly" Trial Implementation Supplement.

275

2 Conventions

This document has adopted the following conventions for representing the framework concepts and specifying how the standards upon which the IHE IT Infrastructure Technical Framework is based should be applied.

280 ## 2.1 The Generic IHE Transaction Model

Transaction descriptions are provided in Section 3. In each transaction description, the actors, the roles they play, and the transactions between them are presented as use cases.

The generic IHE transaction description includes the following components:

- Scope: a brief description of the transaction.

285
- Use case roles: textual definitions of the actors and their roles, with a simple diagram relating them, e.g.,:
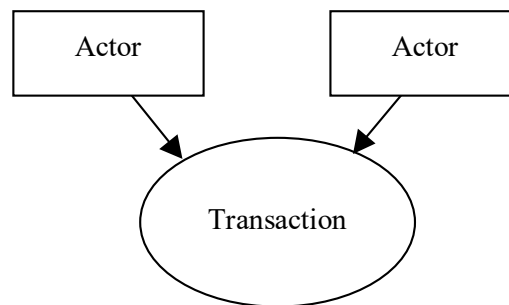
- *Referenced Standards*: the standards (stating the specific parts, chapters or sections thereof) to be used for the transaction.

290
- *Interaction Diagram*: a graphical depiction of the actors and messages that support the transaction, with related processing within an actor shown as a rectangle and time progressing downward, similar to:

```
        Actor              Actor              Actor
          ┆                  ┆                  ┆
          ┆        MSG1      ┆                  ┆
        ┌─┴─┐─────────────▶┌─┴─┐                ┆
        │   │              │   │     MSG2       ┆
        │   │              │   │─────────────▶┌─┴─┐
        │   │              └─┬─┘              │   │
        │   │      MSG3       ┆               │   │
        │   │◀──────────────────────────────│   │
        └─┬─┘                 ┆              └─┬─┘
          ┆                   ┆                ┆
```
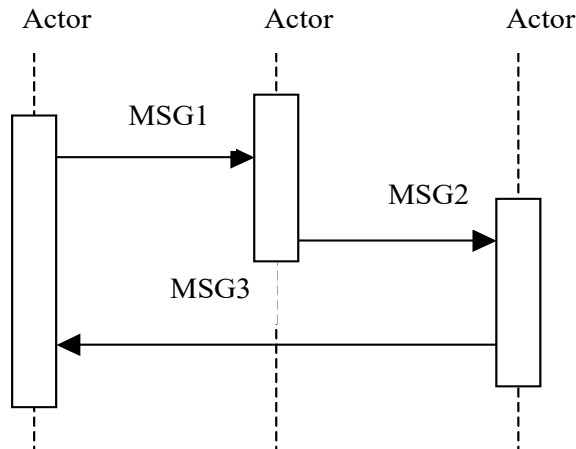
295   The interaction diagrams used in the IHE IT Infrastructure Technical Framework are
       modeled after those described in Grady Booch, James Rumbaugh, and Ivar Jacobson, *The
       Unified Modeling Language User Guide*, ISBN 0-201-57168-4. Simple acknowledgment
       messages are often omitted from the diagrams for brevity. One or more messages may be
       required to satisfy a transaction. Each message is represented as an arrow starting from
300   the actor initiating the message.

   - *Message definitions*: descriptions of each message involved in the transaction, the events
     that trigger the message, its semantics, and the actions that the message triggers in the
     receiver.

2.2 HL7 Profiling Conventions

305   See ITI TF-2x: Appendix C for the HL7 profiling conventions as well as the networking
       implementation guidelines.

2.3 Use of Coded Entities and Coding Schemes

       IHE does not produce, maintain or otherwise specify a coding scheme or other resource for
       controlled terminology (coded entities). Where applicable, coding schemes required by the HL7
310   and DICOM®[4] standards take precedence. In the cases where such resources are not explicitly
       identified by standards, implementations may utilize any resource (including proprietary or local)
       provided any licensing/copyright requirements are satisfied.

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[4] DICOM is the registered trademark of the National Electrical Manufacturers Association for its standards
publications relating to digital communications of medical information.

3 IHE Transactions

315 This section defines each IHE transaction in detail, specifying the standards used, the information transferred, and the conditions under which the transaction is required or optional.

3.1 Maintain Time [ITI-1]

This section corresponds to transaction [ITI-1] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-1] is used by the Time Server and Time Client Actors.

3.1.1 Scope

320 This transaction is used to synchronize time among multiple systems.

3.1.2 Use Case Roles
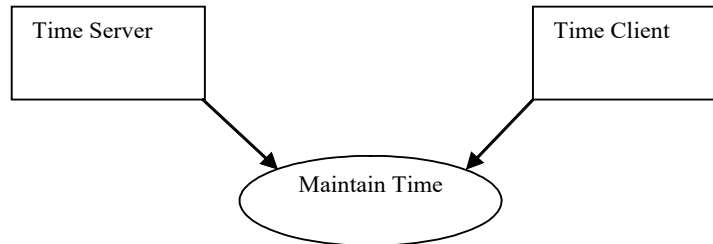
Actor: Time Server

Role: Responds to NTP time service queries.

325 **Actor:** Time Client

Role: Uses NTP or SNTP time service responses to maintain synchronization with Time Servers and maintain the local system clock.

3.1.3 Referenced Standard

NTP　　　　　Network Time Protocol Version 3. RFC1305

330 SNTP　　　　Simple Network Time Protocol (SNTP) RFC4330

3.1.4 Interaction Diagram

Time Server   Time Client

NTP Time Query

NTP Time Response
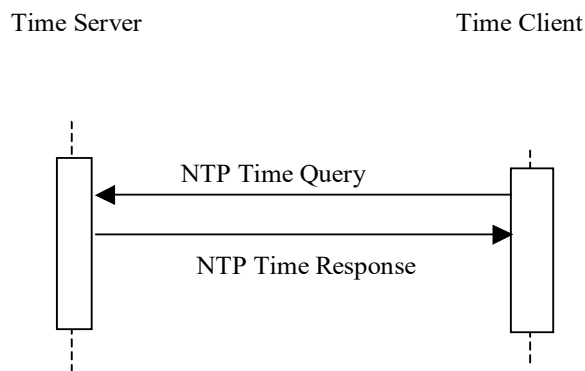
Figure 3.1.4-1: Maintain Time Messages

3.1.4.1 Maintain Time

335   The NTP transactions are described in detail in RFC1305. There is also extensive documentation on the transactions and recommendations on configurations and setup provided at http://www.ntp.org. Rather than reproduce all of that material as part of this Framework, readers are strongly encouraged to explore that site. The most common mode is the query-response mode that is described below. For other forms, see RFC1305 and the material on http://www.ntp.org.

340   The Time Server shall support NTP (which implicitly means that SNTP clients are also supported). Secure NTP may also be supported. The Time Client shall utilize NTP when it is grouped with a Time Server. For ungrouped Time Clients with 1 second accuracy requirements, SNTP may be useable. Time Clients may also support Secure NTP.

Table 3.1.4-1: Permissible Protocol Selections

Protocol	Time Server	Time Client grouped with a Time Server	Time Client (1s accuracy)	Time Client (High accuracy)
SNTP	Must Support	Prohibited	Permitted	Prohibited
NTP	Must Support	Must Support	Permitted	Permitted
Secure NTP	Optional	Optional	Optional	Optional

345   #### 3.1.4.1.1 Trigger Events

In a query-response mode the Time Client queries the Time Server and receives a response. This transaction includes timing estimation of network delays.

3.1.4.1.2 Message Semantics

The Time Client uses the Network Time Protocol (NTP) to synchronize its time with the Time
350   Server. NTP clients can be configured to use a specific NTP server at a specific IP address, to obtain the NTP server address automatically from DHCP, and/or to discover the NTP server address automatically. Time clients shall support at least manual configuration and may support all three modes. Time Clients usually maintain time synchronization by adjusting the system

355 clock, so that applications continue to use the system clock facilities. The specific precision of synchronization depends upon the requirements of specific actors.

Implementations must support a time synchronization accuracy with a median error of less than one second.

There is a Simple Network Time Protocol (SNTP) RFC4330 defined that can provide one second accuracy for Time Clients. It uses the exact same protocol as NTP, but does not include the
360 measurement data used by the NTP high-accuracy statistical estimation algorithm. It has a lower implementation cost because it omits the measurements and statistical estimation needed to achieve higher accuracy. This omission of the statistical estimation makes it unsuitable for use when grouped with a Time Server. Its use is permitted for Time Clients that are not grouped with a Time Server.

365 Note: 1. The Time Client can often be implemented by using components provided by operating systems. Some offer only SNTP while others offer the choice of SNTP or NTP clients.
2. SNTP may achieve better than 1 second synchronization when combined with careful hardware, software, and custom network design. This network design will include restrictions on cabling design, hubs, routers, etc. that are outside the scope of the CT Profile and not verifiable except on a site by site basis.

370

The use of Secure NTP is not required. The risk of subversion of the time base to conceal penetration is considered very low, and the operational costs of maintaining Secure NTP too high in most environments.

3.1.4.1.3 Expected Actions

375 The Time Server and Time Client will maintain synchronization to UTC. The Time Client maintains a statistical estimation process utilizing time estimates and network delay estimates from one or more Time Servers. This statistical estimation process yields a time estimate that is used to continually adjust the system clock.

Note: The relationship between the local reported time, UTC, and battery-backed clock is often a source of confusion.
380 Different hardware and operating systems have different configuration requirements. These should be clearly documented and made clear in the user interface so that field service and operational staff do not introduce errors.

3.2 Get User Authentication [ITI-2]

This section corresponds to transaction [ITI-2] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-2] is used by the Client Authentication Agent and Kerberos
385 Authentication Server Actors.

3.2.1 Scope

This transaction is used to authenticate an enterprise-wide user identity. A challenge-response method verifies that the user knows the correct password. Once the user is authenticated, the Kerberos Authentication Server sends a Ticket Granting Ticket (TGT) to the Client
390 Authentication Agent to permit optimization of subsequent interactions. The TGT acts as a substitute for repeated login/password type activity.

This transaction is equivalent to what is called the "Authentication Service" in RFC1510.

3.2.2 Use Case Roles
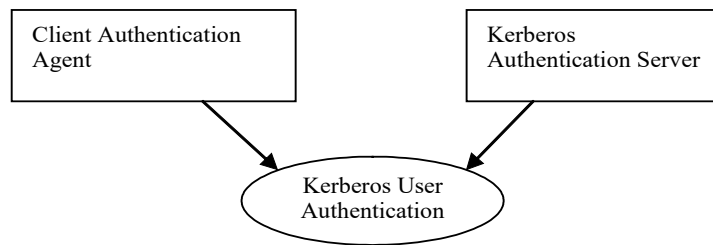
395

Actor: Client Authentication Agent.

Role: Communicates authentication information to the Kerberos Authentication Server, receives a TGT, and performs internal TGT management.

Actor: Kerberos Authentication Server. In RFC1510 this is called a Key Distribution Center
400   (KDC).

Role: Verifies the authentication information, creates a TGT, and sends it to the Client Authentication Agent.

3.2.3 Referenced Standard

RFC1510   The Kerberos Network Authentication Service (V5)

405   **3.2.4 Interaction Diagram**

The Client Authentication Agent communicates to the Kerberos Authentication Server a Kerberos Authentication Service Request (KRB_AS_REQ). This message identifies the user, the name of the ticket-granting service and authentication data. The authentication data is usually a timestamp encrypted with the user's long-term key. (See RFC1510 for the exception cases.)

410
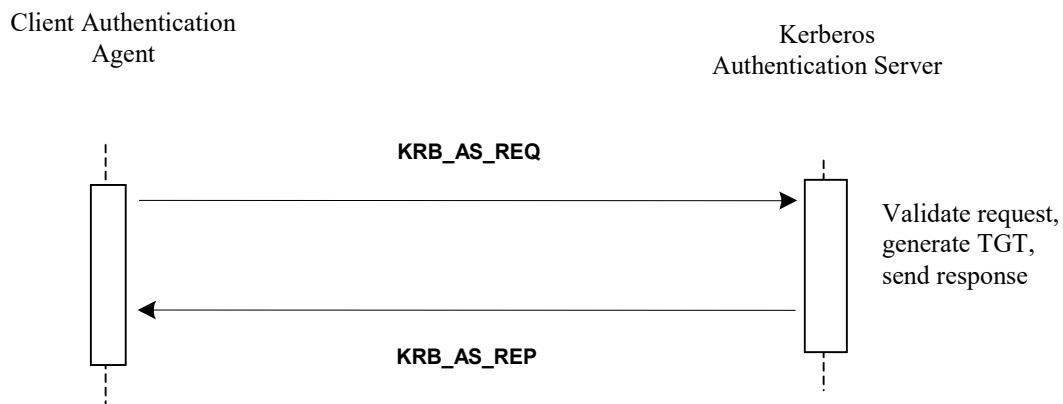
Figure 3.2.4-1: Get User Authentication Messages

3.2.4.1 Get User Authentication (Request/Response)

415 **3.2.4.1.1 Trigger Events**

The Kerberos User Authentication transactions normally take place:

1. Upon login or session start for a new user, and

2. Shortly before expiration of a TGT. TGT timeouts are selected to minimize the need for this transaction, but they may expire prior to user logout/ session complete.

420 When the Client Authentication Agent supports the Authentication for User Context Option, the Client Authentication Agent shall resolve any Context Manager interface issues before starting the user authentication. For instance the Client Authentication Agent needs to be sure that it will be accepted by the Context Manager as the one and only user authenticator in the context for this user session. Similar issues may apply with non-IHE uses of CCOW.

425 **3.2.4.1.2 Message Semantics**

The Client Authentication Agent shall support use of this transaction with the Kerberos user name/password system defined in RFC1510. The username and password shall consist of the 94 printable characters specified in the International Reference Version of ISO-646/ECMA-6 (aka U.S. ASCII).

430 **3.2.4.1.3 Expected Actions**

The Client Authentication Agent shall perform TGT management, so that subsequent activities can re-use TGTs from a credentials cache. The Client Authentication Agent shall ensure that a user has access to only to his or her own tickets (both TGT and Service Tickets). This is most often done by clearing the credentials cache upon user logout or session completion.

435 When the Client Authentication Agent supports the Authenticator for User Context Option, the agent shall perform the Change Context Transaction to set the user identity in the context managed by the Context Manager.

When the user session ends, the Client Authentication Agent shall remove the user credentials from its cache. If it supports the Authenticator for User Context Option, the agent shall perform
440 the Change Context Transaction to set the user to NULL prior to removing the user credentials.

3.2.5 Extended Authentication Methods

The Kerberos challenge-response system used by this Integration Profile can be used to verify users by means of many authentication mechanisms. The mechanism specified in this profile is the Kerberos username and password system. Other methods such as smart cards and biometrics
445 have also been documented but not standardized. (See ITI TF-1: Appendix D for a discussion of alternate authentication mechanisms.)

3.2.6 Audit Record Considerations

The Client Authentication Agent shall produce the ATNA UserAuthenticated event for each Get Authentication [ITI-2] transaction with the EventTypeCode equal to Login or Failure as

450   appropriate. If the application knows about logout, this shall produce a UserAuthentication event with the eventTypeCode of Logout. The UserName element shall be the Kerberos identity in the form of username@realm.

	Field Name	**Opt**	**Value Constraints**
Event **AuditMessage/** **EventIdentification**	EventID	M	EV(110114, DCM, "User Authentication")
	EventActionCode	M	"E" (Execute)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV(110122, DCM, "Login") EV(110123, DCM, "Logout")
Source (1)			
Human Requestor (1)			
Destination (0)			
Audit Source (Client Authentication Agent) (1)			
Participant Object (0)			

Where:

Source **AuditMessage/** **ActiveParticipant**	UserID	M	The process ID as used within the local operating system in the local system logs.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110150, DCM, "Application")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address

455

Human Requestor (if known) **AuditMessage/** **ActiveParticipant**	UserID	M	Identity of the human that initiated the transaction.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	*U*	*not specialized*
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*

|			
Audit Source **AuditMessage/** **AuditSourceIdentification**	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

460 ## 3.3 Get Service Ticket [ITI-3]

This section corresponds to transaction [ITI-3] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-3] is used by the Client Authentication Agent and Kerberos Authentication Server Actors.

3.3.1 Scope

465 The Client Authentication Agent uses this transaction to obtain the service ticket that will be sent to a Kerberized Server to authenticate this user to a Kerberized Server.

3.3.2 Use Case Roles
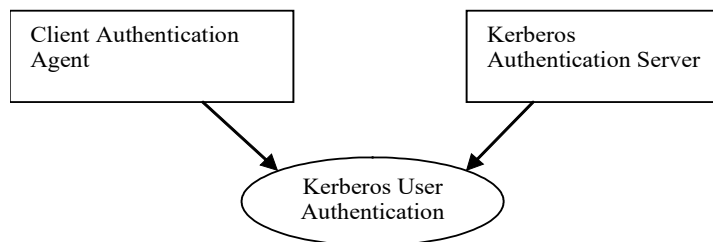
470 **Actor:** Client Authentication Agent.

Role: Client communicates authentication information to the Kerberos Authentication Server, receives a Service Ticket, and performs internal ticket management.

Actor: Kerberos Authentication Server. In RFC1510 this is called a Key Distribution Center (KDC).

475 **Role:** Verifies the authentication information, creates a ticket, and sends it to the Client Authentication Agent.

3.3.3 Referenced Standard

RFC1510   The Kerberos Network Authentication Service (V5)

3.3.4 Interaction Diagram

480
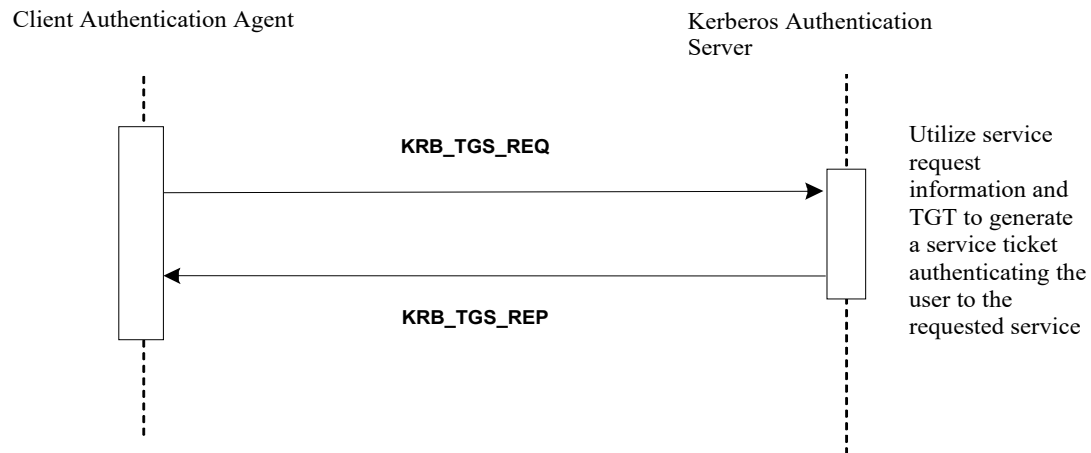
3.3.4.1 Get Service Ticket

The Client Authentication Agent requests a service ticket that will be sent to a Kerberized Server
485   to authenticate this user to a Kerberized Server.

3.3.4.1.1 Trigger Events

A service ticket is requested prior to communicating with a Kerberized Server. This ticket will be
provided to that service as part of the Kerberized communication process.

3.3.4.1.2 Message Semantics

490   The Client Authentication Agent requests credentials for a service by sending the Kerberos
Authentication Server a Kerberos Ticket-Granting Service Request (KRB_TGS_REQ). This
message includes the user's name, an authenticator encrypted with the user's logon session key,
the TGT obtained in the Get User Authentication Transaction, and the name of the service for
which the user wants a ticket.

495   When the Kerberos Authentication Server receives KRB_TGS_REQ, it decrypts the TGT with
its own secret key, extracting the logon session key. It uses the logon session key to decrypt the
authenticator and evaluates that. If the authenticator passes the test, the Kerberos Authentication
Server extracts the authorization data from the TGT and invents a session key for the client to
share with the Kerberized Server that supports the service. The Kerberos Authentication Server
500   encrypts one copy of this session key with the user's logon session key. It embeds another copy
of the session key in a ticket, along with the authorization data, and encrypts this ticket with the
service's long-term key. The Kerberos Authentication Server then sends these credentials back to
the client in a Kerberos Ticket-Granting Service Reply (KRB_TGS_REP).

There are no IHE specific extensions or modifications to the Kerberos messaging.

3.3.4.1.3 Expected Actions

When the Client Authentication Agent receives the reply, it uses the logon session key to decrypt the session key to use with the service, and stores the key in its credentials cache. Then it extracts the ticket for the service and stores that in its cache. The client shall maintain the ticket in the credentials cache for later use.

3.3.4.1.4 Service Registration

The Kerberized Communication services supported in an enterprise shall be registered on the Kerberos Authentication Server according to the RFC1510 protocol specification used. The registration of the service on the KDC is outside the scope of this profile.

3.3.5 Security Considerations

The Get Service Ticket [ITI-3] transaction is not required to log an ATNA UserAuthentication event in the case of successful communications. An ATNA UserAuthentication event shall be logged when the communications fails for the purpose of authentication failure.

3.4 Kerberized Communication [ITI-4]

This section corresponds to transaction [ITI-4] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-4] is used by the Client Authentication Agent and Kerberized Server Actors.

3.4.1 Scope

This section specifies the details of the association of a Kerberos user identity with a session for a session oriented protocol, or a transaction for a transaction oriented protocol.

3.4.2 Use Case Roles
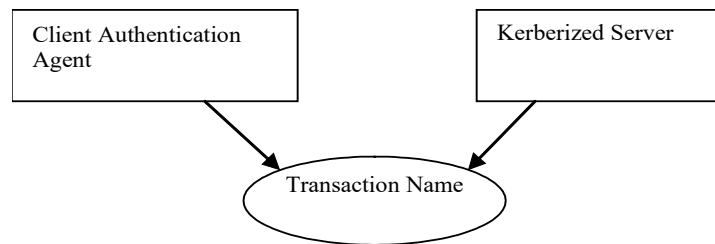
Actor: Client Authentication Agent

Role: Provides appropriate ticket as part of the connection or session management for another protocol.

Actor: Kerberized Server

___

Role: Accepts and verifies the ticket to perform user-identity-related services as part of the connection or session management for another protocol.

3.4.3 Referenced Standard

RFC1510   The Kerberos Network Authentication Service (V5)

3.4.4 Interaction Diagram
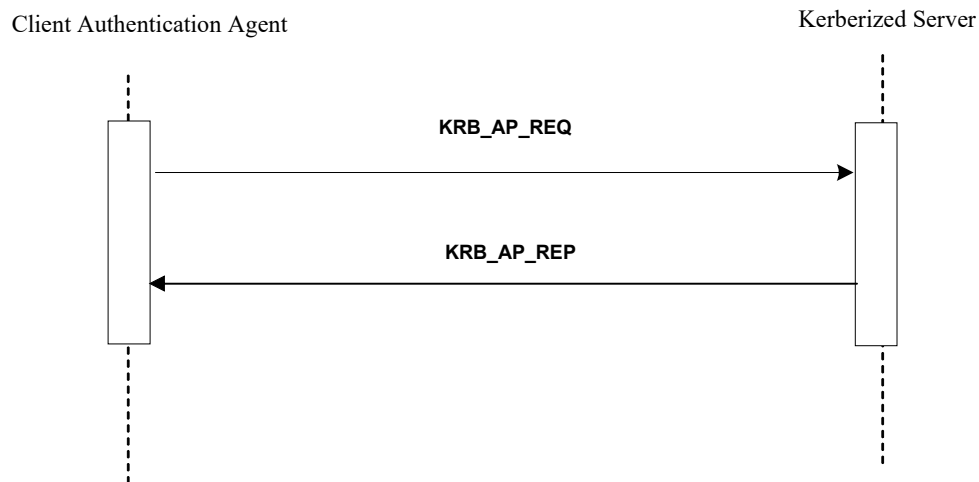
Figure 3.4-1: Kerberized Communications

3.4.4.1 Kerberized Communications

The sequence diagram above describes information flow that can be encapsulated in a variety of different protocol startup sequences. The specific details for this encapsulation are defined as part of the definition of Kerberizing a specific kind of communication protocol.

3.4.4.1.1 Trigger Events

This occurs at the beginning of a session or as part of each session-less transaction.

3.4.4.1.2 Message Semantics

The Client Authentication Agent requests service from a Kerberized Server by sending the server a Kerberos Application Request (KRB_AP_REQ). This message contains an authenticator encrypted with the session key, the ticket obtained in the Get Service Ticket Transaction, and a flag indicating whether the client wants mutual authentication. (The setting of this flag is either specified by the rules of the Kerberized communications, or is an option of the specific Kerberized protocol.)

The Kerberized Server receives KRB_AP_REQ, decrypts the ticket, and extracts the authorization data and the session key. The server uses the session key to decrypt the

authenticator and then evaluates the timestamp inside. If the authenticator passes the test, the server looks for a mutual authentication flag in the client's request for protocols that support mutual authentication. If the flag is set, the server uses the session key to encrypt the time supplied by the Client Authentication and returns the result in a Kerberos Application Reply (KRB_AP_REP).

The actual encoding and exchange of the KRB_AP_REQ and KRB_AP_REP are defined as part of the definition of the specific Kerberized protocol.

3.4.4.1.3 Expected Actions

When the Client Authentication receives KRB_AP_REP, it decrypts the server's authenticator with the session key it shares with the server and compares the time returned by the service with the time in the client's original authenticator. If the times match, the client knows that the service is genuine, and the connection proceeds.

If no mutual authentication is requested, the other IHE actors proceed with their IHE transactions. These transactions are identified as being requested by the authenticated user. The other actors will utilize this information for other purposes, such as confirming user authorization or logging user actions into audit trails.

3.4.4.2 Kerberized HTTP

Kerberized HTTP shall use SPNEGO-HTTP (see http://www.ietf.org/internet-drafts/draft-brezak-spnego-http-04.txt).

Note: At the time of publication there were no Kerberized HTTP normative standards. There are three relatively well-documented non-normative specifications. In addition, there are commercial and open source implementations of this specification for web and application servers. It was decided to use the Kerberized HTTP specification that is implemented by Microsoft Internet Explorer (MSIE) because many healthcare desktops use MSIE.

The following figure shows a typical message sequence for Kerberized HTTP.
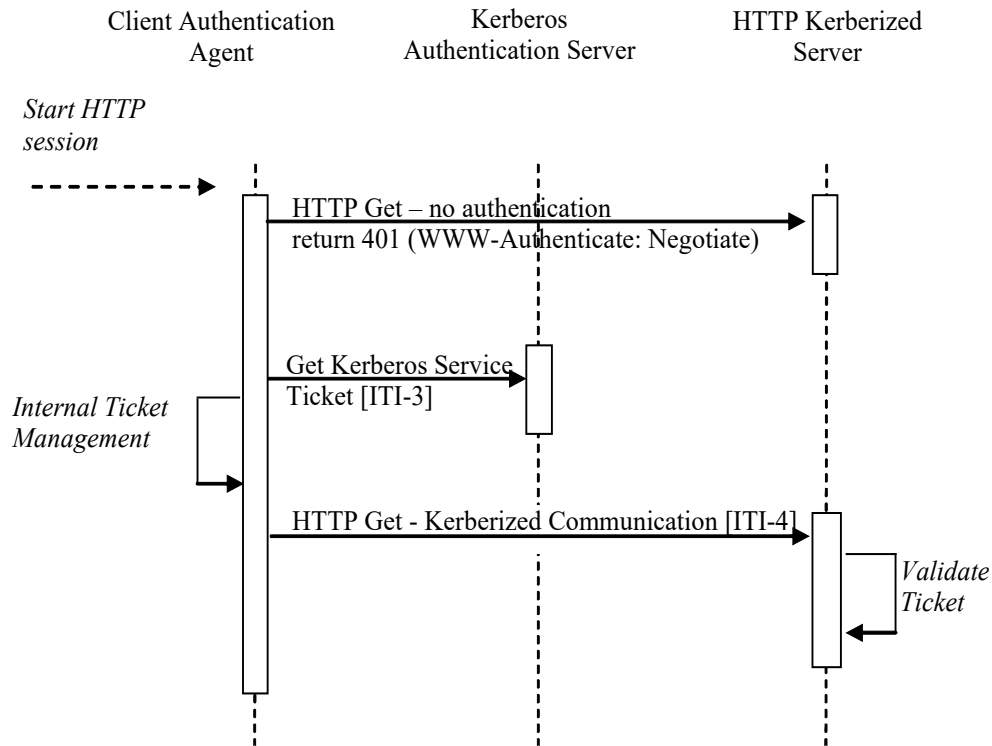
Figure 3.4-2: Kerberized HTTP

There is also documentation on the transactions, configuration, and troubleshooting these
585 configurations. Rather than reproduce all of that material as part of this framework, readers are
strongly encouraged to explore these references.

3.4.4.2.1 Trigger Events

This transaction occurs at the beginning of each HTTP transaction.

590

> Note: When the workstation is properly configured utilizing Microsoft Internet Explorer these transactions are
> transparent. A prompt for username, password, and domain is an indication of an improperly configured
> component.

3.4.4.2.2 Message Semantics

This IHE profile recognizes that the SPNEGO-HTTP method allows the client side to return
Kerberos credentials or NTLM credentials. This IHE profile thus restricts the transactions to the
595 Kerberized credentials.

3.4.4.3 Kerberized DICOM

The Kerberization of DICOM has been proposed and is under development. There is not a
finished standard at this time.

3.4.4.4 Kerberized HL7

600 The Kerberization of HL7 has been proposed and is under development. There is not a finished standard at this time.

3.4.5 Security Considerations

The Kerberized Communications [ITI-4] transaction is not required to log an ATNA UserAuthentication event in the case of successful communications. An ATNA
605 UserAuthentication event shall be logged when the communications fails for the purpose of authentication failure.

3.5 Join Context [ITI-5]

This section corresponds to transaction [ITI-5] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-5] is used by the Patient Context Participant, User Context
610 Participant, Client Authentication Agent and Context Manager Actors.

3.5.1 Scope

Any of the context participant actors using this transaction (Patient Context Participant, User Context Participant, and Client Authentication Agent) may locate and join a context management session specific to the workstation on which the instigating user is interacting.

615 A Context Participant shall first locate the instance of the Context Manager via technology specific methods as defined in the *HL7 Context Management "CCOW"* technology mapping documents. Once the context manager reference is returned, the Context Participant issues a join method to the context manager, which returns a unique participant identifier. User Context Participant and Client Authentication Agent shall use this identifier along with a shared secret as
620 inputs to a two stage secure binding process, which results in the exchange of public keys between the two actors.

If an implementation groups two or more context participant actors, this transaction shall be performed only once on a launch of an application in which those actors are grouped. All grouped actors share the same common context. If at least one of the grouped actors is a User
625 Context Participant or a Client Authentication Agent, this transaction shall include the two-stage secure binding process.

The semantics of the methods used in this transaction are defined in the documents *HL7 Context Management "CCOW" Standard: Component Technology Mapping: ActiveX* or *HL7 Context Management "CCOW" Standard: Component Technology Mapping: Web*. A Context Participant
630 can implement either technology. The Context Manager shall support both technologies in order to interoperate with joining participants implementing the technology of their choice.

635 **3.5.2 Use Case Roles**

```
┌─────────────────┐   ┌─────────────────┐   ┌─────────────────┐
│ Patient Context │   │  User Context   │   │     Client      │
│ Participant Actor│   │ Participant Actor│   │ Authentication  │
│                 │   │                 │   │      Agent      │
└─────────────────┘   └─────────────────┘   └─────────────────┘
              ╲              │              ╱
               ╲             │             ╱
                ╲            ▼            ╱
              ⟨     Join Context     ⟩
                         ▲
                         │
                ┌─────────────────┐
                │     Context     │
                │  Manager Actor  │
                └─────────────────┘
```
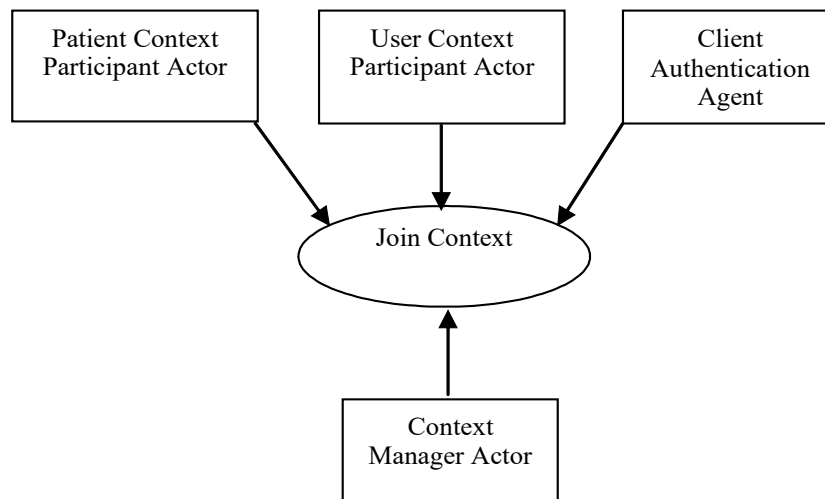
Actor: Patient Context Participant

640 **Role:** Initiates establishment of context session connection with the Context Manager so as to be able to change and follow Patient Subject changes in the common context.

Actor: User Context Participant

Role: Initiates establishment of a secure context session connection with the Context Manager so as to be able to follow User Subject changes in the common context.

645 **Actor:** Client Authentication Agent

Role: Initiates establishment of a secure context session connection with the Context Manager so as to be able to perform User Subject changes in the common context.

Actor: Context Manager

Role: Responds to the request to join the context session from the context participant.

650 **3.5.3 Referenced Standard**

HL7 Context Management "CCOW" Standard, Version 1.4:

Technology and Subject Independent Architecture

Component Technology Mapping: ActiveX

Component Technology Mapping: Web

655 ## 3.5.4 Interaction Diagrams

The Join Context Transaction involves a different set of messages depending on the type of subjects the context participant is interested in, either Patient subject, User subject or both Patient and User subjects.
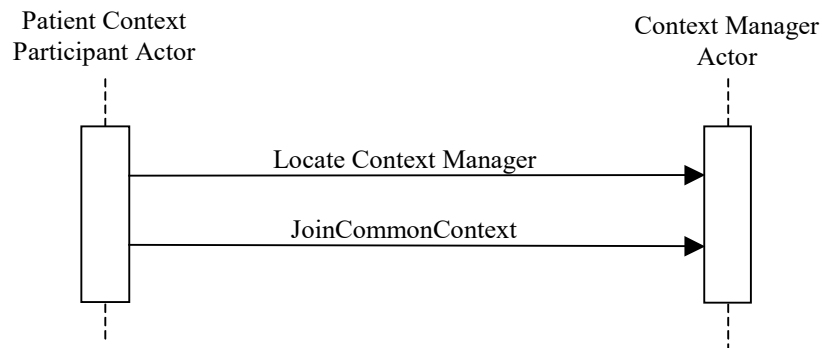
660 **Figure 3.5-1: Patient Subject Join Context Interaction Diagram**
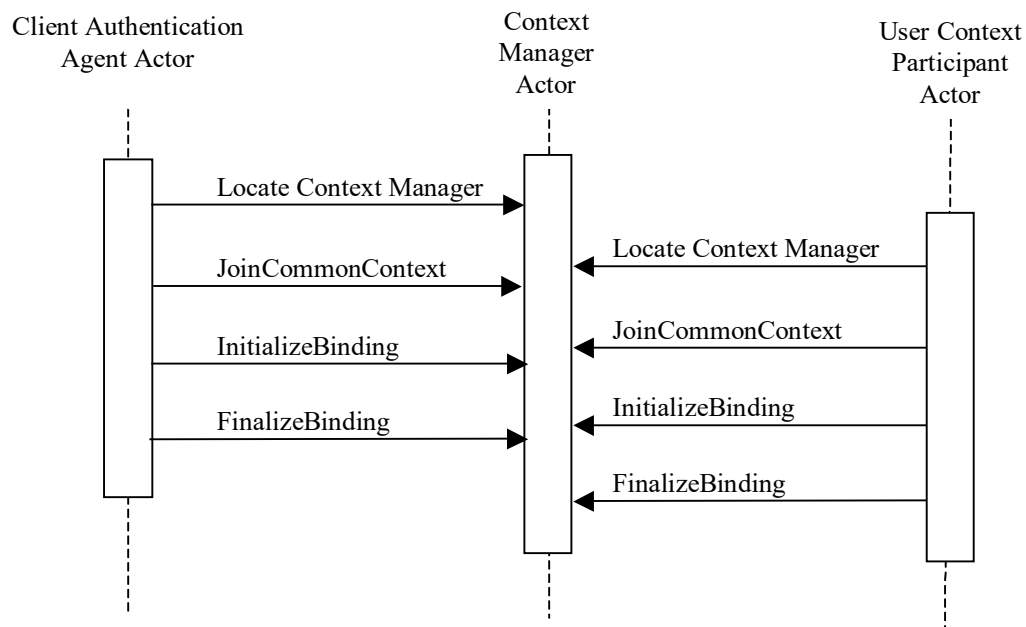
Figure 3.5-2: User Subject Join Context Interaction Diagram

3.5.4.1 Join Context – Locate Method

To join the common context upon launch of an application, it is necessary for the context
665 participant to locate the Context Manager that supports context management for the user's workstation. This is achieved by the invocation of the Locate method in accordance with specifications of the *HL7 Context Management "CCOW" Standard*.

3.5.4.1.1 Trigger Events

The Locate method is triggered by the user launch of an application that contains one of the
following actors: Patient Context Participant, User Context Participant or Client Authentication
Agent.

3.5.4.1.2 Message Semantics

In a Web/HTTP implementation, Locate is defined as a method of the
ContextManagementRegistry interface. The IHE Context Manager provides this interface for the
context participants to call upon, and thus implements the CCOW defined Context Management
Registry, which is used to locate the appropriate instance of the Context Manager.

In an ActiveX implementation, the context participants determine the location of the instance of
Context Manager from the operating system registry.

3.5.4.1.3 Expected Actions

The Locate method invocation is specific to the Web technology mapping. In this case, the
Content Manager shall return the valid URL of the Context Manager instance or a CCOW
defined UnableToLocate exception. Refer to the *HL7 Context Management "CCOW" Standard:
Component Technology Mapping: Web/HTTP*, Chapter 3 for the details of the response
specifications.

3.5.4.2 Join Context – JoinCommonContext Method

The JoinCommonContext method is invoked by the one of the following actors: Patient Context
Participant, User Context Participant or Client Authentication Agent.

3.5.4.2.1 Trigger Events

The JoinCommonContext method is triggered by the valid response of the Locate method with a
reference to the context manager.

3.5.4.2.2 Message Semantics

JoinCommonContext is defined as a method on the ContextManager interface. It shall be
invoked by a Context Participant to complete the establishment of the secure context session. A
Context Participant shall provide parameters for this method as specified in the CCOW Standard.

Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-
Independent Architecture* document, Section 17.3.6.3, for a detailed description of the
parameters associated with this method.

3.5.4.2.3 Expected Actions

If the JoinCommonContext method is successful, the Context Manager shall issue the invoking
actor a unique context participant identifier which is to be used until the context session is
terminated by either a Context Participant or the Context Manager.

If the method fails a descriptive CCOW exception will be returned.

After the context session is established, the Context Manager shall periodically verify availability of a Context Participant by invoking the Ping method on the ContextParticipant interface as specified in the CCOW Standard. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.7.6, for a detailed description of the parameters associated with this method.

Should the Context Manager need to terminate an established context session (for example, in a case of restart), it shall inform the context participants of such action by invocation of the CommonContextTerminated method on the ContextParticipant interface as specified in the CCOW Standard. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.7.5, for a detailed description of the parameters associated with this method.

The success of this method signifies completion of the Join Context Transaction for the actors intending to participate only in the patient context.

3.5.4.3 Join Context – InitializeBinding Method

The InitializeBinding method is invoked by the one of the following actors intending to participate in a user context: User Context Participant or Client Authentication Agent.

3.5.4.3.1 Trigger Events

The InitializeBinding method is triggered by the valid response of the JoinContext method.

3.5.4.3.2 Message Semantics

InitializeBinding is defined as a method on the SecureBinding interface and allows a Context Participant and Context Manager to verify each other's identity and supply the Context Manager's public key to the requesting context participant.

In the invocation of this method, context participant supplies the application identification and a digest produced from that identification concatenated with a shared secret. The shared secret is known in CCOW terms as an applications passcode. The passcode shall be site configurable.

Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.12.2, for a description of the parameters associated with this method, to be issued by the Context Participant.

3.5.4.3.3 Expected Actions

Performing the InitializeBinding method, the Context Manager verifies the identity of a requesting context participant and responds with the message containing its public key. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.12.2, for the specifics of the response formation.

3.5.4.4 Join Context – FinalizeBinding Method

The FinalizeBinding method is invoked by the one of the following actors: User Context Participant or Client Authentication Agent.

3.5.4.4.1 Trigger Events

740 The FinalizeBinding method is triggered by the valid response of the InitializeBinding method.

3.5.4.4.2 Message Semantics

FinalizeBinding is defined as a method on the SecureBinding interface and allows a Context Participant to supply the Context Manager with its public key.

In the invocation of this method, the context participant supplies its public key and a digest
745 digitally signed with its private key.

Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.12.3, for a description of the parameters associated with this method, to be issued by the Context Participant.

3.5.4.4.3 Expected Actions

750 Performing the FinalizeBinding method, the Context Manager verifies the identity of a requesting context participant and accepts or rejects its public key. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.12.3, for the specifics of the response formation.

The success of this method signifies completion of the Join Context Transaction for the actors
755 intending to participate in the user context.

3.6 Change Context [ITI-6]

This section corresponds to transaction [ITI-6] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-6] is used by the Context Participant and Context Manager Actors.

3.6.1 Scope

760 This transaction allows for an application supporting the Context Participant to change the values for one or more context subjects, forcing other Context Participant Actors to synchronize based on the new context values.

The Change Context Transaction is composed of multiple methods as defined by the *HL7 Context Management "CCOW" Standard*. There are two key characteristics to this transaction.
765 The first is that the transaction has multiple phases consisting of instigating the change, surveying the other participants, and finally publishing the decision as to whether the context changed or not. The second characteristic is that the context change involves a specific subject. For the Patient Context Participant the subject being changed is the patient subject. For the Client Authentication Agent the subject being changed is the user subject. Applications that implement
770 only the Patient Context Participant shall not expect the user subject to be set in context.

The semantics of the methods used are defined in the documents *HL7 Context Management "CCOW" Standard: Component Technology Mapping: ActiveX* or *HL7 Context Management "CCOW" Standard: Component Technology Mapping: Web*, in conjunction with the *HL7 Context Management "CCOW" Standard: Subject Data Definitions* document. The Context
775 Participant can choose the technology implementation it wishes to implement. The Context

Manager must support both technology implementations in order to accommodate whichever implementation a participant ends up choosing.

In the case where Patient Context Participant Actors use identifiers from different patient identifier domains the Context Manager shall be grouped with the Patient Identifier Cross-reference Consumer and the corresponding PIX Query transaction as defined in Section 3.9 to retrieve all identifiers the patient is known by. The IHE Context Manager encompasses more than a CCOW context manager function. See ITI TF-2x: Appendix D for a complete discussion of the grouping of these two actors.

The CCOW architecture is defined as a set of components that implement defined interfaces and their detailed methods as specified in the *HL7 Context Management "CCOW" Standard: Technology Independent Architecture* document. This structure is different than the traditional IHE network transaction. As is depicted in the interaction diagram in Section 3.6.4, the IHE Change Context Transaction is composed of multiple CCOW-defined methods.

3.6.2 Use Case Roles

790
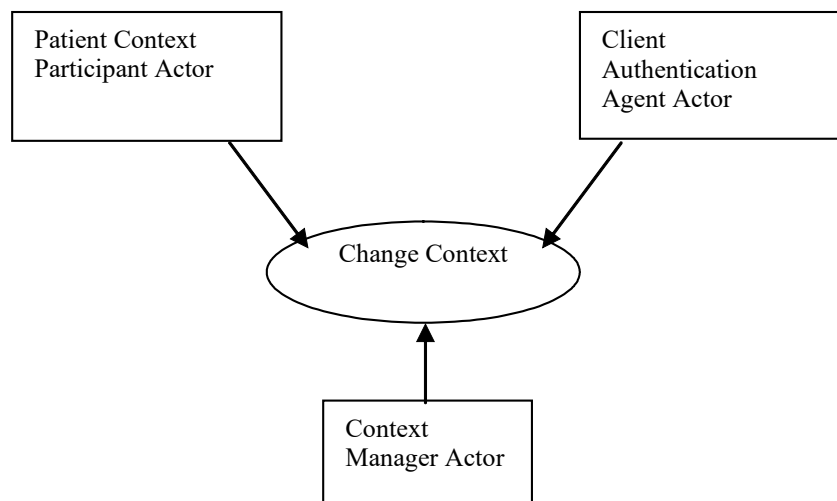
Actor: Client Authentication Agent

Role: Initiates context change for user subject by supplying new context values.

Actor: Patient Context Participant

Role: Initiates context change for patient subject by supplying new context values. After receiving the context survey results it finalizes context change decision. Applications containing this actor without a patient lookup function would not use this transaction.

Actor: Context Manager

Role: Manages Change Context Transaction lifecycle.

3.6.3 Referenced Standard

HL7 Context Management "CCOW" Standard, Version 1.4:

> Technology and Subject Independent Architecture

> Component Technology Mapping: ActiveX

805 > Component Technology Mapping: Web

> Subject Data Definitions

3.6.4 Interaction Diagram
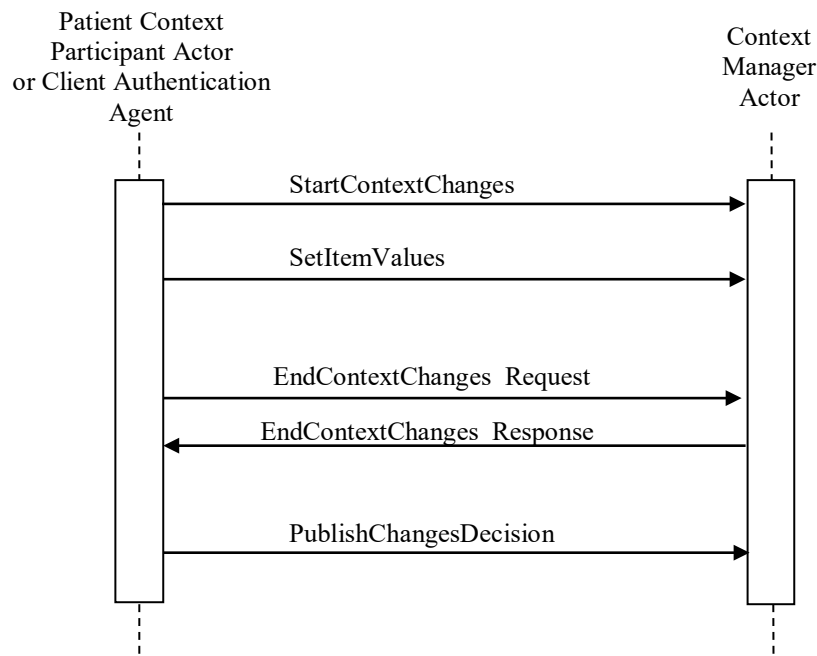
Figure 3.6-1: Change Context sequence

810 ### 3.6.4.1 Context Change – StartContextChanges Method

3.6.4.1.1 Trigger Events

This method is triggered by a specific user gesture. The user gesture that triggers this transaction in for the Patient Context Participant is one of selecting a patient. The user gesture that triggers this transaction for the Client Authentication Agent is authentication of a user.

815 #### 3.6.4.1.2 Message Semantics

The Patient Context Participant and/or the Client Authentication Agent will issue a StartContextChanges method of the ContextManager interface. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.6.5, for a more detailed description of the parameters associated with this method.

820 IHE specifies no restrictions or extensions to the CCOW definition of the StartContextChanges method.

3.6.4.1.3 Expected Actions

The Context Manager returns the pending context coupon. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document,
825 Section 17.3.6.5, for a more detailed description of the response issued by the Context Manager. IHE specifies no restrictions or extensions to the CCOW definition of the StartContextChanges method.

3.6.4.2 Change Context – SetItemValues Method

3.6.4.2.1 Trigger Events

830 The SetItemValues method is triggered by the return of a context coupon in response to the StartContextChanges method.

3.6.4.2.2 Message Semantics

3.6.4.2.2.1 Patient Context Participant Actor support for CCOW Patient Subject

The Patient Context Participant issues an invocation of the SetItemValues method of the
835 ContextData interface to the Context Manager Actor. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.4.4, for a more detailed description of the parameters associated with this method, to be issued by the Patient Context Participant Actor. The Patient Context Participant supports synchronization around the CCOW patient subject. A Patient Context Participant performing a
840 Change Context Transaction shall set the Patient.Id.IdList.1 patient identifier item. All other patient identifier items as defined by the CCOW standard and shown in Table 3.6.4.2-1 Patient Subject Identifier Items, are subject to deprecation in future releases of the standard.

Table 3.6.4.2-1: Patient Subject Identifier Items

Patient Subject Identifier Item Name	HL7 Meaning	HL7 Data Type	HL7 Semantic Constraints on Values	Case Sensitive
Patient.Id.MRN.*Suffix*	Patient's medical record number, per PID-2	ST	HL7 Table 0203Identifier Type = MR	No
Patient.Id.MPI	Patient's identifier in the "Master Patient Index", per PID-2	ST	HL7 Table 0203Identifier Type = PT or PI (as agreed upon by context sharing systems) and Assigning Authority represents the MPI system	No
Patient.Id.NationalIdNumber	Patient's national identifier number, per PID-2	ST	HL7 Table 0203Identifier Type = PT and Assigning Authority represents agreed-upon National Authority	No

Patient Subject Identifier Item Name	HL7 Meaning	HL7 Data Type	HL7 Semantic Constraints on Values	Case Sensitive
Patient.Id.IdList	A list of patient identifiers for a patient, per PID-3	CX	May be a repeating set of CX item values each of which contains an identifier that denotes the same patient	No

845 *Adapted from the HL7 Context Management "CCOW" Standard, version 1.4*

The Patient.Id.IdList.1 item shall populate component 1, (the patient identifier), and either sub-component 1, (namespace ID), of component 4, (the assigning authority), of the CX data item. This is to be consistent with the requirements for the patient identifier as defined in the PIX
850 Query transaction documented in Section 3.9.4.1.2.2.

The Patient Context Participant should use the SetItemValues associated with the ContextData interface, as defined in Sections 17.3.4.4 and 17.3.4.5 respectively of the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document.

3.6.4.2.2.2 Client Authentication Agent Actor support for CCOW User Subject

855 The Client Authentication Agent supports synchronization around the CCOW user subject. A Client Authentication Agent performing a Change Context Transaction shall set the User.Id.Logon.*Suffix* identifier item, where the *Suffix* is assigned as Kerberos. This would make the item name to be used by the Client Authentication Agent User.Id.Logon.Kerberos. The value of User.Id.Kerberos shall be the username@realm.

860 The Client Authentication Agent shall use the SetItemValues associated with SecureContextData interface as defined in Section 17.3.13.3 of the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document.

3.6.4.2.3 Expected Actions

The Context Manager returns an acknowledgement of the changed data. IHE specifies no
865 restrictions or extensions to the CCOW definition of the SetItemValues method. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.4.4, for a more detailed description of the response issued by the Context Manager to the Patient Context Participant Actor. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document,
870 Section 17.3.13.3, for a more detailed description of the response issued by the Context Manager to the Client Authentication Agent Actor.

3.6.4.3 Context Change – EndContextChanges

3.6.4.3.1 Trigger Events

The EndContextChanges method is triggered by the completion of the SetItemValues method.

875 3.6.4.3.2 Message Semantics

The Patient Context Participant and Client Authentication Agent Actors issue an EndContextChanges method of the ContextManager interface to the Context Manager Actor. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.6.6, for a description of the parameters 880 associated with this method. IHE specifies no restrictions or extensions to the CCOW definition of the EndContextChanges method.

3.6.4.3.3 Expected Actions

The EndContextChanges method triggers the ContextChangesPending method as defined in Section 3.13.4.1. The Context Manager returns the results of the context survey to the instigating 885 Patient Context Participant or Client Authentication Agent Actor.

If the instigating Patient Context Participant or Client Authentication Agent receives a unanimous acceptance in the survey results, then it triggers an accept in the PublishChangesDecision method.

If the instigating Patient Context Participant or Client Authentication Agent receives one or more 890 Conditional Accept responses in the survey results, then the application containing the actor must ask the user to continue, suspend context participation, or cancel the pending context change transaction. The user's decision to continue will result in the context change being accepted. The user's decision to suspend context participation will cancel the change transaction and allow the user to temporarily use the application without affecting the current context session. The user's 895 decision to cancel will cancel the pending context change transaction. At this point the Patient Context Participant or Client Authentication Agent triggers the PublishChangesDecision with the user's response.

In the event a participant application does not respond to the survey, after a configurable period of time the Context Manager will deem the application as "busy". If the instigating participant 900 application receives one or more busy responses, it shall only present the suspend or cancel choices. This prevents an application from inadvertently becoming out of synch with the context, unbeknownst to the user.

Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.6.6, for a more detailed description of the 905 response issued by the Context Manager and actions required by the Patient Context Participant and or Client Authentication Agent Actors. IHE specifies no restrictions or extensions to the CCOW definition of the EndContextChanges method.

3.6.4.4 Context Change – PublishChangesDecision

3.6.4.4.1 Trigger Events

910 The PublishChangesDecision method is triggered by the return of EndContextChanges method.

3.6.4.4.2 Message Semantics

The Patient Context Participant and Client Authentication Agent Actors shall issue either an accept or cancel via the PublishChangesDecision method of the ContextManager interface to the Context Manager Actor. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.6.8, for a more detailed description of the parameters associated with this method. IHE specifies no restrictions or extensions to the CCOW definition of the PublishChangesDecision method.

3.6.4.4.3 Expected Actions

When the PublishChangesDecision method is received by the Context Manager it triggers the ContextChangesAccepted or ContextChangesCancelled method as defined in Section 3.13.4.2 or Section 3.13.4.3 respectively. IHE specifies no restrictions or extensions to the CCOW definition of the PublishChangesDecision method. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.6.8, for a description of the response issued by the Context Manager Actor.

3.7 Leave Context [ITI-7]

This section corresponds to transaction [ITI-7] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-7] is used by the Patient Context Participant, User Context Participant, Client Authentication Agent, and Context Manager Actors.

3.7.1 Scope

This transaction allows for an application supporting the Patient Context Participant, User Context Participant, or Client Authentication Agent to terminate participation in a context management session in which it is participating.

A Context Participant notifies the Context Manager that is leaving the common context. The semantics of the methods used are defined in the documents *HL7 Context Management "CCOW" Standard: Component Technology Mapping: ActiveX* or *HL7 Context Management "CCOW" Standard: Component Technology Mapping: Web*. The Context Participant can choose the technology implementation it wishes to implement. The Context Manager must support both technology implementations in order to accommodate whichever implementation a joining participant ends up choosing.

3.7.2 Use Case Roles
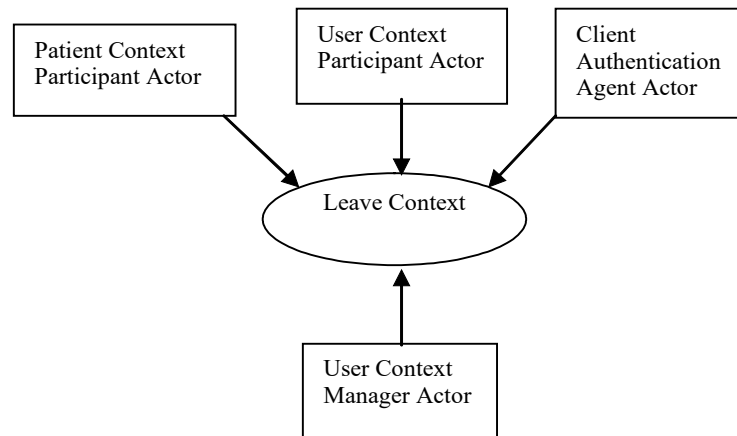
Actor: Patient Context Participant

945 **Role:** Initiates notification to the Context Manager that it will no longer be participating in the context management session.

Actor: User Context Participant

Role: Initiates notification to the Context Manager that it will no longer be participating in the context management session.

950 **Actor:** Client Authentication Agent

Role: Initiates notification to the Context Manager that it will no longer be participating in the context management session.

Actor: Context Manager

Role: Responds to the request to leave the context session from the context participant.

955 **3.7.3 Referenced Standard**

HL7 Context Management "CCOW" Standard, Version 1.4:

      Technology and Subject Independent Architecture

      Component Technology Mapping: ActiveX

      Component Technology Mapping: Web

960 ### 3.7.4 Interaction Diagram
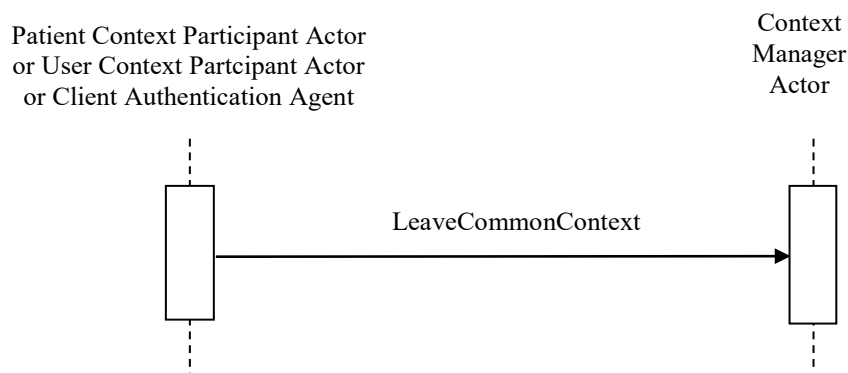
Figure 3.7-1: Leave Context Sequence

3.7.4.1 Leave Context – LeaveCommonContext Method

3.7.4.1.1 Trigger Events

965 This transaction is triggered by the user closing an application that contains a Patient Context Participant Actor, a User Context Participant Actor, or Client Authentication Agent Actor.

3.7.4.1.2 Message Semantics

LeaveContext is defined as a method on the ContextManager interface. It shall be invoked by a Context Participant to announce its departure from the secure context session. A Context
970 Participant shall provide parameters for this method as specified in the CCOW Standard.

Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.6.4, for a description of the parameters associated with this method.

3.7.4.1.3 Expected Actions

975 The Context Manager acknowledges the receipt of the notification. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.6.4, for a description of the response issued by the Context Manager Actor.

The context participant is expected to dispose of all context manager interface references upon receipt of the message reply. No further context change transactions will be processed by the
980 Context Manager for this context participant.

3.8 Patient Identity Feed [ITI-8]

This section corresponds to transaction [ITI-8] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-8] is used by the Patient Identity Source, Patient Identifier Cross-reference Manager and Document Registry Actors.

985 3.8.1 Scope

This transaction communicates patient information, including corroborating demographic data, after a patient's identity is established, modified or merged or after the key corroborating demographic data has been modified.

3.8.2 Use Case Roles

990
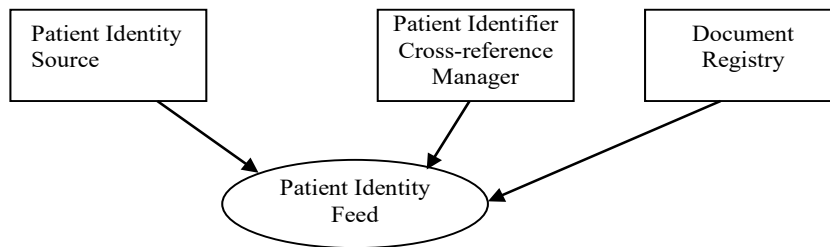
Actor: Patient Identity Source

Role: Provides notification to the Patient Identifier Cross-reference Manager and Document Registry for any patient identification related events including: creation, updates, merges, etc.

995 **Actor:** Patient Identifier Cross-reference Manager

Role: Serves a well-defined set of Patient Identification Domains. Based on information provided in each Patient Identification Domain by a Patient Identification Source Actor, it manages the cross-referencing of patient identifiers across Patient Identification Domains.

Actor: Document Registry

1000 **Role:** Uses patient identifiers provided by Patient Identity Source to ensure that XDS Documents metadata registered is associated with a known patient and updates patient identity in document metadata by tracking identity change operations (e.g., merge).

3.8.3 Referenced Standards

HL7 Version 2.3.1 Chapter 2 – Control, Chapter 3 – Patient Administration

1005 HL7 Version 2.3.1 was selected for this transaction for the following reasons:

- It provides a broader potential base of Patient Identity Source Actors capable of participating in the profiles associated with this transaction.

- It allows existing ADT Actors from within IHE Radiology to participate as Patient Identity Source Actors.

1010 ## 3.8.4 Interaction Diagram
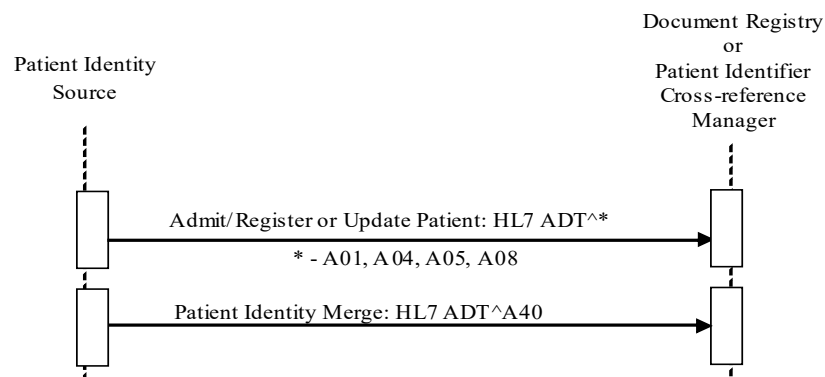
Figure 3.8-1: Patient Identity Sequence

3.8.4.1 Patient Identity Management – Admit/Register or Update Patient

3.8.4.1.1 Trigger Events

1015 The following events from a Patient Identity Source will trigger one of the Admit/Register or Update messages:

- A01 – Admission of an in-patient into a facility

- A04 – Registration of an outpatient for a visit of the facility

- A05 – Pre-admission of an in-patient (i.e., registration of patient information ahead of
1020 actual admission).

Changes to patient demographics (e.g., change in patient name, patient address, etc.) shall trigger the following Admit/Register or Update message:

- A08 – Update Patient Information

The Patient Identifier Cross-reference Manager shall only perform cross-referencing logic on
1025 messages received from Patient Identity Source Actors. For a given Patient Identifier Domain there shall be one and only one Patient Identity Source Actor, but a given Patient Identity Source may serve more than one Patient Identifier Domain.

3.8.4.1.2 Message Semantics

The Patient Identity Feed transaction is conducted by the HL7 ADT message, as defined in the
1030 subsequent sections. The Patient Identity Source shall generate the message whenever a patient is admitted, pre-admitted, or registered, or when some piece of patient demographic data changes. Pre-admission of inpatients shall use the A05 trigger event. The segments of the message listed below are required, and their detailed descriptions are provided in the following subsections.

1035 Note: Conventions used in this section as well as additional qualifications to the level of specification and HL7 profiling are stated in ITI TF-2x: Appendix C and C.1.

Required segments are defined below. Other segments are optional

Table 3.8-1: ADT Patient Administration Messages

ADT	Patient Administration Message	Chapter in HL7 2.3.1
MSH	Message Header	2
EVN	Event Type	3
PID	Patient Identification	3
PV1	Patient Visit	3

1040   Each message shall be acknowledged by the HL7 ACK message sent by the receiver of ADT message to its sender. See ITI TF-2x: C.2.3, "Acknowledgement Modes", for definition and discussion of the ACK message.

This transaction does not require Patient Identity Source Actors to include any attributes not already required by the corresponding HL7 message (as is described in the following sections).
1045   This minimal set of requirements enables inclusion of the largest range of Patient Identity Source Actor systems.

This transaction **does** place additional requirements on the Patient Identifier Cross-reference Manager and Document Registry Actors, requiring them to accept a set of HL7 attributes beyond what is required by HL7. (See Section 3.8.4.1.3 for a description of these additional
1050   requirements.)

3.8.4.1.2.1 MSH Segment

The MSH segment shall be constructed as defined in ITI TF-2x: C.2.2 "Message Control".

Field *MSH-9 Message Type* shall have at least two components. The first component shall have a value of **ADT**; the second component shall have one of the values of **A01**, **A04**, **A05** or **A08** as
1055   appropriate. The third component is optional; however, if present, it shall have the value of ADT_A01 for all message types, as defined in HL7 v2.3.1 Table 0354.

3.8.4.1.2.2 EVN Segment

The Patient Identity Source is not required to send any attributes within the EVN segment beyond what is specified in the HL7 standard. See Table C.1-4 in ITI TF-2x: C.2.4 "Common
1060   Segment Definitions" for the specification of this segment.

3.8.4.1.2.3 PID Segment

The Patient Identity Source is not required to send any attributes within the PID segment beyond what is specified in the HL7 standard.

When sending ADT messages A01, A04, and A05, the Patient Identity Source shall populate
1065   appropriate values in the fields as listed in Table 3.8-2:

Table 3.8-2: IHE Profile - PID segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	4	SI	O		00104	Set ID - Patient ID

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
2	20	CX	O		00105	Patient ID
3	250	CX	R		00106	Patient Identifier List
4	20	CX	O		00107	Alternate Patient ID
5	250	XPN	R		00108	Patient Name
6	250	XPN	R2		00109	Mother's Maiden Name
7	26	TS	R2		00110	Date/Time of Birth
8	1	IS	R2	0001	00111	Administrative Sex
9	250	XPN	O		00112	Patient Alias
10	250	CE	O	0005	00113	Race
11	250	XAD	R2		00114	Patient Address
12	4	IS	O	0289	00115	County Code
13	250	XTN	R2		00116	Phone Number - Home
14	250	XTN	R2		00117	Phone Number - Business
15	250	CE	O	0296	00118	Primary Language
16	250	CE	O	0002	00119	Marital Status
17	250	CE	O	0006	00120	Religion
18	250	CX	O		00121	Patient Account Number
19	16	ST	R2		00122	SSN Number – Patient
20	25	DLN	R2		00123	Driver's License Number - Patient
21	250	CX	O		00124	Mother's Identifier
22	250	CE	O	0189	00125	Ethnic Group
23	250	ST	O		00126	Birth Place
24	1	ID	O	0136	00127	Multiple Birth Indicator
25	2	NM	O		00128	Birth Order
26	250	CE	O	0171	00129	Citizenship
27	250	CE	O	0172	00130	Veterans Military Status
28	250	CE	O	0212	00739	Nationality
29	26	TS	O		00740	Patient Death Date and Time
30	1	ID	O	0136	00741	Patient Death Indicator

Adapted from the HL7 standard, Version 2.3.1

Note1: It is likely that not all attributes marked as R2 above will be sent in some environments.

Note2: The field length of many attributes in this table exceeds the requirements stated in HL7 2.3.1. The Patient Identifier Cross-reference Manager (receiver) is required to support these extended lengths to cope with the information it needs to complete identifier cross-referencing logic. The Patient Identity Source may or may not send values of the full length listed in this table.

This message shall use the field PID-3 Patient Identifier List to convey the Patient ID uniquely identifying the patient within a given Patient Identification Domain.

The Patient Identity Source shall provide the patient identifier in the ID component (first component) of the PID-3 field (PID-3.1). The Patient Identity Source shall use component PID-3.4 to convey the assigning authority (Patient Identification Domain) of the patient identifier.

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Either the first subcomponent (namespace ID) or the second and third subcomponents (universal ID and universal ID type) shall be populated. If all three subcomponents are populated, the first subcomponent shall reference the same entity as is referenced by the second and third components.

3.8.4.1.2.4 PV1 Segment

The Admit/ Register or Update Patient message is not required to include any attributes within the PV1 segment beyond what is specified in the HL7 standard.

3.8.4.1.3 Expected Actions – Patient Identifier Cross-reference Manager

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The Patient Identifier Cross-reference Manager shall be capable of accepting attributes in the PID segment as specified in HL7 standard as well as their extended field length as defined in Table 3.8-2. This is to ensure that the Patient Identifier Cross-reference Manager can handle a sufficient set of corroborating information in order to perform its cross-referencing function.

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If the PID-3.4 (assigning authority) component is not included in the message (as described in Section 3.8.4.1.2.3) the Patient Identifier Cross-reference Manager shall fill PID-3.4 prior to storing the ID information and performing its cross-referencing activities. The information filled by the Patient Identifier Cross-reference Manager is based on the configuration associating each of the Patient Identity Source Actors with the subcomponents of the correct assigning authority

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(namespace ID, UID and UID type). (See Section 3.8.4.1.3.1 below for a list of required Patient Identifier Cross-reference Manager configuration parameters).

A single Patient Identity Source can serve multiple Patient Identification domains. The Patient Identifier Cross-reference Manager shall only recognize (by configuration) a single Patient Identity Source per domain. (See Section 3.8.4.1.3.1 below for a list of required Patient Identifier

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Cross-reference Manager configuration parameters).

The cross-referencing process (algorithm, human decisions, etc.) is performed within the Patient Identifier Cross-reference Manager Actor, but its specification is beyond the scope of IHE.

Once the Patient Identifier Cross-reference Manager has completed its cross-referencing function, it shall make the newly cross-referenced identifiers available to PIX queries and send

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out notification to any Patient Identifier Cross-reference Consumers that have been configured (as being interested in receiving such notifications) using the PIX Update Notification transaction (see Section 3.10 for the details of that transaction).

3.8.4.1.3.1 Required Patient Identifier Cross-reference Manager Configuration

The following items are expected to be parameters that are configurable on the Patient Identifier

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Cross-reference Manager Actor. For each Patient Identification Domain included in the Identification Cross-reference Domain managed by a Patient Identifier Cross-reference Manager Actor, the following configuration information is needed:

- Identifier of the Domain. This identifier shall specify all 3 components of the HL7 assigning authority (including the namespace ID and/or both the universal ID and

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universal ID type subcomponents) of the PID-3 field for the identification of the domain.

- Patient Identity Source for the domain. This is expected to be the MSH-3 Sending Application and the corresponding MSH-4 Sending Facility fields in the HL7 ADT message. (Alternative identification schemes might include IP address of the Patient Identity Source or Node Authentication if the Audit Trail and Node Authentication Integration Profile is used.)

3.8.4.1.4 Expected Actions – Document Registry

The Document Registry shall be capable of accepting attributes in the PID segment as specified in Table 3.8-2a. The Patient Identity Feed transaction contains more triggers and data than what the XDS Document Registry needs for its operation. In particular, A08 – Update Patient Information, if received shall be ignored.

Table 3.8-2a: IHE Profile - PID segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
3	250	CX	R		00106	Patient Identifier List

Adapted from the HL7 standard, Version 2.3.1

Note: This table reflects only the attributes required to be handled by the Document Registry (receiver). Other attributes of the PID Segment may be ignored.

If subcomponents 2 and 3 (the universal ID and the universal ID Type of Assigning Authority) of the Patient Identification Domain of the XDS Affinity Domain in PID-3.4 are not filled in the message (as described in Section 3.8.4.1.2.3) the Document Registry shall fill subcomponents 2 and 3 of the Patient Identification Domain of the XDS Affinity Domain prior to storing the patient identity in the registry. The assigning authority information filled by the Document Registry is based on its configuration of the Patient Identification Domain of the XDS Affinity Domain. (See Section 3.8.4.1.4.1 below for a list of required Document Registry configuration parameters.)

The Document Registry shall store only the patient identifiers of the patient identification domain designated by the XDS Affinity Domain for document sharing in the registry. Patient identifiers of other patient identification domains (assigning authorities), if present in a received message, shall be ignored.

3.8.4.1.4.1 Required Document Registry Configuration

The following items are expected to be parameters that are configurable on the Document Registry:

- Identifier of the Patient Identification Domain of the XDS Affinity Domain. This identifier shall be specified with 3 components of the HL7 assigning authority (data type HD): namespaceID, universal ID and universal ID type. The universal ID shall be an ISO OID (Object Identifier), and therefore the universal ID Type must be "ISO".

3.8.4.2 Patient Identity Management –Patient Identity Merge (Merge Patient ID)

3.8.4.2.1 Trigger Events

When two patients' records are found to identify the same patient by a Patient Identity Source in a Patient Identifier Domain and are merged, the Patient Identity Source shall trigger the following message:

• A40 – Merge Patient – Internal ID

An A40 message indicates that the Patient Identity Source has done a merge within a specific Patient Identification Domain. That is, MRG-1 (patient ID) has been merged into PID-3 (Patient ID).

3.8.4.2.2 Message Semantics

The Patient Identity Feed transaction is an HL7 ADT message. The message shall be generated by the system (Patient Identity Source Actor) that performs the update whenever two patient records are found to reference the same person.

> Note: Conventions used in this section as well as additional qualifications to the level of specification and HL7 profiling are stated in ITI TF-2x: Appendix C and C.1.

The segments of the HL7 Merge Patient message listed below are required, and the detailed description of the message is provided in Sections 3.8.4.2.2.1 – 3.8.4.2.2.6. The PV1 segment is optional.

Table 3.8-3: ADT A40 Patient Administration Message

ADT A40	Patient Administration Message	Chapter in HL7 v2.3.1
MSH	Message Header	2
EVN	Event Type	3
PID	Patient Identification	3
MRG	Merge Information	3
[PV1]	Patient Visit	3

Each message shall be acknowledged by the HL7 ACK message sent by the receiver of ADT message to its sender. See ITI TF-2x: C.2.3 "Acknowledgement Modes" for definition and discussion of the ACK message.

A separate merge message shall be sent for each pair of patient records to be merged. For example, if Patients A, B, and C are all to be merged into Patient B, two ADT^A40 messages would be sent. In the first ADT^A40 message, patient B would be identified in the PID segment and Patient A would be identified in the MRG segment. In the second ADT^A40 message, patient B would be identified in the PID segment, and Patient C would be identified in the MRG segment.

Modification of any patient demographic information shall be done by sending a separate Update
1180 Patient Information (A08) message for the current Patient ID. An A40 message is the only
method that may be used to update a Patient ID.

3.8.4.2.2.1 MSH Segment

MSH segment shall be constructed as defined in ITI TF-2x: C.2.2 "Message Control".

Field *MSH-9 Message Type* shall have at least two components. The first component shall have a
1185 value of **ADT**; the second component shall have value of **A40**. The third component is optional;
however, if present, it shall have a value of **ADT_A39**.

3.8.4.2.2.2 EVN Segment

See ITI TF-2x: C.2.4 for the list of all required and optional fields within the EVN segment.

3.8.4.2.2.3 PID Segment

1190 The PID segment shall be constructed as defined in Section 3.8.4.1.2.3.

3.8.4.2.2.4 MRG Segment

The MRG segment shall be constructed as defined in Table 3.8-4:

Table 3.8-4: IHE Profile - MRG segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	250	CX	R		00211	Prior Patient Identifier List
2	250	CX	O		00212	Prior Alternate Patient ID
3	250	CX	O		00213	Prior Patient Account Number
4	250	CX	R2		00214	Prior Patient ID
5	250	CX	O		01279	Prior Visit Number
6	250	CX	O		01280	Prior Alternate Visit ID
7	250	XPN	R2		01281	Prior Patient Name

Adapted from the HL7 Standard, Version 2.3.1

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The PID and PV1 segments contain the dominant patient information, including patient identifier
and the issuing assigning authority. The MRG segment identifies the "old" or secondary patient
records to be de-referenced. HL7 does not require that the "old" record be deleted; it does require
that the "old" identifier shall not be referenced in future transactions following the merge.

1200 The Patient Identity Source shall send the "old" patient identifier (to be merged) in MRG-1, with
the identifier value in the component MRG-1.1 and the assigning authority in the component
MRG-1.4. The Patient Identity Source shall populate the same value of the assigning authority in
PID-3.4, in the component MRG-1.4.

3.8.4.2.2.5 PV1 Segment

1205 PV1 segment shall be constructed as defined in Section 3.8.4.1.2.4.

3.8.4.2.3 Expected Actions

The Patient Identifier Cross-reference Manager shall be capable of accepting attributes in the MRG segment as specified in Table 3.8-4.

In addition, the Patient Identifier Cross-reference Manager shall perform the Expected Actions as 1210 specified in Section 3.8.4.1.3.

When the Patient Identifier Cross-reference Manager receives the ADT^A40 message type of the Patient Identity Feed transaction, it shall cross-reference the patient identifiers provided in the PID-3 and MRG-1 fields of the message by replacing any references it is maintaining internally to the patient ID provided in the MRG-1 field by the patient ID included in the PID-3 field. After 1215 the identifier references are replaced, the Patient Identifier Cross-reference Manager shall reapply its internal cross-referencing logic/ policies before providing the updated information via either the PIX Query or PIX Notification Transactions.

3.8.4.2.4 Expected Actions – Document Registry

The Document Registry shall be capable of accepting attributes in the MRG segment as specified 1220 in Table 3.8-4. Other attributes may exist, but the Document Registry shall ignore them.

In addition, the Document Registry shall perform the Expected Actions as specified in Section 3.8.4.1.4.

When the Document Registry receives the ADT^A40 message type of the Patient Identity Feed transaction, it shall merge the patient identity specified in MRG-1 (secondary patient identity) 1225 into the patient identity specified in PID-3 (primary patient identity) in its registry. After the merge, all Document Submission Sets (including all Documents and Folders beneath them) under the secondary patient identity before the merge shall point to the primary patient identity. The secondary patient identity shall no longer be referenced in the future services provided by the Document Registry.

1230 Changes resulting from an A40 Merge message are not reversible. No UnMerge message is supported by this transaction.

See Section 3.18.4.1.2.3.9 for details of how this message type affects results of a Registry Stored Query [ITI-18] transaction and the end of ITI TF-2b: 3.42.4.1.3.3.2 to see how it affects the Register Document Set-b [ITI-42] transaction.

1235 An A40 merge message contains two fields of interest:

- MRG-1 – subsumed patient identifier: the patient identifier whose use is being ended

- PID-3 – surviving patient identifier: the patient identifier whose use continues.

After a merge, the patient identifier PID-3 represents all records formerly represented by either MRG-1 or PID-3. All other fields may be ignored.

The following conditions shall be detected by the Document Registry. Messages containing these conditions shall not update the state of the Document Registry.

- The subsumed patient identifier is not issued by the correct Assigning Authority according to the Affinity Domain configuration.

- The surviving patient identifier is not issued by the correct Assigning Authority according to the Affinity Domain configuration.

- The subsumed and surviving patient identifiers are the same.

- The subsumed patient identifier has already been subsumed by an earlier message.

- The surviving patient identifier has already been subsumed by and earlier message.

- Both the subsumed and surviving patient identifier must convey a currently active patient identifier known to the Registry Actor.

If none of the above conditions occur then the Document Registry shall perform the following duties:

- Records the merge. Only the subsumed and surviving patient identifiers need be remembered. A patient identifier merge affects the processing of future Register Document Set-b [ITI-42] transactions. See ITI TF-2b: 3.42.4.1.3.3 Enforcement of Attributes and ITI TF-2b: 3.42.4.1.3.5 Document Relationships for more details.

- Multiple merge transactions can form a recorded merge chain, where the Subsumed identifier of the current merge is the Surviving identifier of a previous merge.

- Register Document Set-b transactions referencing a subsumed identifier are rejected with an XDSUnknownPatientId error.

- Registry Stored Query transactions referencing a subsumed identifier return no content.

- Registry Stored Query transactions referencing a surviving identifier successfully match the entire recorded merge chain and return appropriate metadata.

Note: This transaction does not specify how the merge is to be implemented. It may or may not change the stored form of the metadata. It only specifies the observable results from the perspective of the Registry Stored Query [ITI-18] transaction and the Register Document Set-b [ITI-42] transaction.

3.8.5 Security Considerations

3.8.5.1 Audit Record Considerations – Admit/Register or Update Patient

The Patient Admit/Register transactions (A01, A04, A05) and Update Patient Information (A08) transaction are to be audited as "Patient Record" events, as defined in Table 3.20.4.1.1.1-1. The following tables show items that are required to be part of the audit record for these specific PIX transactions.

3.8.5.1.1 Patient Identity Source Actor audit message:

	Field Name	Opt	Value Constraints
Event AuditMessage/ EventIdentification	EventID	M	EV(110110, DCM, "Patient Record")
	EventActionCode	M	"C" (create) for A01, A04, A05 "U" (update) for A08
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-8", "IHE Transactions", "Patient Identity Feed")
Source (Patient Identity Source Actor) (1)			
Human Requestor (0..n)			
Destination (Patient Identifier Cross-reference Manager or Document Registry) (1)			
Audit Source (Patient Identity Source Actor) (1)			
Patient (1)			

Where:

	Field Name	Opt	Value Constraints
Source AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identity Source Actor facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

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	Field Name	Opt	Value Constraints
Human Requestor (if known) AuditMessage/ ActiveParticipant	UserID	M	Identity of the human that initiated the transaction.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	U	Access Control role(s) the user holds that allows this transaction.
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*

	Field Name	Opt	Value Constraints
Destination AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identifier Cross-reference Manager or Document Registry facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Audit Source AuditMessage/ AuditSourceIdentification	AuditSourceID	U	*not specialized*
	AuditEnterpriseSiteID	U	*not specialized*
	AuditSourceTypeCode	U	*not specialized*

Patient (AuditMessage/ ParticipantObjectIdentifi cation)	ParticipantObjectTypeCode	M	"1" (person)
	ParticipantObjectTypeCodeRole	M	"1" (patient)
	ParticipantObjectDataLifeCycle	U	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	U	*not specialized*
	ParticipantObjectID	M	the patient ID in HL7 CX format.
	ParticipantObjectName	U	*not specialized*
	ParticipantObjectQuery	U	*not specialized*
	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

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3.8.5.1.2 Patient Identifier Cross-reference Manager or Document Registry Actor audit message:

	Field Name	Opt	Value Constraints
Event AuditMessage/ EventIdentification	EventID	M	EV(110110, DCM, "Patient Record")
	EventActionCode	M	"C" (create) for A01, A04, A05 "U" (update) for A08
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-8", "IHE Transactions", "Patient Identity Feed")
Source (Patient Identity Source Actor) (1)			
Destination (Patient Identifier Cross-reference Manager or Document Registry) (1)			
Audit Source (Patient Identifier Cross-reference Manager or Document Registry) (1)			
Patient(1)			

Where:

Source AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identity Source Actor facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	U	*not specialized*
	UserName	U	*not specialized*
	UserIsRequestor	U	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Destination AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identifier Cross-reference Manager or Document Registry facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

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Audit Source AuditMessage/ AuditSourceIdentification	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

3.8.5.2 Audit Record Considerations – Patient Identity Merge (Merge Patient ID)

The Patient Identity Merge transaction (A40) is to be audited as a "Patient Record" event, as defined in Table 3.20.4.1.1.1-1. The following tables show items that are required to be part of the audit record for the Patient Identity Merge transaction. Logically, a merge operation consists
1290 of a delete on one patient record, and an update of another patient record. Separate audit records shall be written for the delete operation and the update operation.

3.8.5.2.1 Patient Identity Source Actor audit message:

	Field Name	Opt	Value Constraints
Event AuditMessage/ EventIdentification	EventID	M	EV(110110, DCM, "Patient Record")
	EventActionCode	M	"D" (delete) for the Delete operation "U" (update) for the Update operation
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-8", "IHE Transactions", "Patient Identity Feed")
Source (Patient Identity Source Actor) (1)			
Human Requestor (0..n)			
Destination (Patient Identifier Cross-reference Manager or Document Registry) (1)			
Audit Source (Patient Identity Source Actor) (1)			
Patient(1)			

Where:

Source AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identity Source Actor facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address

	NetworkAccessPointID	M	The machine name or IP address.

Human Requestor (if known) AuditMessage/ ActiveParticipant	UserID	M	Identity of the human that initiated the transaction.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	U	Access Control role(s) the user holds that allows this transaction.
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*

1295

Destination AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identifier Cross-reference Manager or Document Registry facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Audit Source AuditMessage/ AuditSourceIdentification	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"1" (person)
	ParticipantObjectTypeCodeRole	M	"1" (patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	the patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

3.8.5.2.2 Patient Identifier Cross-reference Manager or Document Registry Actor audit message:

	Field Name	**Opt**	**Value Constraints**
Event AuditMessage/ EventIdentification	EventID	M	EV(110110, DCM, "Patient Record")
	EventActionCode	M	"D" (delete) for the Delete audit record "U" (update) for the Update audit record
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-8", "IHE Transactions", "Patient Identity Feed")
Source (Patient Identity Source Actor) (1)			
Destination (Patient Identifier Cross-reference Manager or Document Registry) (1)			
Audit Source (Patient Identifier Cross-reference Manager or Document Registry) (1)			
Patient(1)			

1300 Where:

Source AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identity Source Actor facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Destination AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identifier Cross-reference Manager or Document Registry facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Audit Source AuditMessage/ AuditSourceIdentification	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient (AuditMessage/ ParticipantObjectIdentifi cation)	ParticipantObjectTypeCode	M	"1" (person)
	ParticipantObjectTypeCodeRole	M	"1" (patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	the patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

3.9 PIX Query [ITI-9]

1305 This section corresponds to transaction [ITI-9] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-9] is used by the Patient Identifier Cross-reference Consumer and Patient Identifier Cross-reference Manager Actors.

3.9.1 Scope

This transaction involves a request by the Patient Identifier Cross-reference Consumer for a list
1310 of patient identifiers that correspond to a patient identifier known by the consumer. The request is received by the Patient Identifier Cross-reference Manager. The Patient Identifier Cross-reference Manager immediately processes the request and returns a response in the form of a list of corresponding patient identifiers, if any.

3.9.2 Use Case Roles

1315
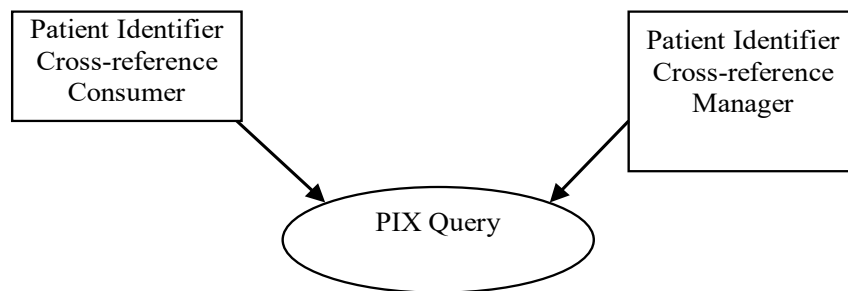
Actor: Patient Identifier Cross-reference Consumer

Role: Queries the Patient Identifier Cross-reference Manager for a list of corresponding patient identifiers, if any

1320   **Actor:** Patient Identifier Cross-reference Manager

Role: Manages the cross-referencing of patient identifiers across Patient Identification Domains. Upon request it returns a list of corresponding patient identifiers, if any.

3.9.3 Referenced Standard

HL7 2.5, Chapter 2 – Control, Chapter 3 – Patient Administration, Chapter 5 – Query

1325   HL7 version 2.5 was selected for this transaction for the following reasons:

It was considered the most stable version that contained the functionality required by transactions [ITI-9] and [ITI-10].

3.9.4 Interaction Diagram
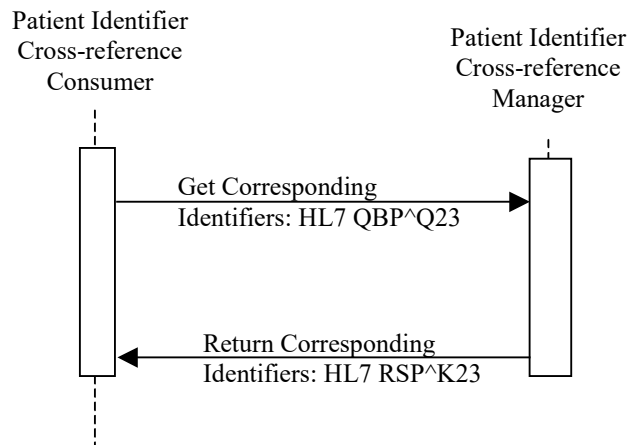
1330   **Figure 3.9-1: Get Corresponding Identifiers Sequence**

3.9.4.1 Get Corresponding Identifiers

3.9.4.1.1 Trigger Events

A Patient Identifier Cross-reference Consumer's need to get the patient identifier associated with a domain for which it needs patient related information will trigger the request for corresponding patient identifiers message based on the following HL7 trigger event:

- Q23 – Get Corresponding Identifiers

3.9.4.1.2 Message Semantics

The Request for Corresponding Patient Identifiers transaction is conducted by the HL7 QBP^Q23 message. The Patient Identifier Cross-reference Consumer shall generate the query message whenever it needs to obtain a corresponding patient identifier(s) from other Patient Identification Domain(s). The segments of the message listed below are required, and their detailed descriptions are provided in the following subsections.

> Note: Conventions used in this section as well as additional qualifications to the level of specification and HL7 profiling are stated in ITI TF-2x: Appendix C and C.1.

Table 3.9-1: QBP Query By Parameter

QBP	Query By Parameter	Chapter in HL7 2.5
MSH	Message Header	2
QPD	Query Parameter Definition	5
RCP	Response Control Parameter	5

The receiver shall respond to the query by sending the RSP^K23 response message. This satisfies the requirements of original mode acknowledgment; no intermediate ACK message is to be sent.

3.9.4.1.2.1 MSH Segment

The MSH segment shall be constructed as defined in ITI TF-2x: C.2.2 "Message Control".

Field *MSH-9 Message Type* shall have all three components populated with a value. The first component shall have a value of QBP; the second component shall have the value of Q23. The third component shall have a value of QBP_Q21.

3.9.4.1.2.2 QPD Segment

The Patient Identifier Cross-reference Consumer is required to send attributes within the QPD segment as described in Table 3.9-2.

Table 3.9-2: IHE Profile - QPD segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	250	CE	R	0471	01375	Message Query Name
2	32	ST	R+		00696	Query Tag
3	250**	CX	R			Person Identifier

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
4	250	CX	O			What Domains Returned

Adapted from the HL7 Standard, version 2.5

** Note: This value assumes completion of an HL7 erratum to correct an error identified in the standard.

1360

This message shall use the field QPD-3 *Person Identifier* to convey a single Patient ID uniquely identifying the patient within a given Patient Identification Domain.

The Patient Identifier Cross-reference Consumer shall provide the patient identifier in the ID component (first component) of the QPD-3 field (QPD-3.1).

1365 The Patient Identifier Cross-reference Consumer shall provide component QPD-3.4, Assigning Authority, by including either the first subcomponent (namespace ID) or the second and third subcomponents (universal ID and universal ID type) If all three subcomponents are populated, the first subcomponent shall reference the same entity as is referenced by the second and third components.

1370 If the requesting system wishes to select the domains from which they wish to receive Patient IDs, it does so by populating *QPD-4-What Domains Returned* with as many repetitions as domains for which it wants to receive Patient IDs. Each repetition of QPD-4 shall contain an instance of data type CX in which only the fourth component (Assigning Authority) is populated; the remaining components shall be empty. The responding system shall return the Patient ID

1375 value for each requested domain if a value is known.

If QPD-4 is empty, the Patient Identifier Cross-reference Manager shall return Patient IDs for all domains for which it possesses a corresponding Patient ID (subject to local publication restrictions).

The Consumer shall specify "IHE PIX Query" for QPD-1 Message Query Name.

1380 **3.9.4.1.2.3 RCP Segment**

Although HL7 requires that the RCP Segment be sent in all QBP messages, IHE does not require that the Patient Identifier Cross-reference Consumer send any attributes within the RCP segment, as is specified in the HL7 standard.

3.9.4.1.2.3.1 Populating RCP-1-Query Priority

1385 Field *RCP-1-Query Priority* shall always contain **I**, signifying that the response to the query is to be returned in Immediate mode.

3.9.4.1.3 Expected Actions

The Patient Identifier Cross-reference Manager shall be capable of accepting attributes in the QPD segment as specified in Table 3.9-2.

1390   The Patient Identifier Cross-reference Manager must be capable of receiving all valid combinations of subcomponents that make up the Assigning Authority component (i.e., all valid combinations of QPD-3.4).

The Patient Identifier Cross-reference Manager shall be capable of accepting multiple concurrent PIX Query requests (Get Corresponding Identifiers messages) and responding correctly using the
1395   Return Corresponding Identifiers message.

3.9.4.2 Return Corresponding Identifiers

3.9.4.2.1 Trigger Events

The Patient Identifier Cross-reference Manager's response to the Get Patient Identifiers message will trigger the following message:

1400   • K23 – Corresponding patient identifiers

3.9.4.2.2 Message Semantics

The Return Corresponding Identifiers transaction is conducted by the HL7 RSP^K23 message. The Patient Identifier Cross-reference Manager shall generate this message in direct response to the QBP^Q23 query message previously received. This message satisfies the Application Level,
1405   Original Mode Acknowledgement for the HL7 QBP^Q23 message. The segments of the message listed without enclosing square brackets in the table below are required. Detailed descriptions of all segments listed in the table below are provided in the following subsections. Other segments of the message are optional.

Note: Conventions used in this section as well as additional qualifications to the level of specification and HL7 profiling
1410   are stated in ITI TF-2x: Appendix C and C.1.

Table 3.9-3: RSP Segment Pattern Response

RSP	Segment Pattern Response	Chapter in HL7 2.5
MSH	Message Header	2
MSA	Message Acknowledgement	2
[ERR]	Error segment	2
QAK	Query Acknowledgement	5
QPD	Query Parameter Definition	5
[PID]	Patient Identification	3

3.9.4.2.2.1 MSH Segment

The MSH segment shall be constructed as defined in ITI TF-2x: C.2.2, "Message Control".

1415   Field *MSH-9-Message Type* shall have all three components populated with a value. The first component shall have a value of RSP; the second component shall have the value of K23. The third component shall have a value of RSP_K23.

3.9.4.2.2.2MSA Segment

1420 The Patient Identifier Cross-reference Manager is not required to send any attributes within the MSA segment beyond what is specified in the HL7 standard. See ITI TF-2x: C.2.3 for the list of all required and optional fields within the MSA segment.

3.9.4.2.2.3QAK Segment

The Patient Identifier Cross-reference Manager shall send attributes within the QAK segment as defined in Table 3.9-4. For the details on filling in QAK-2 (Query Response Status) refer to 1425 Section 3.9.4.2.2.6.

Table 3.9-4: IHE Profile - QAK segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	32	ST	R		00696	Query Tag
2	2	ID	R+	0208	00708	Query Response Status

Adapted from the HL7 standard, version 2.5

3.9.4.2.2.4QPD Segment

1430 The Patient Identifier Cross-reference Manager shall echo the QPD Segment value that was sent in the QBP^Q23 message.

3.9.4.2.2.5PID Segment

The Patient Identifier Cross-reference Manager shall return only those attributes within the PID segment that are required by the HL7 standard: *PID-3-Patient IdentifierList* and *PID-5-Patient*
1435 *Name*.

The PID segment is returned only when the Patient Identifier Cross-reference Manager recognizes the specified Patient Identification Domain and Patient ID and an identifier exists for the specified patient in at least one other domain. See Section 3.9.4.2.2.6, "Patient Identifier Cross-reference Manager Query Response Behavior," for a detailed description of how the
1440 Patient Identifier Cross-reference Manager responds to the query request under various circumstances.

The Patient Identifier Cross-reference Manager shall use the field PID-3 Patient Identifier List to convey the Patient ID uniquely identifying the patient within each Patient Identification Domain for which a Patient ID exists for the specified patient. Each resulting ID returned in PID-3 shall
1445 include a fully qualified Assigning Authority component. In other words, the Assigning Authority component returned shall include ALL subcomponents (namespace ID, Universal ID, and Universal ID type).

To eliminate the issue of conflicting name values between Patient Identifier Domains, the Patient Identifier Cross-reference Manager shall return in an empty (not present) value in the first
1450 repetition of field PID-5-Patient Name, and shall return a second repetition of field *PID-5-Patient Name* in which the only populated component is Component 7 (Name Type Code).

Component 7 of repetition 2 shall contain a value of S (Coded Pseudo-name to assure anonymity). All other components of repetition 2 shall be empty (not present).

3.9.4.2.2.6 Patient Identifier Cross-reference Manager Actor Query Response Behavior

It is wholly the responsibility of the Patient Identifier Cross-reference Manager to perform the matching of patient identifiers based on the patient traits it receives. The information provided by the Patient Identifier Cross-reference Manager to Patient Identifier Cross-reference Consumer Actors is a list of cross-referenced identifiers in two or more of the domains managed by the cross-referencing Actor. The list of cross-references is not made available until the set of policies and processes for managing the cross-reference function have been completed. The policies of administering identities adopted by the cooperating domains are completely internal to the Patient Identifier Cross-reference Manager and are outside of the scope of this framework. Possible matches should not be communicated until the healthcare institution policies and processes embodied in the Patient Identifier Cross-reference Manager reach a positive matching decision.

The Patient Identifier Cross-reference Manager shall respond to the query request as described by the following 6 cases:

Case 1: The Patient Identifier Cross-reference Manager recognizes the specified Patient Identification Domain and Patient ID sent by the Patient Identifier Cross-reference Consumer in QPD-3, and corresponding identifiers exist for the specified patient in at least one of the domains requested in QPD-4 (one identifier per domain). (See Case 6 below for the required behavior if there are multiple identifiers recognized within a given Identifier Domain by the Patient Identifier Cross-reference Manager Actor.)

AA (application accept) is returned in MSA-1.

OK (data found, no errors) is returned in QAK-2.

A single PID segment is returned in which one repetition of *PID-3 Patient Identifier List* is populated for each of the domains, if any, that the Patient Identifier Cross-reference Manager did recognize in which a single identifier exists for the requested patient, not including the queried-for patient identifier that is returned in QPD-3.

Case 2: The Patient Identifier Cross-reference Manager recognizes the Patient Identification Domain and Patient ID sent in QPD-3, but no identifier exists for that patient in any of the domains sent in QPD-4.

AA (application accept) is returned in MSA-1.

NF (no data found, no errors) is returned in QAK-2.

No PID segment is returned.

Case 3: The Patient Identifier Cross-reference Manager recognizes the specified Patient Identification Domain sent in the fourth component of QPD-3, but does not recognize the Patient ID sent in the first component of QPD-3.

AE (application error) is returned in MSA-1 and in QAK-2.

An ERR segment is returned in which the components of *ERR-2-Error Location* are valued as follows.

COMP #	COMPONENT NAME	VALUE
1	Segment ID	QPD
2	Sequence	1
3	Field Position	3
4	Field Repetition	1
5	Component Number	1
6	Sub-Component Number	*(empty)*

1495   As specified by HL7, *ERR-2.6-Sub-Component Number* is not valued because we are referring to the entire fourth component of field QPD-3.

ERR-3-HL7 Error Code is populated with the error condition code **204** (unknown key identifier). Together with the values in ERR-2, this signifies that the Patient Identifier Cross-reference Manager did not recognize the value in the first component of QPD-3.

1500   **Case 4**: The Patient Identifier Cross-reference Manager does not recognize the Patient Identification Domain of the identifier sent in QPD-3.

AE (application error) is returned in MSA-1 and in QAK-2.

An ERR segment is returned in which the components of *ERR-2-Error Location* are valued as follows.

1505

COMP #	COMPONENT NAME	VALUE
1	Segment ID	QPD
2	Sequence	1
3	Field Position	3
4	Field Repetition	1
5	Component Number	4
6	Sub-Component Number	*(empty)*

As specified by HL7, *ERR-2.6-Sub-Component Number* is not valued because we are referring to the entire fourth component of field QPD-3.

ERR-3-HL7 Error Code is populated with the error condition code **204** (unknown key identifier).
1510   Together with the values in ERR-2, this signifies that the Patient Identifier Cross-reference Manager did not recognize the value in the fourth component of QPD-3.

Case 5: The Patient Identifier Cross-reference Manager does not recognize one or more of the Patient Identification Domains for which an identifier has been requested.

AE (application error) is returned in MSA-1 and in QAK-2.

For one domain that was not recognized, an ERR segment is returned in which the components of *ERR-2-Error Location* are valued as indicated below.

COMP #	COMPONENT NAME	VALUE
1	Segment ID	QPD
2	Sequence	1
3	Field Position	4
4	Field Repetition	*(see below)*
5	Component Number	*(empty)*
6	Sub-Component Number	*(empty)*

As specified by HL7, *ERR-2.5-Component Number* and *ERR-2.6-Sub-Component Number* are not valued because we are referring to the entire field QPD-4.

ERR-3-HL7 Error Code is populated with the error condition code **204** (unknown key identifier). Together with the values in ERR-2, this signifies that the Patient Identifier Cross-reference Manager did not recognize the domain for the occurrence of *QPD-4-What Domains Returned* whose ordinal number is returned as an integer in ERR-2.4.

Case 6: The Patient Identifier Cross-reference Manager recognizes the specified Patient Identification Domain and Patient ID sent by the Patient Identifier Cross-reference Consumer in QPD-3, and corresponding identifiers exist for the specified patient in at least one of the domains requested in QPD-4, and there are multiple identifiers within at least one of the requested domains.

AA (application accept) is returned in MSA-1.

OK (data found, no errors) is returned in QAK-2.

A single PID segment is returned in which one repetition of *PID-3-Patient Identifier List* is populated for each of the identifiers, not including the queried-for patient identifier that is returned in QPD-3. If the Patient Identifier Cross-reference Manager chooses to return multiple identifiers associated with the same domain, it shall return these identifiers grouped in successive repetitions within the *PID-3-Patient Identifier List*.

3.9.4.2.3 Expected Actions

The Patient Identifier Cross-reference Consumer will use the list of patient identifier aliases provided by the Patient Identifier Cross-reference Manager to perform the functions for which it requested the list.

In the case where the returned list of identifiers contains multiple identifiers for a single domain, the Patient Identifier Cross-reference Consumer shall either use ALL of the multiple identifiers from the given domain or it shall ignore ALL of the multiple identifiers from the given domain.

This allows Patient Identifier Cross-reference Consumers capable of handling multiple identities for a single patient within a single domain (i.e., those that can correctly aggregate the

information associated with the different identifiers) to do so. For those Patient Identifier Cross-reference Consumers not capable of handling this situation, ignoring the entire list of different identifiers prevents the Consumer from presenting incomplete data.

3.9.5 Security Considerations

3.9.5.1 Audit Record Considerations

The PIX Query Transaction is a Query Information event as defined in Table 3.20.4.1.1.1-1 with the following exceptions:

3.9.5.1.1 Patient Identifier Cross-reference Consumer audit message:

	Field Name	Opt	Value Constraints
Event **AuditMessage/** **EventIdentification**	EventID	M	EV(110112, DCM, "Query")
	EventActionCode	M	"E" (Execute)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-9", "IHE Transactions", "PIX Query")
Source (Patient Identifier Cross-reference Consumer) (1)			
Human Requestor (0..n)			
Destination (Patient Identifier Cross-reference Manager) (1)			
Audit Source (Patient Identity Cross-reference Consumer) (1)			
Patient (0..n)			
Query Parameters (1)			

Where:

	Field Name	Opt	Value Constraints
Source **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Identifier Cross-reference Consumer Actor facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

1555

	Field Name	Opt	Value Constraints
Human **Requestor** **(if known)** **AuditMessage/** **ActiveParticipant**	UserID	M	Identity of the human that initiated the transaction.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	U	Access Control role(s) the user holds that allows this transaction.
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*

Destination AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identifier Cross-reference Manager facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Audit Source AuditMessage/ AuditSourceIdentification	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*

Query Parameters (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"2" (system object)
	ParticipantObjectTypeCodeRole	M	"24" (query)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	M	EV("ITI-9", "IHE Transactions", "PIX Query")
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	*U*	*not specialized*
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	M	The complete query message (including MSH and QPD segments), base64 encoded.
	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

3.9.5.1.2 Patient Identifier Cross-reference Manager audit message:

1560

	Field Name	Opt	Value Constraints
Event AuditMessage/ EventIdentification	EventID	M	EV(110112, DCM, "Query")
	EventActionCode	M	"E" (Execute)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-9", "IHE Transactions", "PIX Query")
Source (Patient Identifier Cross-reference Manager) (1)			

Destination (Patient Identifier Cross-reference Consumer) (1)
Audit Source (Patient Identifier Cross-reference Manager) (1)
Patient (0..n)
Query Parameters (1)

Where:

Source **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Identifier Cross-reference Consumer Actor facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Destination **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Identifier Cross-reference Manager facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Audit Source **AuditMessage/** **AuditSourceIdentification**	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient **(AuditMessage/** **ParticipantObjectIdentification)**	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*

1565

Query Parameters (AuditMessage/ ParticipantObjectIdentifi cation)	ParticipantObjectTypeCode	M	"2" (system object)
	ParticipantObjectTypeCodeRole	M	"24" (query)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	M	EV("ITI-9", "IHE Transactions", "PIX Query")
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	*U*	*not specialized*
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	M	The complete query message (including MSH and QPD segments), base64 encoded.
	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

3.10 PIX Update Notification [ITI-10]

This section corresponds to transaction [ITI-10] of the IHE IT Infrastructure Technical
Framework. Transaction [ITI-10] is used by the Patient Identifier Cross-reference Consumer and
1570   Patient Identifier Cross-reference Manager Actors.

3.10.1 Scope

This transaction involves the Patient Identifier Cross-reference Manager providing notification of
updates to patient identifier cross-reference associations to Patient Identifier Cross-reference
Consumers that have registered (by configuration on the Cross-reference Manager) their interest
1575   in receiving such notifications. This transaction uses HL7's generic 'Update Person Information'
message to communicate this patient-centric information.

3.10.2 Use Case Roles
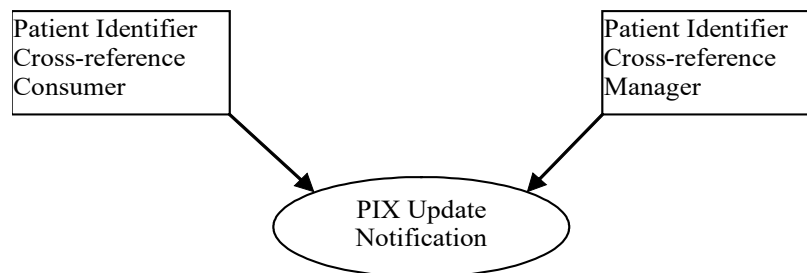
1580   **Actor:** Patient Identifier Cross-reference Manager

Role: It serves a well-defined set of Patient Identification Domains. The Patient Identifier Cross-reference Manager manages the cross-referencing of patient identifiers across Patient Identification Domains by providing a list of patient ID "aliases" via notification to a configured list of interested Patient Identifier Cross-reference Consumers.

1585   **Actor:** Patient Identifier Cross-reference Consumer

Role: Receives notifications from the Patient Identifier Cross-reference Manager of changes to patient ID aliases. Typically the Patient Identifier Cross-reference Consumer uses this information to maintain information links about patients in a different patient ID domain.

3.10.3 Referenced Standard

1590 HL7 Version 2.5, Chapter 2 – Control, Chapter 3 – Patient Administration

> Note: HL7 version 2.5 was selected for this transaction because it was considered the most stable version that contained the functionality required by transactions [ITI-9] and [ITI-10].

3.10.4 Interaction Diagram
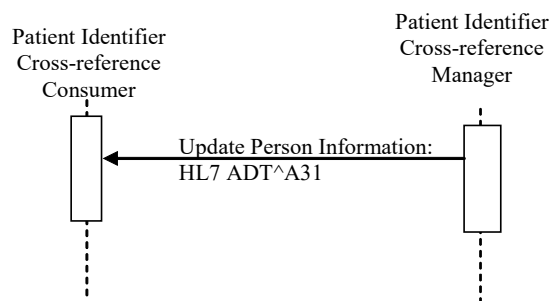
1595   **Figure 3.10-1: Update Person Information Sequence**

3.10.4.1 Update Person Information

3.10.4.1.1   Trigger Events

The Patient Identifier Cross-reference Manager shall notify a Patient Identifier Cross-reference Consumer when there is a change in a set of cross-referenced patient identifiers for any of the
1600 patient identifiers belonging to Patient Identifier Domains of interest to the consumer. The configuration of the domains of interest to a Patient Cross-reference Consumer is maintained by the Patient Cross-reference Manager.

Several notifications may have to be issued to communicate a single update to a set of cross-reference patient identifiers as required to reflect all the changes on the resulting sets of cross-
1605 reference patient Identifiers belonging to Patient Identifier Domains of interest to the Patient Identifier Cross-referencing Consumer.

The following HL7 trigger event will be used to update to the list of patient identifiers:

- A31 – Update Person Information

3.10.4.1.2   Message Semantics

1610 The PIX Update Notification transaction is conducted by the ADT^A31 message. The Patient Identifier Cross-reference Manager initiates this transaction whenever identifier list information is updated for a patient.

It is wholly the responsibility of the Patient Identifier Cross-reference Manager to perform the matching of patient identifiers based on the patient traits it receives. The information provided by the Patient Identifier Cross-reference Manager to Patient Identifier Cross-reference Consumers shall only contain a list of cross-referenced identifiers for the domains of interest as configured with the Patient Identifier Cross-reference Manager in two or more of the domains managed by the Patient Identifier Cross-reference Manager. Multiple notifications may need to be sent. For example:

Consumer CON_A is configured to receive update notifications for domains DOM_A and DOM_AD. Notifications are sent as follows:

- A PIX A01 feed is sent for a patient for DOM_A. The update notification shall contain the patient identifier and assigning authority for DOM_A.

- A PIX A01 feed is processed for DOM_AD. The Patient Identifier Cross-reference Manager cross references this patient with DOM_A. The update notification shall contain the patient identifier and assigning authority for DOM_A and DOM_AD.

- A PIX A08 feed is processed for DOM_AD changing the patient address. The Patient Identifier Cross-reference Manager cross references determines this patient is no longer the same patient as DOM_A. Two update notifications shall be sent. One containing the patient identifier and assigning authority for DOM_A. The other one containing the patient identifier and assigning authority for DOM_AD.

The list of cross-references is not made available until the set of policies and processes for managing the cross-reference function have been completed. The policies of administering identities adopted by the cooperating domains are completely internal to the Patient Identifier Cross-reference Manager and are outside of the scope of this standard. Possible matches should not be communicated until the healthcare institution policies and processes embodied in the Patient Identifier Cross-reference Manager reach a positive matching decision.

The Patient Identifier Cross-reference Manager configuration is expected to have configuration indicating which Consumers are interested in receiving the PIX Update Notification transactions. This configuration information shall include identification of the identity consumer systems interested in receiving notifications and, for each of those systems, a list of the patient identifier domains of interest. The Patient Identifier Cross-reference Manager should account for consumers interested in all domains.

The segments of the message listed in the table below are required. Other segments are optional.

Table 3.10-1: ADT Patient Administration Message

ADT	Patient Administration Message	Chapter in HL7 2.5
MSH	Message Header	2
EVN	Event Type	3
PID	Patient Identification	3
PV1	Patient Visit	3

Each message shall be acknowledged by the HL7 ACK message sent by the receiver of ADT message to its sender. See ITI TF-2x: C.2.3, "Acknowledgement Modes" for the definition and discussion of the ACK message.

3.10.4.1.2.1 MSH Segment

The MSH segment shall be constructed as defined in ITI TF-2x: C.2.2, "Message Control".

Field *MSH-9 Message Type* shall have all three components populated with a value. The first component shall have a value of ADT; the second component shall have the value of A31. The third component shall have a value of ADT_A05.

3.10.4.1.2.2 EVN Segment

See ITI TF-2x: C.2.4 for the list of all required and optional fields within the EVN segment.

3.10.4.1.2.3 PID Segment

The Patient Identifier Cross-reference Manager shall provide only those attributes within the PID segment that are required by the HL7 standard: *PID-3-Patient Identifier List* and *PID-5-Patient Name*.

The Patient Identifier Cross-reference Manager shall use the field *PID-3 Patient Identifier List* to convey the Patient IDs uniquely identifying the patient within each Patient Identification Domain for which a Patient ID exists for the specified patient. Each resulting ID returned in PID-3 shall include a fully qualified Assigning Authority component. In other words, the Assigning Authority component returned shall include ALL subcomponents (namespace ID, Universal ID, and Universal ID type).

To eliminate the issue of multiple name values between Patient Identifier Domains, the Patient Identifier Cross-reference Manager shall return a single space character in field *PID-5-Patient Name*.

A single PID segment is sent in which one repetition of *PID-3-Patient Identifier List* is populated for each of the identifiers in the notification. If the Patient Identifier Cross-reference Manager chooses to send multiple identifiers associated with the same domain, it shall return these identifiers grouped in successive repetitions within the *PID-3-Patient Identifier List*.

3.10.4.1.2.4 PV1 Segment

As is specified by the HL7 Standard, Version 2.5, the PV1 Segment is required. The required field *PV1-2-patient class* shall contain **N** (not applicable) to indicate the transmission of patient information outside the context of a visit or encounter. Other fields shall be left blank.

Table 3.10-2: IHE Profile – PV1 segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
2	1	IS	R	0004	00132	Patient Class

_____

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3.10.4.1.3   Expected Actions

The Patient Identifier Cross-reference Consumer, when it receives the ADT^A31 message, shall update its internal identifier information for the affected patient(s) in all domains in which it is interested whenever it receives updated identifier information that results in a change to the cross-referencing of a patient.

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In the case where the returned list of identifiers contains multiple identifiers for a single domain, the Patient Identifier Cross-reference Consumer shall either use ALL of the multiple identifiers from the given domain or it shall ignore ALL of the multiple identifiers from the given domain.

This allows Patient Identifier Cross-reference Consumers capable of handling multiple identities for a single patient within a single domain (i.e., those that can correctly aggregate the information associated with the different identifiers) to do so. For those Patient Identifier Cross-reference Consumers not capable of handling this situation, ignoring the entire list of different identifiers prevents the consumer from presenting incomplete data.

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3.10.5 Security Considerations

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3.10.5.1 Audit Record Considerations

The PIX Update Notification Transaction is a "Patient Record" event, as defined in Table 3.20.4.1.1.1-1 with the following exceptions:

3.10.5.1.1   Patient Identifier Cross-reference Manager audit message:

	Field Name	Opt	Value Constraints
Event **AuditMessage/** **EventIdentification**	EventID	M	EV(110110, DCM, "Patient Record")
	EventActionCode	M	"R" (Read)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-10", "IHE Transactions", "PIX Update Notification")
Source (Patient Identifier Cross-reference Manager) (1)			
Human Requestor (0..n)			
Destination (Patient Identifier Cross-reference Consumer) (1)			
Audit Source (Patient Identifier Cross-reference Manager) (1)			
Patient IDs (1..n) (represents the components of PID-3)			

1700   Where:

	Field Name	Opt	Value Constraints
Source **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Identifier Cross-reference Manager facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.

_____

	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Human Requestor (if known) **AuditMessage/** **ActiveParticipant**	UserID	M	Identity of the human that initiated the transaction.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	U	Access Control role(s) the user holds that allows this transaction.
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*

Destination **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Identifier Cross-reference Consumer facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Audit Source **AuditMessage/** **AuditSourceIdentification**	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient IDs **(AuditMessage/** **ParticipantObjectIdentification)**	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	M	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	the patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*

	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

1705   ### 3.10.5.1.2   Patient Identifier Cross-reference Consumer audit message:

	Field Name	Opt	Value Constraints
Event AuditMessage/ EventIdentification	EventID	M	EV(110110, DCM, "Patient Record")
	EventActionCode	M	"U" (update)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-10", "IHE Transactions", "PIX Update Notification")

Source (Patient Identifier Cross-reference Manager) (1)
Destination (Patient Identifier Cross-reference Consumer) (1)
Audit Source (Patient Identifier Cross-reference Consumer) (1)
Patient IDs (1..n) (represents the components of PID-3)

Where:

	Field Name	Opt	Value Constraints
Source AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identifier Cross-reference Manager facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

	Field Name	Opt	Value Constraints
Destination AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Identifier Cross-reference Consumer facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Audit Source AuditMessage/ AuditSourceIdentification	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient IDs (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	the patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

1710

3.11 Retrieve Specific Information for Display [ITI-11]

This section corresponds to transaction [ITI-11] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-11] is used by the Information Source and Display Actors.

3.11.1 Scope

1715 This transaction involves the query of information for presentation purposes. This may occur when a user attempts to lookup information associated with certain patient that is stored on a different system. Note that the retrieved information is always related to a well-identified patient (Patient ID), but its content, although of a specific type (lab summary, or radiology summary, list of allergies), is generally dynamic (i.e., retrieving the same type of specific information at a

1720 different point in time is likely to result in different content); for example, a list of allergies may have been updated between two requests.

To support a wide range of display capabilities, the information provided is formatted into well-formed XHTML. Such formatting shall be done using XHTML Basic and W3C HTML Compatibility Guidelines provided in the Appendix C of the W3C XHTML 1.0

1725 Recommendation.

3.11.2 Use Case Roles
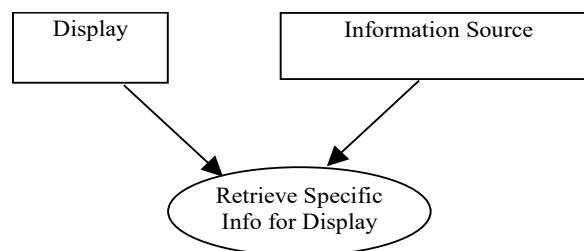
1730 **Actor:** Display

Role: A system that requests specific information for display, and displays it.

Actor: Information Source

Role: A system that provides specific information in response to the request from the Display Actor, in a presentation-ready format.

3.11.3 Referenced Standards

RFC1738, Uniform Resource Locators (URL), December 1994, http://www.faqs.org/rfcs/rfc1738.html

RFC2616 HyperText Transfer Protocol HTTP/1.1

Extensible Markup Language (XML) 1.0 (Second Edition). W3C Recommendation 6 October 2000. http://www.w3.org/TR/REC-xml.

Web Services Description Language (WSDL) 1.1. W3C Note 15 March 2001. http://www.w3.org/TR/wsdl.

XHTML™ 1.0 The Extensible HyperText Markup Language (Second Edition).A Reformulation of HTML 4 in XML 1.0. W3C Recommendation 26 January 2000, revised 1 August 2002. http://www.w3.org/TR/xhtml1.

XHTML™ Basic. W3C Recommendation 19 December 2000. http://www.w3.org/TR/xhtm-basic.

http://www.w3.org/TR/xhtml-basic Interaction Diagram
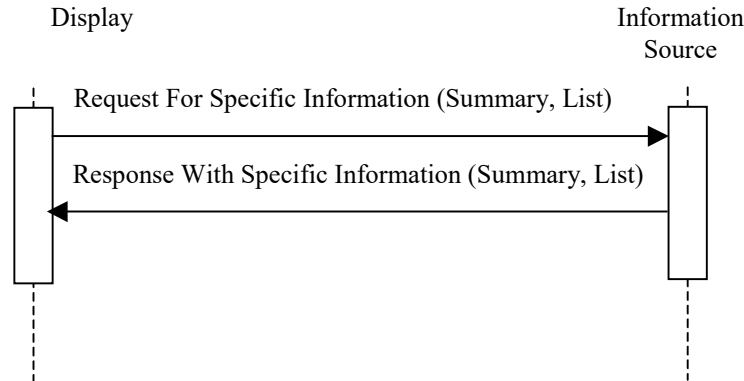
Figure 3.11-1: Request For Specific Information – Summary sequence

3.11.3.1 Request For Specific Information - Summary

3.11.3.1.1　Trigger Events

The following event will trigger a Request for Specific Information:

- User of the Display needs to review a summary list of information/ reports that are part of a patient's clinical history (i.e., summary of lab reports, summary of radiology exam reports, etc.) with the intent of selecting a specific item off the list for subsequent retrieval as a persistent object via the Retrieve Document for Display Transaction

3.11.3.1.2 Message Semantics

The Retrieve Specific Information for Display transaction is performed by the invocation of a
web service. The Display shall generate a web service request whenever a user needs to review
the information stored as part of a patient's clinical history on the Information Source Actor.

To specify the type of information that needs to be returned, a web service request shall include
the following parameters (keys) to filter the subset of information (see Table 3.11.4-1). All
parameter names and values (see Table 3.11.4-2) are case-sensitive.

Table 3.11.4-1: Web Service Request Keys

Parameter Name	REQ	Description	Notes
requestType	R	requestType specifies what type of information shall be retrieved. This parameter shall always be valued.	See Table 3.11.4-2 for the list of possible values.
patientID	R	This attribute identifies the subject of the results being queried for. Its value shall include identification of assigning authority.	PatientID value shall be formatted as HL7 CX data type (including assigning authority) according to the requirements specified for the Patient Identity Feed transaction (see Section 3.8.4.1.2.3)
lowerDateTime	O	Used to constrain the earliest date/time of creation of information.	This value shall be encoded in the XML primitive dateTime format.
upperDateTime	O	Used to constrain the latest date/time of creation of information.	This value shall be encoded in the XML primitive dateTime format.
mostRecentResults	R	The numeric value that indicates the number of most recent results to be included into the response, i.e., 1 indicates to provide the latest result.	Value of 0 indicates that all available results shall be returned.

Table 3.11.4-2: Web Service Request Types

requestType value	Description
SUMMARY	Summary of all reports known to the Information Source
SUMMARY-RADIOLOGY	Summary of radiology reports
SUMMARY-CARDIOLOGY	Summary of cardiology reports
SUMMARY-LABORATORY	Summary of laboratory reports
SUMMARY-SURGERY	Summary of surgery reports
SUMMARY-EMERGENCY	Summary of emergency reports
SUMMARY-DISCHARGE	Summary of discharge reports
SUMMARY-ICU	Summary of intensive care reports
SUMMARY-RX	Summary of Prescriptions

Note: parameter values that contain reserved characters need to be encoded using %<hex><hex> notation. Reserved
characters include slash (/, encode as %2f) and ampersand (&, encode as %26).

Formal definition of the web service in WSDL is provided in ITI TF-2x: Appendix A.

The only binding required for both the Display and Information Source is the binding to the HTTP-GET. In this binding the sample message will be formatted as follows:

http://<location>/IHERetrieveSummaryInfo?requestType=SUMMARY&patientID=99998410^^
^%26www.mlhlife.com%26DNS &lowerDateTime=2003-01-
1775   01T00:00:00&upperDateTime=2003-01-01T23:59:59&mostRecentResults=1

The <location> part of the URL is configurable by the implementation, and must contain the host name, an optional port address, and may be followed by an optional path. The path if present may not contain a '?' character. The remainder of the URL, including IHERetrieveSummaryInfo and the following request parameters are specified by the WSDL and may not be changed.

1780   More specifically, using the definitions from RFC1738, the <location> part of the URL must match the production for location from the figure below:

```
location        = hostport [ "/" hpath ]

hostport        = host [ ":" port ]
host            = hostname | hostnumber
hostname        = *[ domainlabel "." ] toplabel
domainlabel     = alphadigit | alphadigit *[ alphadigit | "-" ] alphadigit
toplabel        = alpha | alpha *[ alphadigit | "-" ] alphadigit
alphadigit      = alpha | digit
hostnumber      = digits "." digits "." digits "." digits
port            = digits

hpath           = hsegment *[ "/" hsegment ]
hsegment        = *[ uchar | ";" | ":" | "@" | "&" | "=" ]
lowalpha        = "a" | "b" | "c" | "d" | "e" | "f" | "g" | "h" |
                  "i" | "j" | "k" | "l" | "m" | "n" | "o" | "p" |
                  "q" | "r" | "s" | "t" | "u" | "v" | "w" | "x" |
                  "y" | "z"
hialpha         = "A" | "B" | "C" | "D" | "E" | "F" | "G" | "H" | "I" |
                  "J" | "K" | "L" | "M" | "N" | "O" | "P" | "Q" | "R" |
                  "S" | "T" | "U" | "V" | "W" | "X" | "Y" | "Z"

alpha           = lowalpha | hialpha
digit           = "0" | "1" | "2" | "3" | "4" | "5" | "6" | "7" |
                  "8" | "9"
safe            = "$" | "-" | "_" | "." | "+"
extra           = "!" | "*" | "'" | "(" | ")" | ","

hex             = digit | "A" | "B" | "C" | "D" | "E" | "F" |
                  "a" | "b" | "c" | "d" | "e" | "f"
escape          = "%" hex

unreserved      = alpha | digit | safe | extra
uchar           = unreserved | escape
```

The following location values are legal according to this specification:

<location> value	Resulting URL
myhost	http://myhost/IHERetrieveSummaryInfo?…
myhost:8080	http://myhost:8080/IHERetrieveSummaryInfo?…
myhost/MyAspPageThatLooksLikeItCouldBeAFolder.aspx	http://myhost/MyAspPageThatLooksLikeItCouldBeAFolder.aspx/IHERetrieveSummaryInfo?…
myhost:8080/MyAspPageThatLooksLikeItCouldBeAFolder.aspx	http://myhost:8080/MyAspPageThatLooksLikeItCouldBeAFolder.aspx/IHERetrieveSummaryInfo?…
myhost/MyJspPage.jsp	http://myhost/MyJspPage.jsp/IHERetrieveSummaryInfo?…
myhost:8080/MyJspPageThatLooksLikeItCouldBeAFolder.jsp	http://myhost/MyJspPage.jsp/ IHERetrieveSummaryInfo?…

The following location values are not legal:

1820

<location> value	Resulting URL
My+Computer	'+' is not a legal character in a host name.
myhost:99999	99999 is not a valid port.
myhost/myPath.jsp?request=	'?' is not valid in a path.

In addition, the Display shall support the following field of the HTTP request:

Table 3.11.4-3: HTTP Request and Response Fields

HTTP Field	REQ	Description	Values
Accept-Language	O	This field restricts the set of natural languages that are preferred as a response to the request.	Any valid value according to RFC2616

1825   The Information Source shall support the following field of the HTTP response.

Table 3.11.4-4: HTTP Response Fields

HTTP Field	REQ	Description	Values
Expires	R	This field gives the date/time after which the response is considered stale	Shall be 0. This is now deprecated usage, but it is the widely supported means of specifying no caching.
Cache-Control	R	This field indicates that this response should not be cached.	Shall be no-cache

If necessary, the Display may perform the request to the web service utilizing HTTPS protocol.

Information Source Actors may return HTTP redirect responses (responses with values of 301, 1830   302, 303 or 307) in response to a request. Display Actors can expect to receive an error response,

or the data requested, or a request to look elsewhere for the data. A Display must follow redirects, but if a loop is detected, it may report an error.

3.11.3.1.3   Expected Actions

1835 Upon reception of the Request for Specific Information, the Information Source shall parse the request and if there are no errors, return the Response with Specific Information as specified in Section 3.11.4.2, and HTTP response code 200 - OK.

To specify the type of information that needs to be processed, an Information Source shall support the following parameters (keys) to filter the subset of information (see Table 3.11.4-5).

Table 3.11.4-5: Web Service Request Keys

Parameter Name	REQ	Description	Notes
requestType	R	requestType specifies what type of information shall be retrieved. This parameter shall always be valued.	See Table 3.11.4-2 for the list of possible values.
patientID	R	This attribute identifies the subject of the results being queried for. Its value shall include identification of assigning authority.	PatientID value shall be formatted as HL7 CX data type (including assigning authority) according to the requirements specified for the Patient Identity Feed transaction (see Section 3.8.4.1.2.3)
lowerDateTime	R	Used to constrain the earliest date/time of creation of information.	This value shall be encoded in the XML primitive dateTime format.
upperDateTime	R	Used to constrain the latest date/time of creation of information.	This value shall be encoded in the XML primitive dateTime format.
mostRecentResults	R	The numeric value that indicates the number of most recent results to be included into the response, i.e., 1 indicates to provide the latest result.	Value of 0 indicates that all available results shall be returned.

1840

If the requestType specified is not supported, the Information Source shall return HTTP response-code 404 (not found) with the suggested reason-phrase "requestType not supported". If the Information Source is not able to format the document in any content types listed in the 'Accept' field, it shall return HTTP response code 406 – Not Acceptable.

1845 If the Patient ID specified by the Display is not known to the Information Source Actor, it shall return HTTP response-code 404 (not found) with the suggested reason-phrase "Patient ID not found". If the Display provides the Patient ID from a different domain than the one the Information Source belongs to, and the Information Source is grouped with the Patient ID Consumer Actor, it may attempt to obtain a mapping of the provided Patient ID into its domain 1850 before responding.

Note: Other HTTP response codes may be returned by the Information Source Actor, indicating conditions outside of the scope of this profile, for example, 401 – Authentication Failed might be returned if Information Source is grouped with the Kerberized Server Actor.

Note: It is recommended that the Information Source complement the returned error code with a human readable 1855 description of the error condition.

If an error condition cannot be automatically recovered, at a minimum, the error should be displayed to the user by the Display Actor.

1860 If lowerDateTime and/or upperDateTime parameters are specified, they shall define the lower and/or upper inclusive boundary of the temporal range in which returned information should have been created. The value of the mostRecentResults parameter shall be interpreted within such specified date/time range.

3.11.3.2 Response with Specific Information - Summary

3.11.3.2.1 Trigger Events

1865 This message is sent by the Information Source in response to the Request For Specific Information web service request.

3.11.3.2.2 Message Semantics

Information Source shall support at least one of the values of the requestType parameter specified in Table 3.11.4-2.

1870 The Information Source shall set an expiration of zero to ensure no caching. The message shall be formatted using XHTML Basic and W3C HTML Compatibility Guidelines provided in the Appendix C of the W3C XHTML 1.0 Recommendation.

The Display may request the Information Source to provide any specific information including a summary of reports of different types pertaining to a particular patient. The exact content of the summary is determined by the Information Source and may be regulated by the institution
1875 policy. For example, it may contain the hyperlink to a persistent object so that it can be retrieved by using the Retrieve Document for Display [ITI-12] transaction. In the case of retrieving a summary of documents (requestType of SUMMARY[-xx]), it is strongly recommended to include a link to the relevant documents, for each item of the summary. If present, the link will have to be formatted as a web service request in accordance to the requirements in Section 3.12.
1880 It may also contain a hyperlink representing the invocation of the Request for Specific Information for display, as specified in this Section.

3.11.3.2.3 Expected Actions

The Display shall render the received response for the user. It shall not assume that the content of the document may be meaningfully parsed beyond determination of XHTML tags necessary for
1885 accurate presentation of provided information.

When the summary responses include links to documents or other specific information, Information Source Actors are strongly encouraged to format them according to the requirements stated in Section 3.11 and 3.12, to facilitate retrieval of information from other information sources.

1890 **3.11.3.3 Request For Specific Information - List**

3.11.3.3.1   Trigger Events

The following event will trigger a Request for Specific Information:

- User of the Display needs to review a particular subset of information that is part of a patient's clinical history (i.e., lab report, radiology exam report, list of medications, etc.)
1895 that is stored on the Information Source system.

3.11.3.3.2   Message Semantics

The Retrieve Specific Information for Display transaction is performed by the invocation of a web service. The Display shall generate a web service request whenever a user needs to review the information stored as part of a patient's clinical history on the Information Source Actor.

1900 To specify the type of information to be returned, a web service request shall include the following parameters (keys) to filter the subset of information (see Table 3.11.4-7). All parameter names and values (see Table 3.11.4-7) are case-sensitive.

Table 3.11.4-6: Web Service Request Keys

Parameter Name	REQ	Description	Notes
requestType	R	requestType specifies what type of information shall be retrieved. This parameter shall always be valued.	See Table 3.11.4-7 for the list of possible values.
patientID	R	This attribute identifies the subject of the results being queried for. Its value shall include identification of assigning authority.	PatientID value shall be formatted as HL7 CX data type (including assigning authority) according to the requirements specified for the Patient Identity Feed transaction (see Section 3.8.4.1.2.3)

Table 3.11.4-7: Web Service Request Types

requestType value	Description
LIST-ALLERGIES	List of allergies and adverse reactions for a patient known to the Information Source
LIST-MEDS	List of medications currently taken by or administered to a patient

1905

Formal definition of the web service in WSDL is provided in the ITI TF-2x: Appendix A.

The only binding required for both Display and Information Source is the binding to the HTTP-GET. In this binding the sample message will be formatted as follows:

http://<location>/IHERetrieveListInfo?requestType=LIST-
1910 MEDS&patientID=99998410^^^%26www.mlhlife.com%26DNS

The <location> part of the URL is configurable by the implementation, and must contain the host name, an optional port address, and may be followed by an optional path. The path if present may not contain a '?' character. The remainder of the URL, including IHERetrieveListInfo and

the following request parameters are specified by the WSDL and may not be changed. See the
discussion about location in Section 3.11.4.1.2 Message Semantics above.

In addition, the Display shall support the following field of the HTTP request:

Table 3.11.4-8: HTTP Request and Response Fields

HTTP Field	REQ	Description	Values
Accept-Language	O	This field restricts the set of natural languages that are preferred as a response to the request.	Any valid value according to RFC2616

The Information Source shall support the following field of the HTTP response.

Table 3.11.4-9: HTTP Request Fields

HTTP Field	REQ	Description	Values
Expires	R	This field gives the date/time after which the response is considered stale	Shall be 0. This is now deprecated usage, but it is the widely supported means of specifying no caching.
Cache-Control	R	This field indicates that this response should not be cached.	Shall be no-cache

If necessary, the Display may perform the request to the web service utilizing HTTPS protocol.

Information Source Actors may return HTTP redirect responses (responses with values of 301, 302, 303 or 307) in response to a request. Display Actors can expect to receive an error response, or the data requested, or a request to look elsewhere for the data. A Display must follow redirects, but if a loop is detected, it may report an error.

3.11.3.3.3   Expected Actions

Upon reception of the Request for Specific Information, the Information Source shall parse the request and if there are no errors, shall return the Response with Specific Information as specified in Section 3.11.4.2, and HTTP response code 200 - OK.

If the requestType specified is not supported, the Information Source shall return HTTP response-code 404 (not found) with the suggested reason-phrase "requestType not supported". If the Information Source is not able to format the document in any content types listed in the 'Accept' field, it shall return HTTP response code 406 – Not Acceptable.

If the Patient ID specified by the Display is not known to the Information Source Actor, it shall return HTTP response-code 404 (not found) with the suggested reason-phrase "Patient ID not found". If the Display provides the Patient ID from a different domain than the one the Information Source belongs to, and the Information Source is grouped with the Patient ID Consumer Actor, it may attempt to obtain a mapping of the provided Patient ID into its domain before responding.

1940

Note: Other HTTP response codes may be returned by the Information Source Actor, indicating conditions outside of the scope of this profile, for example, 401 – Authentication Failed might be returned if Information Source is grouped with the Kerberized Server Actor.

Note: It is recommended that the Information Source complement returned error code with a human readable description of the error condition.

1945 If an error condition cannot be automatically recovered, at a minimum, the error should be displayed to the user by the Display Actor.

3.11.3.4 Response with Specific Information - List

3.11.3.4.1 Trigger Events

This message is sent by the Information Source in response to the Request For Specific
1950 Information web service request.

3.11.3.4.2 Message Semantics

Information Source shall support at least one of the values of the requestType parameter specified in Table 3.11.4-7.

The Information Source shall set an expiration of zero to ensure no caching. The message shall
1955 be formatted using XHTML Basic and W3C HTML Compatibility Guidelines provided in the Appendix C of the W3C XHTML 1.0 Recommendation.

The Display may request the Information Source to provide a list of information items (pertaining to a particular patient) that the Information Source has presently recorded. The exact content of the list is determined by the Information Source Actor.

1960 The Display shall not use the lowerDateTime, upperDateTime or mostRecentResults parameters in a query. The Information Source shall ignore them if they are specified.

3.11.3.4.3 Expected Actions

The Display shall render the received response for the user. It shall not assume that the content of the document may be meaningfully parsed beyond determination of XHTML tags necessary for
1965 accurate presentation of provided information.

3.12 Retrieve Document for Display [ITI-12]

This section corresponds to transaction [ITI-12] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-12] is used by the Information Source and Display Actors.

3.12.1 Scope

1970   This transaction involves the retrieval of a document (persistent object) for presentation purposes. The uniquely identifiable persistent object means that retrieving the same document instance at a different point in time will provide the same semantics for its presented content. The information content of the document is immutable even if the presentation of such content is provided with the use of different formats, stylesheets, etc.

1975   **3.12.2 Use Case Roles**
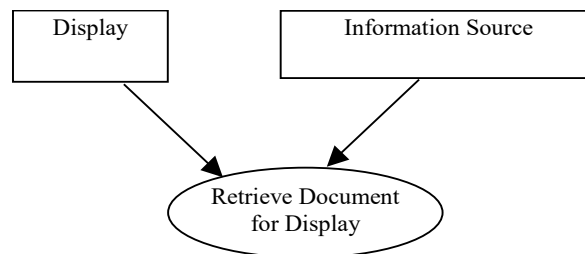
Actor: Display

1980   **Role:** A system that requests a document/object for display, and displays it.

Actor: Information Source

Role: A system that provides specific information in response to the request from the Display Actor, in a presentation-ready format.

3.12.3 Referenced Standards

1985   RFC2616 HyperText Transfer Protocol HTTP/1.1

Extensible Markup Language (XML) 1.0 (Second Edition). W3C Recommendation 6 October 2000. http://www.w3.org/TR/REC-xml.

Web Services Description Language (WSDL) 1.1. W3C Note 15 March 2001. http://www.w3.org/TR/wsdl.

1990 ## 3.12.4 Interaction Diagram
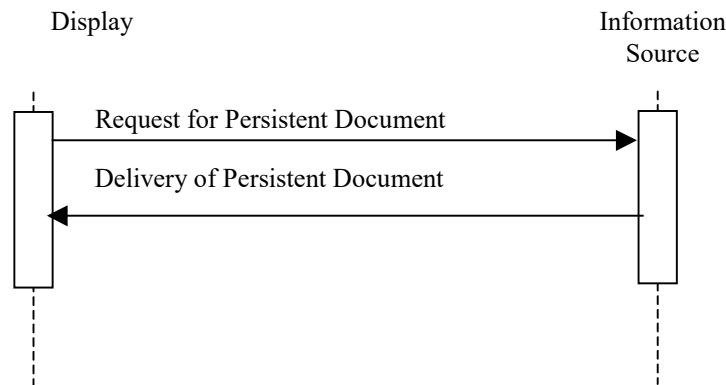
Figure 3.12-1: Request for Persistent Document Sequence

3.12.4.1 Request for Persistent Document

3.12.4.1.1   Trigger Events

1995 The request for a document is triggered when a user of the Display needs to review a particular document that is stored by the Information Source Actor.

3.12.4.1.2   Message Semantics

The Retrieve Document for Display transaction is performed by the invocation of a web service. The Display shall generate the web service request whenever a user needs to review the
2000 document stored as part of a patient's clinical history on the Information Source Actor.

The web service request shall include the following parameters (keys) to identify the document to be returned and its format (see Table 3.12.4-1). All parameter names and values are case-sensitive.

Table 3.12.4-1: Query Keys

Parameter Name	REQ	Description	Values
requestType	R	This parameter is required to have a value of DOCUMENT.	DOCUMENT
documentUID	R	Identifies document's UID as known to both actors.	This value shall be a properly defined Object identifier (OID) as specified in ITI TF-2x: Appendix B.
preferredContentType	R	This parameter is required to identify the preferred format the document is to be provided in (as MIME content type).	Display may specify one of the following formats: image/jpeg application/x-hl7-cda-level-one+xml (see note) application/pdf (see note)

2005 Note: see IANA registry for details about hl7-cda-level-one and PDF, such as version. Applications creating PDF may use this MIME type for other versions of PDF up to 1.3. Receivers shall support document encoded in this version and previous versions.

Note: see HL7 CDA®5 framework release 1.0 for details about application/x-hl7-cda-level-one+xml.

2010 Formal definition of the web service in WSDL is provided in ITI TF-2x: Appendix A.

The only binding required for both the Display and Information Source is the binding to the HTTP-GET. In this binding the sample message will be formatted as follows:

http://<location>/IHERetrieveDocument?requestType=DOCUMENT&documentUID=1.2.3&preferredContentType=application%2fpdf

2015 The <location> part of the URL is configurable by the implementation, and must contain the host name, an optional port address, and may be followed by an optional path. The path if present may not contain a '?' character. The remainder of the URL, including IHERetrieveDocument and the following request parameters are specified by the WSDL and may not be changed. See the discussion about location in Section 3.11.4.1.2 Message Semantics above.

2020 In addition, the Display shall support the following fields of the HTTP request:

Table 3.12.4-3: HTTP Request and Response Fields

HTTP Field	REQ	Description	Values
Accept	O	This field may be used to specify certain media types which are acceptable for the response	At least one of the following values: image/jpeg application/x-hl7-cda-level-one+xml application/pdf */* Other values may be included as well
Accept-Language	O	This field is similar to Accept, but restricts the set of natural languages that are preferred as a response to the request.	Any valid value according to RFC2616
Expires	R	This field gives the date/time after which the response is considered stale	Any valid value according to RFC2616, or 0

The Information Source shall support the following field of the HTTP response.

Table 3.12.4-4: HTTP Response Fields

HTTP Field	REQ	Description	Values
Expires	R	This field gives the date/time after which the response is considered stale	Any valid value according to RFC2616, or 0

2025 The Display may provide list of content types it supports in the HTTP Accept field. If the HTTP Accept Field is absent, it means that any content type is acceptable by the Display Actor.

---

[5] CDA is the registered trademark of Health Level Seven International.

The preferredContentType parameter shall specify the content type desired by the Display Actor. The value of the preferredContentType parameter of the request shall be one of the values from the Table 3.12.4-1 and shall not contradict values specified in the HTTP Accept field.

2030   The Information Source shall provide info in preferredContentType if capable, otherwise it shall only use a type specified in the Accept Field as appropriate given the information to be returned.

If necessary, the Display may perform the request to the web service utilizing HTTPS protocol.

Information Source Actors may return HTTP redirect responses (responses with values of 301, 302, 303 or 307) in response to a request. Display Actors can expect to receive an error response,
2035   or the data requested, or a request to look elsewhere for the data. A Display must follow redirects, but if a loop is detected, it may report an error.

3.12.4.1.3   Expected Actions

Upon reception of the Request for Specific Information, the Information Source shall parse the request and shall return the retrieved document as specified in Section 3.12.4.2, and HTTP
2040   response code 200 - OK.

If the requestType specified is a not a legal value according to this profile, the Information Source shall return HTTP response-code 403 (forbidden) with the suggested reason-phrase "requestType not supported".

If the Information Source is not able to format the document in any content types listed in the
2045   'Accept' field, it shall return HTTP response code 406 – Not Acceptable.

If the specified documentUID is not known to the Information Source Actor, it shall return HTTP response-code 404 (not found) with the suggested reason-phrase "Document UID not found".

If the documentUID, preferredContentType or requestType parameters are missing, the
2050   Information Source shall return HTTP response code 400 - Bad Request.

If the documentUID or preferredContentType parameters are malformed, the Information Source shall return HTTP response code 400 - Bad Request.

If the specified preferredContentType is not consistent with the setting of the HTTP Accept field, the Information Source shall return HTTP response code 400 – Bad Request.

2055   Note: Other HTTP response codes may be returned by the Information Source Actor, indicating conditions outside of the scope of this profile, for example, 401 – Authentication Failed might be returned if Information Source is grouped with the Kerberized Server Actor.

        Note: It is recommended that the Information Source complement returned error code with a human readable description of the error condition.

2060   If an error condition cannot be automatically recovered, at a minimum, the error should be displayed to the user by the Display Actor.

3.12.4.2 Delivery of Persistent Document

3.12.4.2.1 Trigger Events

2065 The Delivery of Persistent Document message is the transmission of the requested document in specified format from the Information Source to the Display. This transmission will happen if such document, identified by the documentUID parameter in the request, has been successfully located by the Information Source Actor.

3.12.4.2.2 Message Semantics

2070 In response to the request from the Display Actor, the Information Source shall format the document according to the preferredContentType specified, and return it in the HTTP response. See Section 3.12.4.1.2 for a discussion of the rules related to preferredContentType.

The Information Source shall maintain global uniqueness of object identifiers.

The Information Source shall set an expiration date compatible with the policies associated with the possible removal of instances of persistent documents (no more than a week).

2075 #### 3.12.4.2.3 Expected Actions

The Display shall render the received document for the user.

3.13 Follow Context [ITI-13]

This section corresponds to transaction [ITI-13] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-13] is used by the Patient Context Participant, User Context
2080 Participant and Context Manager Actors.

3.13.1 Scope

This transaction allows the Context Manager to force other context participant actors to synchronize based on the new context values.

This transaction is composed of multiple methods as defined by the *HL7 Context Management*
2085 *"CCOW" Standard*. It has multiple phases consisting of surveying the participants, indication to them of final decision as to whether the context changed or not, and retrieval of the new context values by the context participants.

Each of the context participant actors follows a specific subject. The Patient Context Participant follows the patient subject and does not expect the user subject to be set in context. The User
2090 Context Participant follows the user subject.

The semantics of the methods used are defined in the documents *HL7 Context Management "CCOW" Standard: Component Technology Mapping: ActiveX* or *HL7 Context Management "CCOW" Standard: Component Technology Mapping: Web*, in conjunction with the *HL7 Context Management "CCOW" Standard: Subject Data Definitions* document. A Context
2095 Participant can implement either technology. The Context Manager shall support both technologies in order to interoperate with joining participants implementing the technology of their choice.

3.13.2 Use Case Roles
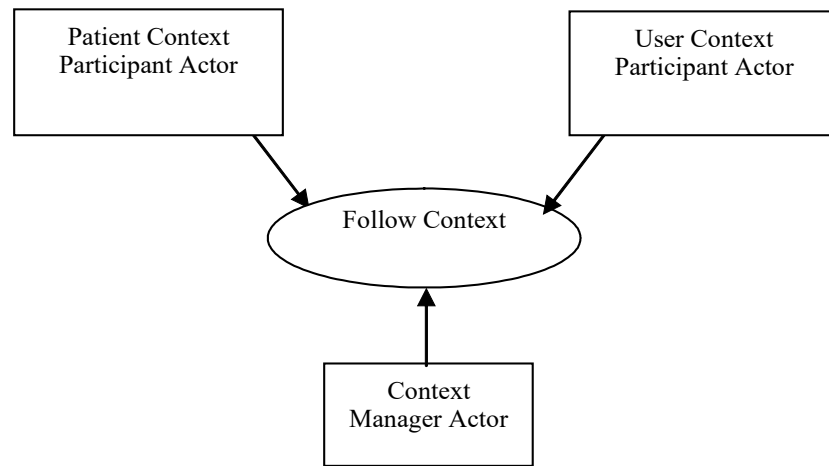
2100 **Actor:** Patient Context Participant

Role: Responds to context survey. Synchronizes display to new value(s) in the patient subject of a context it follows.

Actor: User Context Participant

Role: Responds to context survey. Synchronizes display to new value(s) in the patient subject of
2105 a context it follows.

Actor: Context Manager

Role: Conducts context survey, notifies the context participants of acceptance or cancellation of a change, and provides context values.

3.13.3 Referenced Standard

2110 HL7 Context Management "CCOW" Standard, Version 1.4

    Technology and Subject Independent Architecture

    Component Technology Mapping: ActiveX

    Component Technology Mapping: Web

    Subject Data Definitions

2115 ### 3.13.4 Interaction Diagram
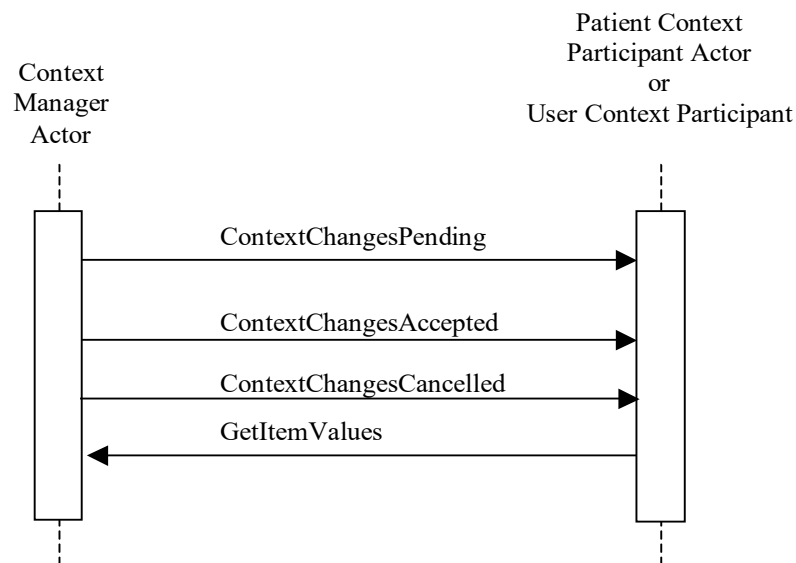
Figure 3.13-1: Follow Context – ContextChangesPending Method Sequence

3.13.4.1 Follow Context – ContextChangesPending Method

The ContextChangesPending method is invoked by the Context Manager to survey context
2120 participant actors with regard to acceptability of changes proposed by a Patient Context
Participant or Client Authentication Agent Actors.

3.13.4.1.1   Trigger Events

The ContextChangesPending method is triggered when the Context Manager receives invocation
of the EndContextChanges method.

2125 #### 3.13.4.1.2   Message Semantics

ContextChangesPending is defined as a method on the ContextParticipant interface and allows
the Context Manager to survey a context participant as to whether or not it is ready to follow the
changes in the context.

In the invocation of this method, the Context Manager shall provide the pending context's
2130 coupon.

Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-
Independent Architecture* document, Section 17.3.7.2, for a description of the parameters
associated with this method.

3.13.4.1.3   Expected Actions

2135 Performing the ContextChangesPending method, the Patient Context Participant or User Context
Participant makes a decision whether or not it can accept change of context (for example due to

operation being in progress). To reach this decision, it may invoke the GetItemValues method to inspect proposed new values in the context.

As a response, a Context Participant will respond with an indication to Accept or Conditionally Accept the proposed change. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.7.2, for the specifics of the response formation.

3.13.4.2 Follow Context – ContextChangesAccepted Method

The ContextChangesAccepted method is invoked by the Context Manager to confirm to the context participants that instigator of change accepted proposed changes.

3.13.4.2.1   Trigger Events

The ContextChangesAccepted method is triggered when the Context Manager receives invocation of the PublishChangesDecision method indicating that the changes have been accepted.

3.13.4.2.2   Message Semantics

ContextChangesAccepted is defined as a method on the ContextParticipant interface and allows the Context Manager to inform a context participant that the context value(s) have been changed.

In the invocation of this method, the Context Manager provides the new context coupon.

Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture*, Section 17.3.7.3 for a description of the parameters associated with this method.

3.13.4.2.3   Expected Actions

Performing the ContextChangesAccepted method, the Patient Context Participant or User Context Participant accepts new context and can subsequently retrieve new values using the GetItemValues method.

It responds with confirmation of success or an exception. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.7.3, for the specifics of the response formation.

3.13.4.3 Follow Context – ContextChangesCancelled Method

The ContextChangesCancelled method is invoked by the Context Manager to inform the context participants that instigator of change cancelled proposed changes.

3.13.4.3.1   Trigger Events

The ContextChangesCancelled method is triggered when the Context Manager receives invocation of the PublishChangesDecision method indicating that the changes have been cancelled.

3.13.4.3.2   Message Semantics

ContextChangesCancelled is defined as a method on the ContextParticipant interface and allows the Context Manager to inform a context participant that the pending context change has been cancelled.

In the invocation of this method, the Context Manager provides the pending context's coupon.

Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture*, Section 17.3.7.4 for a description of the parameters associated with this method.

3.13.4.3.3   Expected Actions

Performing the ContextChangesCancelled method, the Patient Context Participant or User Context Participant keeps its current context and destroys information about a pending context change that has been cancelled.

It responds with confirmation of success or an exception. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture* document, Section 17.3.7.4, for the specifics of the response formation.

3.13.4.4 Follow Context – GetItemValues Method

The GetItemValues method is invoked by a Context Participant to retrieve value(s) from the context it follows.

3.13.4.4.1   Trigger Events

The GetItemValues method is triggered by a Context Participant after it receives the context coupon as a result of the ContextChangesPending, ContextChangesAccepted or GetContextCoupon methods.

3.13.4.4.2   Message Semantics

GetItemValues is defined as a method on the ContextData or SecureContextData interface. If the context is not secured when a participant actor has joined the context (i.e., Patient Context Participant that only follows patient context), then this method should be invoked on the ContextData interface. Otherwise, it shall be invoked on the SecureContextData interface.

By invocation of this method without specification of the list of item names, a context participant retrieves values of all items presently set in context. It can also first invoke the GetItemNames method on the same interface (as specified in CCOW Standard) and use the list of items for selective retrieval of item values from the context via GetItemValues method. The Patient Context Participant needs to search through the resulting list of Patient.Id.IdList.<n> values until a recognized Patient Domain is found. The Patient Context Participant may choose to be grouped with a PIX Patient Identifier Cross-reference Consumer to handle the cases where no known Patient Domain is found in the resulting IdList.

Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture document*, Section 17.3.4.5, for the Patient Context Participant Actor,

and Section 17.3.13.2, for the User Context Participant, for a description of parameters associated with this method.

2210 **3.13.4.4.3   Expected Actions**

Context Manager shall return the values of requested items or an exception. Refer to the *HL7 Context Management "CCOW" Standard: Technology and Subject-Independent Architecture document*, Section 17.3.4.5, for the Patient Context Participant Actor, and Section 17.3.13.2, for the User Context Participant, for a description of the response issued by the Context Manager
2215 Actor.

3.14 Register Document Set [ITI-14]

This transaction has been retired in favor of Register Document Set-b [ITI-42].

3.15 Provide and Register Document Set [ITI-15]

This transaction has been retired in favor of Provide and Register Document Set-b [ITI-41].

2220 ## 3.16 Query Registry [ITI-16]

This transaction has been retired in favor of Registry Stored Query [ITI-18].

3.17 Retrieve Documents [ITI-17]

This transaction has been retired in favor of Retrieve Document Set [ITI-43].

3.18 Registry Stored Query [ITI-18]

2225 This section corresponds to transaction [ITI-18] of the IHE Technical Framework. Transaction [ITI-18] is used by the Document Registry and Document Consumer Actors.

3.18.1 Scope

The Registry Stored Query transaction supports a variety of pre-defined queries. Examples include the following:

2230 • Query for DocumentEntry objects by patient (Id) for a time interval on creation time and/or service time, by document type(s), by practice setting(s), by author person

• Query for SubmissionSets by Document Source

• Query for Folders updated during a time interval

• Query for all contents in a Folder or SubmissionSet

2235 • Query for SubmissionSets by time of submission

Depending on the value of the returnType parameter, all queries return:

• Metadata for one or more types of registry object (see ITI TF-3: 4.1.3), or

• Object references for one or more types of registry object

3.18.2 Use Case Roles

2240
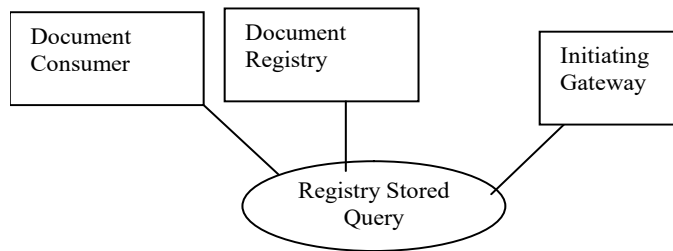
Actor: Document Consumer

Role: Requests a query by identifier (UUID), and passes parameters to the query. A parameter controlling the format of the returned data is passed; it selects either object references or full
2245   objects.

Actor: Document Registry

Role: Services the query using its stored definitions of the queries defined for XDS.

Actor: Initiating Gateway

Role: Services the stored query by initiating transactions with a selected set of Responding
2250   Gateways, Document Registries or other appropriate systems.

3.18.3 Referenced Standards

ITI TF-3:4 Metadata used in Document Sharing Profiles.

Implementors of this transaction shall comply with all requirements described in ITI TF-2x: Appendix V: Web Services for IHE transactions.

2255   ebRIM   OASIS/ebXML Registry Information Model v3.0

ebRS   OASIS/ebXML Registry Services Specifications v3.0

3.18.4 Interaction Diagram
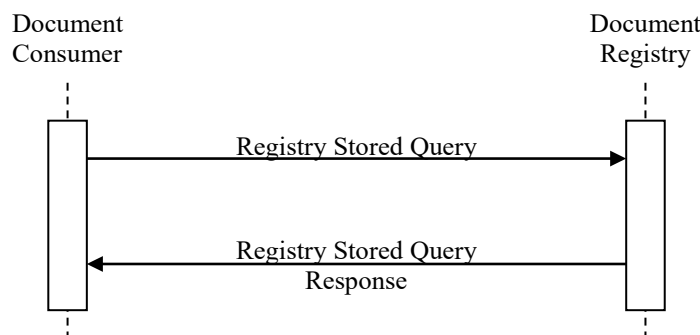
2260 **3.18.4.1 Registry Stored Query**

This is a query request to the Document Registry from a Document Consumer. The query request contains:

- A reference to a pre-defined query stored on the Document Registry Actor.

- Parameters to the query.

2265 **3.18.4.1.1 Trigger Events**

This message is initiated when the Document Consumer wants to query/retrieve document metadata.

3.18.4.1.2 Message Semantics

The semantics of Stored Query are defined in Section 6.3. *Stored Query Support* of ebRS version
2270 3.0. This transaction corresponds to Section 6.3.2 *Invoking a Stored Query* and 6.3.3 *Response to a Stored Query Invocation.* This profile does not specify how the queries come to be stored in the Registry nor how they are to be translated for other database architectures.

3.18.4.1.2.1 Version 3.0 ebXML Registry Standard

This transaction uses ebXML Registry version 3.0.

2275 **3.18.4.1.2.2 Sample Query Request**

The sample query is included under Section 3.18.4.1.3 Expected Actions.

3.18.4.1.2.3 Query Request Parameters – Coding Style

Registry Stored Query supports the following parameters:

- returnType – 'LeafClass' or 'ObjectRef'

2280 - Query ID – a UUID from Section 3.18.4.1.2.4

- Query Parameters – as defined in the subsections under Section 3.18.4.1.2.3.7, that correspond to the Query ID

3.18.4.1.2.3.1 Parameter returnType

Registry Stored Query supports the following values for the parameter returnType:

2285 - ObjectRef – a list of object UUIDs (references)

- LeafClass – list of XML elements representing the leaf class of the object returned

The 'LeafClass' returnType is meant for returning a small amount of fully specified ebXML objects (such as a list of ExtrinsicObject (XDSDocumentEntry) elements with full contents: slots, external identifiers, classifications etc.). This type of query result is self-contained,
2290 everything known about the object(s) is returned. The specific query documented in this section describes which object types will be included. ObjectRef elements are also returned. These

---

represent objects not included in the returned object list that are referenced by objects in the returned object list. These ObjectRefs are optional by the registry standard version 3.0.

2295 The 'ObjectRef' returnType returns references to the registry objects that match the query. This type query is recommended when the returned object list could be large. An initial query returning ObjectRefs for all objects of interest followed by secondary queries requesting full metadata (query type LeafClass) is an efficient way to query for large bodies of metadata. This strategy is particularly easy to use when querying for a single object type (XDSDocumentEntry or XDSSubmissionSet are examples) since only a single object type is involved.

2300 An ObjectRef looks like:

```
<ObjectRef id="urn:uuid:58a6f841-87b3-4a3e-92fd-
a8ffeff98427"/>
```

3.18.4.1.2.3.2 Parameter Query ID

This parameter holds the UUID assigned to the query to be invoked. UUIDs are assigned by this 2305 profile (see Section 3.18.4.1.2.4) to each of the queries defined in Section 3.18.4.1.2.3.7.

3.18.4.1.2.3.3 Date/Time Coding

All Date/time values are to be inclusive, interpreted as:

$XDSDocumentEntryCreationTimeFrom <= XDSDocumentEntry.creationTime < $XDSDocumentEntryCreationTimeTo

2310 for example.

The 'From' time or the 'To' time may be omitted.

3.18.4.1.2.3.3.1 Comparing serviceStartTime and serviceStopTime

Special consideration is needed when processing the query parameters related to serviceStartTime and serviceStopTime since these DocumentEntry metadata attributes may not 2315 be present:

- If the DocumentEntry.serviceStartTime attribute of a DocumentEntry contains no value and if the query includes a value for $XDSDocumentEntryServiceStartTimeFrom or $XDSDocumentEntryServiceStartTimeTo, those query parameters shall not be used for deciding whether this DocumentEntry matches the query.

2320 - If the DocumentEntry.serviceStopTime attribute of a DocumentEntry contains no value and if the query includes a value for $XDSDocumentEntryServiceStopTimeFrom or $XDSDocumentEntryServiceStopTimeTo, those query parameters shall not be used for deciding whether this DocumentEntry matches the query.

3.18.4.1.2.3.4 Coding of Code/Code-Scheme

2325 When specifying a coded value parameter, an abbreviated form of the HL7 V2.5 CE format shall be used. Only the first (identifier) and third (coding scheme) elements shall be specified. Both

are required. The second element shall be empty. The HL7 V2.5 length limits shall not apply. The ebRIM limit on Slot Value size does apply. An example of this format is:

code^^coding-scheme

2330 This style parameter always accepts multiple values so example codings in context look like:

<Value>('code1^^coding-scheme1')</Value>

or

<Value>('code1^^coding-scheme1','code2^^coding-scheme2')</Value>

within the parameter Slot.

2335 3.18.4.1.2.3.5 Coding of Single/Multiple Values

Single values are coded as

- 123 - without quotes for numbers

- 'urn:oasis:names:tc:ebxml-regrep:StatusType:Approved' - in single quotes for strings.

- 'Children"s Hospital' – a single quote is inserted in a string by specifying two single
2340 quotes

- For parameters defined to be compatible with the SQL 'LIKE' keyword: Underscore ('_') matches an arbitrary character

- Percent ('%') matches an arbitrary string (0 or more characters)

Format for multiple values is

2345 - (value,value,value,…)

    OR

- (value) if only one value is to be specified.

where each value is coded as described above for single values.

When coding multiple values there is a potential conflict between needing to code a long list of
2350 values and the length restriction imposed by Schema on the size of the value of the <Value/> element. Slot values shall never exceed the Schema-enforced limit. Therefore, the use of multiple Value elements within the Slot shall be acceptable. Splits may occur only between values, where each Value element is surrounded by parentheses. The following example shows multiple values, split across multiple Value elements:

2355 <Slot name="$uuid">

  <ValueList>

    <Value>('urn:uuid:a96d7361-6617-488a-891c-ee3f37d1f218','urn:uuid: 5655a680-1b6a-11dd-bd0b-0800200c9a66')</Value>

    <Value>('urn:uuid:ae315e81-2056-4829-a5b4-cf9531941f96')</Value>

2360   </ValueList>

</Slot>

This example shall be treated as equivalent to:

<Slot name="$uuid">

   <ValueList>

2365   <Value>('urn:uuid:a96d7361-6617-488a-891c-ee3f37d1f218','urn:uuid: 5655a680-1b6a-11dd-bd0b-0800200c9a66','urn:uuid:ae315e81-2056-4829-a5b4-cf9531941f96')</Value>

   </ValueList>

</Slot>

2370 Character comparisons shall be performed in accordance with the rules in ITI TF-2x: Appendix F Character String Comparisons.

And/or semantics for the coding of parameters shall be available only on parameters for multi-valued metadata elements (such as $XDSDocumentEntryEventCodeList). Multi-valued parameters shall be coded in two ways with different interpretations.

2375 A parameter specified as a Slot with multiple values shall be interpreted as disjunction (OR semantics). For example:

```
<rim:Slot name="$XDSDocumentEntryEventCodeList">
  <rim:ValueList>
    <rim:Value>('a')</rim:Value>
    <rim:Value>('b')</rim:Value>
  </rim:ValueList>
</rim:Slot>
```

2380

2385 shall match an XDSDocumentEntry object with an eventCodeList attribute containing either 'a' or 'b'. The following coding of the parameter shall yield the same results:

```
<rim:Slot name="$XDSDocumentEntryEventCodeList">
  <rim:ValueList>
    <rim:Value>('a','b')</rim:Value>
  </rim:ValueList>
</rim:Slot>
```

2390

A parameter specified as multiple Slots shall be interpreted as conjunction (AND semantics). For example:

2395

```
     <rim:Slot name="$XDSDocumentEntryEventCodeList">
       <rim:ValueList>
         <rim:Value>('a')</rim:Value>
       </rim:ValueList>
2400 </rim:Slot>
     <rim:Slot name="$XDSDocumentEntryEventCodeList">
       <rim:ValueList>
                 <rim:Value>('b')</rim:Value>
       </rim:ValueList>
2405 </rim:Slot>
```

shall match an XDSDocumentEntry object with an eventCodeList attribute containing both 'a' and 'b'.

Furthermore, the following specification of the $XDSDocumentEntryEventCodeList parameter:

2410

```
     <rim:Slot name="$XDSDocumentEntryEventCodeList">
       <rim:ValueList>
         <rim:Value>('a','b')</rim:Value>
       </rim:ValueList>
2415 </rim:Slot>
     <rim:Slot name="$XDSDocumentEntryEventCodeList">
       <rim:ValueList>
         <rim:Value>('c')</rim:Value>
       </rim:ValueList>
2420 </rim:Slot>
```

shall be interpreted as matching a document having eventCode (a OR b) AND c.

3.18.4.1.2.3.6 Valid Document Status Values

The Registry Object status values, in ebRIM v 3.0 format, used by XDS are:

    urn:oasis:names:tc:ebxml-regrep:StatusType:Approved

2425   urn:oasis:names:tc:ebxml-regrep:StatusType:Deprecated

If the Document Registry receives in a Registry Stored Query transaction a value for the $XDSDocumentEntryStatus parameter that it does not understand then the Document Registry shall ignore the value and process the Registry Stored Query transaction as if the not understood value were not specified. This means that if the only value present is one that is not understood

2430 an error will be generated because the $XDSDocumentEntryStatus parameter is required.

3.18.4.1.2.3.6.1 Valid AdhocQueryResponse Status Values

The status attribute of AdhocQueryResponse shall contain one of the following values:

    urn:oasis:names:tc:ebxml-regrep:ResponseStatusType:Success

    urn:ihe:iti:2007:ResponseStatusType:PartialSuccess

2435   urn:oasis:names:tc:ebxml-regrep:ResponseStatusType:Failure

See ITI TF-3: 4.2.4 Error Reporting for the interpretation of these values.

3.18.4.1.2.3.6.2 Valid DocumentEntryType Parameter Values

The objectType attribute on an ExtrinsicObject (DocumentEntry) is used to distinguish Stable DocumentEntries from On-Demand DocumentEntries.

2440 The following objectType values are used:

- `urn:uuid:7edca82f-054d-47f2-a032-9b2a5b5186c1` — Stable

- `urn:uuid:34268e47-fdf5-41a6-ba33-82133c465248` — On-Demand

The valid DocumentEntryType parameter values used in the Registry Stored Query are:

- `urn:uuid:7edca82f-054d-47f2-a032-9b2a5b5186c1` – requests Stable Document
2445 Entries be included in the response. This is the default value.

- `urn:uuid:34268e47-fdf5-41a6-ba33-82133c465248` – requests On-Demand Document Entries be included in the response. Used only by Document Consumers which support the On-Demand Documents Option.

If no value is specified for DocumentEntryType, the value requesting only Stable Document
2450 Entries shall be assumed. To get all Document Entry types, the query shall contain both of the valid values in the request.

3.18.4.1.2.3.7 Parameters for Required Queries

The sections below document the queries defined in the Registry Stored Query [ITI-18] transaction. These sections document a collection of Stored Queries. Document Registry Actors
2455 implementing this transaction shall support all queries in this collection and all parameters defined for each query. Document Consumer Actors implementing this transaction shall implement one or more of these queries as needed to support the use cases it implements.

Note that dollar sign ($) prefix on query parameters is required by ebRS 3.0.

In the query parameter tables below, each row represents a query parameter. Optional parameters
2460 which are not included in the query invocation have no effect on the query. Queries return registry objects that match all the supplied parameters. See Section 3.18.4.1.2.3.5 for information on specifying multiple values for a parameter.

3.18.4.1.2.3.7.1 FindDocuments

Find documents (XDSDocumentEntry objects) in the registry for a given patientID with a
2465 matching availabilityStatus attribute. The other parameters can be used to restrict the set of XDSDocumentEntry objects returned.

Returns: XDSDocumentEntry objects matching the query parameters

Parameter Name	Attribute	Opt	Mult
$XDSDocumentEntryPatientId	XDSDocumentEntry.patientId	R	--
$XDSDocumentEntryClassCode[1]	XDSDocumentEntry.classCode	O	M
$XDSDocumentEntryTypeCode[1]	XDSDocumentEntry.typeCode	O	M

Parameter Name	Attribute	Opt	Mult
$XDSDocumentEntryPracticeSettingCode[1]	XDSDocumentEntry.practiceSettingCode	O	M
$XDSDocumentEntryCreationTimeFrom[6]	Lower value of XDSDocumentEntry.creationTime	O	--
$XDSDocumentEntryCreationTimeTo[6]	Upper value of XDSDocumentEntry.creationTime	O	--
$XDSDocumentEntryServiceStartTimeFrom	Lower value of XDSDocumentEntry.serviceStartTime	O	--
$XDSDocumentEntryServiceStartTimeTo	Upper value of XDSDocumentEntry.serviceStartTime	O	--
$XDSDocumentEntryServiceStopTimeFrom	Lower value of XDSDocumentEntry.serviceStopTime	O	--
$XDSDocumentEntryServiceStopTimeTo	Upper value of XDSDocumentEntry.serviceStopTime	O	--
$XDSDocumentEntryHealthcareFacilityTypeCode[1]	XDSDocumentEntry.healthcareFacilityTypeCode	O	M
$XDSDocumentEntryEventCodeList[1]	XDSDocumentEntry.eventCodeList[3]	O	M
$XDSDocumentEntryConfidentialityCode[1]	XDSDocumentEntry.confidentialityCode[3]	O	M
$XDSDocumentEntryAuthorPerson[4]	XDSDocumentEntry.author	O	M
$XDSDocumentEntryFormatCode[1]	XDSDocumentEntry.formatCode	O	M
$XDSDocumentEntryStatus	XDSDocumentEntry.availabilityStatus	R	M
$XDSDocumentEntryType[5]	XDSDocumentEntryobjectType	O	M

[1]Shall be coded according to specification in Section 3.18.4.1.2.3.4 Coding of Code/Code-Scheme.

[3]Supports AND/OR semantics as specified in Section 3.18.4.1.2.3.5.

[4]The value for this parameter is a pattern compatible with the SQL keyword LIKE which allows the use of the following wildcard characters: % to match any (or no) characters and _ to match a single character. The match shall be applied to the text contained in the Value elements of the authorPerson Slot on the author Classification (value strings of the authorPerson sub-attribute)

[5]See Section 3.18.4.1.2.3.6.2

[6]CreationTimeFrom and CreationTimeTo are ignored when evaluating an On-Demand Document Entry's selection for inclusion in the query response.

3.18.4.1.2.3.7.2 FindSubmissionSets

Find submission sets (XDSSubmissionSet objects) in the registry for a given patientID with matching 'status' attribute. The other parameters can be used to restrict the collection of XDSSubmissionSet objects returned.

Returns: XDSSubmissionSet objects matching the query parameters

Parameter Name	Attribute	Opt	Mult
$XDSSubmissionSetPatientId	XDSSubmissionSet.patientId	R	--

Parameter Name	Attribute	Opt	Mult
$XDSSubmissionSetSourceId	XDSSubmissionSet.sourceId	O	M
$XDSSubmissionSetSubmissionTimeFrom	XDSSubmissionSet.submissionTime Lower value	O	--
$XDSSubmissionSetSubmissionTimeTo	XDSSubmissionSet.submissionTime Upper value	O	--
$XDSSubmissionSetAuthorPerson[1]	XDSSubmissionSet.authorPerson	O	--
$XDSSubmissionSetContentType[2]	XDSSubmissionSet.contentTypeCode	O	M
$XDSSubmissionSetStatus	XDSSubmissionSet.availabilityStatus	R	M

2485   [1]The value for this parameter is a pattern compatible with the SQL keyword LIKE which allows the use of the following wildcard characters: % to match any (or no) characters and _ to match a single character. The match shall be applied to the text contained in the Value elements of the authorPerson Slot on the author Classification (value strings of the authorPerson sub-attribute).

[2]Shall be coded according to specification in Section 3.18.4.1.2.3.4 Coding of Code/Code-
2490   Scheme.

3.18.4.1.2.3.7.3 FindFolders

Find folders (XDSFolder objects) in the registry for a given patientID with matching 'status' attribute. The other parameters can be used to restrict the collection of XDSFolder objects returned.

2495   **Returns:** XDSFolder objects matching the query parameters

Parameter Name	Attribute	Opt	Mult
$XDSFolderPatientId	XDSFolder.patientId	R	--
$XDSFolderLastUpdateTimeFrom	XDSFolder.lastUpdateTime lower value	O	--
$XDSFolderLastUpdateTimeTo	XDSFolder.lastUpdateTime upper bound	O	--
$XDSFolderCodeList[1,2]	XDSFolder.codeList	O	M
$XDSFolderStatus	XDSFolder.availabilityStatus	R	M

[1]Shall be coded according to specification in Section 3.18.4.1.2.3.4 Coding of Code/Code-
Scheme.

[2]Supports AND/OR semantics as specified in Section 3.18.4.1.2.3.5.

2500   ### 3.18.4.1.2.3.7.4 GetAll

Get all registry content for a patient given the indicated status, format codes, and confidentiality codes.

Returns:

- XDSSubmissionSet, XDSDocumentEntry, and XDSFolder objects with patientId
2505   attribute matching $patientId parameter

- Association objects with sourceObject or targetObject attribute matching one of the above objects

---

Note: Associations may be returned that reference objects not in the return set. For example, this could occur when:

- the $XDSDocumentEntryStatus parameter is Approved and a submitted DocumentEntry has been replaced and is, therefore, Deprecated, or

- a SubmissionSet is linked to a DocumentEntry with a different Patient ID, i.e., for a mother and child.

Document Consumers should be prepared to handle these situations.

Parameter Name	Attribute	Opt	Mult
$patientId	XDSFolder.patientId, XDSSubmissionSet.patientId, XDSDocumentEntry.patientId	R	--
$XDSDocumentEntryStatus	XDSDocumentEntry.availabilityStatus	R	M
$XDSSubmissionSetStatus	XDSSubmissionSet.availabilityStatus	R	M
$XDSFolderStatus	XDSFolder.availabilityStatus	R	M
$XDSDocumentEntryFormatCode[2]	XDSDocumentEntry.formatCode	O	M
$XDSDocumentEntryConfidentialityCode[1, 2]	XDSDocumentEntry.confidentialityCode[1]	O	M
$XDSDocumentEntryType[3]	XDSDocumentEntry.objectType	O	M

[1]Supports AND/OR semantics as specified in Section 3.18.4.1.2.3.5.

[2]Shall be coded according to specification in Section 3.18.4.1.2.3.4 Coding of Code/Code-Scheme

[3]See Section 3.18.4.1.2.3.6.2

3.18.4.1.2.3.7.5 GetDocuments

Retrieve a collection of XDSDocumentEntry objects. XDSDocumentEntry objects are selected either by their entryUUID or uniqueId attribute.

Returns: XDSDocumentEntry objects requested

Parameter Name	Attribute	Opt	Mult
$XDSDocumentEntryEntryUUID[3]	XDSDocumentEntry.entryUUID	O[1]	M
$XDSDocumentEntryUniqueId[3]	XDSDocumentEntry.uniqueId	O[1]	M
$homeCommunityId	None	O[2]	--

[1]Either $XDSDocumentEntryEntryUUID or $XDSDocumentEntryUniqueId shall be specified. This transaction shall return an XDSStoredQueryParamNumber error if both parameters are specified.

[2]The homeCommunityId value is specified as the home attribute on the AdhocQuery element of the query request, as in: <AdhocQuery id="…" home="urn:oid:1.2.3" … >. Document Consumer Actors shall specify the homeCommunityId value if they received a value for this attribute as part of the previous Registry Stored Query response entry which contained the specified EntryUUID or UniqueID. See Section 3.18.4.1.2.3.8 for more details.

Note: A query for a single XDSDocumentEntry.uniqueId can return multiple results. See ITI TF-3: 4.1.4 under the topic of Document metadata duplication for explanation.

___

[3]If the Stored Query specifies a returnType of LeafClass then the Document Registry shall verify that all requested DocumentEntry objects to be returned will contain the same Patient ID. If this validation fails an XDSResultNotSinglePatient error shall be returned and no metadata shall be
2535   returned.

3.18.4.1.2.3.7.6 GetFolders

Retrieve a collection of XDSFolder objects. XDSFolder objects are selected either by their entryUUID or uniqueId attribute.

Returns: XDSFolder objects requested.

2540

Parameter Name	Attribute	Opt	Mult
$XDSFolderEntryUUID[3]	XDSFolder.entryUUID	O[1]	M
$XDSFolderUniqueId[3]	XDSFolder.uniqueId	O[1]	M
$homeCommunityId	None	O[2]	--

[1]Either $XDSFolderEntryUUID or $XDSFolderUniqueId shall be specified. This transaction shall return an XDSStoredQueryParamNumber error if both parameters are specified.

[2]The homeCommunityId value is specified as the home attribute on the AdhocQuery element of the query request, as in: <AdhocQuery id="…" home="urn:oid:1.2.3" … >. Document
2545   Consumer Actors shall specify the homeCommunityId value if they received a value for this attribute as part of the previous Registry Stored Query response entry which contained the specified EntryUUID or UniqueID. See Section 3.18.4.1.2.3.8 for more details.

[3]If the Stored Query specifies a returnType of LeafClass then the Document Registry shall verify that all requested Folder objects to be returned will contain the same Patient ID. If this validation
2550   fails an XDSResultNotSinglePatient error shall be returned and no metadata shall be returned.

3.18.4.1.2.3.7.7 GetAssociations

Retrieve Association objects whose sourceObject or targetObject attribute match $uuid.

Returns: Association objects

Parameter Name	Attribute	Opt	Mult
$uuid	None	R	M
$homeCommunityId	None	O[1]	-

2555   [1]The homeCommunityId value is specified as the home attribute on the AdhocQuery element of the query request, as in: `<AdhocQuery id="…" home="urn:oid:1.2.3" … >`. Document Consumer Actors shall specify the homeCommunityId value if they received a value for this attribute as part of the previous Registry Stored Query response entry which contained the specified EntryUUID or UniqueID. See Section 3.18.4.1.2.3.8 for more details.

2560 ### 3.18.4.1.2.3.7.8 GetDocumentsAndAssociations

Retrieve a collection of XDSDocumentEntry objects and the Association objects surrounding them. XDSDocumentEntry objects are selected either by their entryUUID or uniqueId attribute. This is the GetDocuments query and GetAssociations query combined into a single query.

Returns:

2565
- XDSDocumentEntry objects

- Association objects whose sourceObject or targetObject attribute matches one of the above objects

Parameter Name	Attribute	Opt	Mult
$XDSDocumentEntryEntryUUID[3]	XDSDocumentEntry.entryUUID	O[1]	M
$XDSDocumentEntryUniqueId[3]	XDSDocumentEntry.uniqueId	O[1]	M
$homeCommunityId	None	O[2]	--

[1]Either $XDSDocumentEntryEntryUUID or $XDSDocumentEntryUniqueId shall be specified.
2570 This transaction shall return an XDSStoredQueryParamNumber error if both parameters are specified.

[2]The homeCommunityId value is specified as the home attribute on the AdhocQuery element of the query request, as in: <AdhocQuery id="…" home="urn:oid:1.2.3" … >. Document Consumer Actors shall specify the homeCommunityId value if they received a value for this
2575 attribute as part of the previous Registry Stored Query response entry which contained the specified EntryUUID or UniqueID. See Section 3.18.4.1.2.3.8 for more details.

[3]If the Stored Query specifies a returnType of LeafClass then the Document Registry shall verify that all requested DocumentEntry objects to be returned will contain the same Patient ID. If this validation fails an XDSResultNotSinglePatient error shall be returned and no metadata shall be
2580 returned.

3.18.4.1.2.3.7.9 GetSubmissionSets

Retrieve the XDSSubmissionSet objects used to submit a collection of XDSDocumentEntry and XDSFolder objects. The XDSDocumentEntry and XDSFolder objects of interest are identified by their UUIDs in the $uuid parameter.

2585 **Selection:** XDSSubmissionSet objects are selected because Association objects exist that have:

- Type HasMember

- targetObject attribute containing one of the UUIDs provided in the $uuid parameter

- sourceObject attribute referencing an XDSSubmissionSet object

Returns:

2590
- XDSSubmissionSet objects described above

- Association objects described in the Selection section above

Parameter Name	Attribute	Opt	Mult
$uuid[2]	XDSDocumentEntry.entryUUID and XDSFolder.entryUUID	R	M
$homeCommunityId	None	O[1]	--

[1]The homeCommunityId value is specified as the home attribute on the AdhocQuery element of the query request, as in: `<AdhocQuery id="…" home="urn:oid:1.2.3" … >`.

2595 Document Consumer Actors shall specify the homeCommunityId value if they received a value for this attribute as part of the previous Registry Stored Query response entry which contained the specified EntryUUID or UniqueID. See Section 3.18.4.1.2.3.8 for more details.

[2]If the Stored Query specifies a returnType of LeafClass then the Document Registry shall verify that all requested Submission Set objects to be returned will contain the same Patient ID. If this 2600 validation fails an XDSResultNotSinglePatient error shall be returned and no metadata shall be returned.

3.18.4.1.2.3.7.10 GetSubmissionSetAndContents

Retrieve a SubmissionSet and its contents. SubmissionSet objects is selected either by its entryUUID or uniqueId attribute. The DocumentEntry objects returned may be constrained by 2605 their formatCode and confidentialityCode attributes. More specifically, the DocumentEntries returned shall be limited by the following rules:

- If the $XDSDocumentEntryConfidentialityCode parameter is present in the query, then DocumentEntries shall be returned only if they match this parameter.

- If the $XDSDocumentEntryFormatCode parameter is present in the query, then 2610 DocumentEntries shall be returned only if they match this parameter

Returns:

- SubmissionSet identified

- DocumentEntries linked to the SubmissionSet by HasMember Associations (DocumentEntries shall pass the above rules)

2615 - The HasMember Associations identified in the previous rule

- Folders linked to the SubmissionSet by HasMember Associations

- The HasMember Associations identified in the previous rule

- Associations linked to the SubmissionSet by HasMember Associations where the Associations link two objects already in the return set

2620 - The HasMember Associations identified in the previous rule

In the above rules, Associations are only returned if both of the objects they connect are part of the return set.

Parameter Name	Attribute	Opt	Mult
$XDSSubmissionSetEntryUUID[5]	XDSSubmissionSet.entryUUID	O[1]	--
$XDSSubmissionSetUniqueId[5]	XDSSubmissionSet.uniqueId	O[1]	--
$XDSDocumentEntryFormatCode[4]	XDSDocumentEntry.formatCode	O	M
$XDSDocumentEntryConfidentialityCode[4]	XDSDocumentEntry.confidentialityCode[2]	O	M
$homeCommunityId	None	O[3]	--
$XDSDocumentEntryType[6]	XDSDocumentEntry.objectType	O	M

[1]Either $XDSSubmissionSetEntryUUID or $XDSSubmissionSetUniqueId shall be specified. This transaction shall return an XDSStoredQueryParamNumber error if both parameters are specified.

[2]Supports AND/OR semantics as specified in Section 3.18.4.1.2.3.5.

[3]The homeCommunityId value is specified as the home attribute on the AdhocQuery element of the query request, as in: <AdhocQuery id="…" home="urn:oid:1.2.3" … >. Document Consumer Actors shall specify the homeCommunityId value if they received a value for this attribute as part of the previous Registry Stored Query response entry which contained the specified EntryUUID or UniqueID. See Section 3.18.4.1.2.3.8 for more details.

[4]Shall be coded according to specification in Section 3.18.4.1.2.3.4 Coding of Code/Code-Scheme.

[5]If the Stored Query specifies a returnType of LeafClass then the Document Registry shall verify that all requested Submission Set, Folder, and DocumentEntry objects to be returned will contain the same Patient ID. If this validation fails an XDSResultNotSinglePatient error shall be returned and no metadata shall be returned.

[6]See Section 3.18.4.1.2.3.6.2

3.18.4.1.2.3.7.11 GetFolderAndContents

Retrieve a Folder and its contents. The Folder object is selected either by its entryUUID or uniqueId attribute. The DocumentEntry objects returned may be constrained by their formatCode and confidentialityCode attributes. More specifically, the DocumentEntries shall be limited by the following rules:

- If the $XDSDocumentEntryConfidentialityCode parameter is present in the query, then DocumentEntries shall be returned only if they match this parameter.

- If the $XDSDocumentEntryFormatCode parameter is present in the query, then DocumentEntries shall be returned only if they match this parameter

Returns:

- Folder identified

- DocumentEntries linked to the Folder by HasMember Associations (DocumentEntries shall pass the above rules)

- The HasMember Associations identified in the previous rule

In the above rules, Associations are only returned if both of the objects they connect are part of
2655   the return set.

Parameter Name	Attribute	Opt	Mult
$XDSFolderEntryUUID[5]	XDSFolder.entryUUID	O[1]	--
$XDSFolderUniqueId[5]	XDSFolder.uniqueId	O[1]	--
$XDSDocumentEntryFormatCode[4]	XDSDocumentEntry.formatCode	O	M
$XDSDocumentEntryConfidentialityCode[4]	XDSDocumentEntry.confidentialityCode[2]	O	M
$homeCommunityId	None	O[3]	--
$XDSDocumentEntryType[6]	XDSDocumentEntry.objectType	O	M

[1]Either $XDSFolderEntryUUID or $XDSFolderUniqueId shall be specified. This transaction
shall return an XDSStoredQueryParamNumber error if both parameters are specified.

[2]Supports AND/OR semantics as specified in Section 3.18.4.1.2.3.5.

2660   [3]The homeCommunityId value is specified as the home attribute on the AdhocQuery element of
the query request, as in: `<AdhocQuery id="…" home="urn:oid:1.2.3" … >`.
Document Consumer Actors shall specify the homeCommunityId value if they received a value
for this attribute as part of the previous Registry Stored Query response entry which contained
the specified EntryUUID or UniqueID. See Section 3.18.4.1.2.3.8 for more details.

2665   [4]Shall be coded according to specification in Section 3.18.4.1.2.3.4 Coding of Code/Code-
Scheme.

[5]If the Stored Query specifies a returnType of LeafClass then the Document Registry shall verify
that all requested Folder, and DocumentEntry objects to be returned will contain the same Patient
ID. If this validation fails an XDSResultNotSinglePatient error shall be returned and no metadata
2670   shall be returned.

[6]See Section 3.18.4.1.2.3.6.2

3.18.4.1.2.3.7.12 GetFoldersForDocument

Retrieve XDSFolder objects that contain the XDSDocumentEntry object provided with the
query. XDSDocumentEntry objects are selected either by their entryUUID or uniqueId attribute.

2675   **Returns:** XDSFolder objects that contain specified XDSDocumentEntry object. More
specifically, for each Association object of type HasMember that has a targetObject attribute
referencing the target XDSDocumentEntry object, return the object referenced by its
sourceObject if it is of type XDSFolder.

Parameter Name	Attribute	Opt	Mult
$XDSDocumentEntryEntryUUID	XDSDocumentEntry.entryUUID	O[1]	--
$XDSDocumentEntryUniqueId	XDSDocumentEntry.uniqueId	O[1]	--
$homeCommunityId	None	O[2]	--

2680 [1]Either $XDSDocumentEntryEntryUUID or $XDSDocumentEntryUniqueId shall be specified. This transaction shall return an XDSStoredQueryParamNumber error if both parameters are specified.

[2]The homeCommunityId value is specified as the home attribute on the AdhocQuery element of the query request, as in: <AdhocQuery id="…" home="urn:oid:1.2.3" … >. Document
2685 Consumer Actors shall specify the homeCommunityId value if they received a value for this attribute as part of the previous Registry Stored Query response entry which contained the specified EntryUUID or UniqueID. See Section 3.18.4.1.2.3.8 for more details.

> Note: A query for a single XDSDocumentEntry.uniqueId can return multiple results. See ITI TF-3: 4.1.4 under the topic of Document Metadata Duplication for explanation.

2690 3.18.4.1.2.3.7.13 GetRelatedDocuments

Retrieve XDSDocumentEntry objects that are related to the specified document via Association objects. Also return the Association objects. The specified document is designated by UUID or uniqueId. The query shall return

- Association objects where:

2695
  - The sourceObject attribute OR the targetObject attribute references the specified document AND

  - Both sourceObject attribute and targetObject attribute reference documents AND

  - The associationType attribute matches a value included in the $AssociationTypes parameter

2700
- XDSDocumentEntry objects referenced by the targetObject attribute OR the sourceObject attribute of an Association object matched above.

> Note: A side effect of the query is that the specified document is returned in the results if at least one Association is returned.

2705
> Note: A side effect of this query is that if the document specified by the $XDSDocumentEntryUUID or $XDSDocumentEntryUniqueId parameters has no associations linking it to other documents, then no documents and no associations are returned.

See ITI TF-3: 4.1.6 Document Relationships and Associations for background.

Returns: Association objects and related XDSDocumentEntry objects

Given: An XDSDocumentEntry object and a collection of association types.

2710

Parameter Name	Attribute	Opt	Mult
$XDSDocumentEntryEntryUUID	XDSDocumentEntry.entryUUID	O[1]	--
$XDSDocumentEntryUniqueId	XDSDocumentEntry.uniqueId	O[1]	--
$AssociationTypes	Not a named attribute	R	M
$homeCommunityId	None	O[2]	--
$XDSDocumentEntryType[3]	XDSDocumentEntry.objectType	O	M

[1]Either $XDSDocumentEntryEntryUUID or $XDSDocumentEntryUniqueId shall be specified. This transaction shall return an XDSStoredQueryParamNumber error if both parameters are specified.

[2]The homeCommunityId value is specified as the home attribute on the AdhocQuery element of the query request, as in: <AdhocQuery id="…" home="urn:oid:1.2.3" … >. Document Consumer Actors shall specify the homeCommunityId value if they received a value for this attribute as part of the previous Registry Stored Query response entry which contained the specified EntryUUID or UniqueID. See Section 3.18.4.1.2.3.8 for more details.

[3]See Section 3.18.4.1.2.3.6.2

Note: A query for a single XDSDocumentEntry.uniqueId can return multiple results. See ITI TF-3: 4.1.4 under the topic of Document Metadata Duplication for explanation.

3.18.4.1.2.3.7.14 FindDocumentsByReferenceId

This query shall be supported by Registries claiming the "Reference ID" Option. Find documents (XDSDocumentEntry objects) in the registry for a given patientID with a matching 'status' attribute. The other parameters can be used to restrict the set of XDSDocumentEntry objects returned.

This query is semantically identical to the FindDocuments Stored Query (see Section 3.18.4.1.2.3.7.1) except:

- $XDSDocumentEntryReferenceIdList contains one or more values to match against the referenceIdList document entry. Since referencedIdList is a rim:Slot, entries in the referencedIdList are matched as exact matches against the query parameter values.

Returns: XDSDocumentEntry objects matching the query parameters

Parameter Name	Attribute	Opt	Mult
$XDSDocumentEntryPatientId	XDSDocumentEntry.patientId	R	--
$XDSDocumentEntryReferenceIdList[5]	XDSDocumentEntry.referenceIdList[3]	R	M
$XDSDocumentEntryClassCode[1]	XDSDocumentEntry.classCode	O	M
$XDSDocumentEntryTypeCode[1]	XDSDocumentEntry.typeCode	O	M
$XDSDocumentEntryPracticeSettingCode[1]	XDSDocumentEntry.practiceSettingCode	O	M
$XDSDocumentEntryCreationTimeFrom	Lower value of XDSDocumentEntry.creationTime	O	--
$XDSDocumentEntryCreationTimeTo	Upper value of XDSDocumentEntry.creationTime	O	--
$XDSDocumentEntryServiceStartTimeFrom	Lower value of XDSDocumentEntry.serviceStartTime	O	--
$XDSDocumentEntryServiceStartTimeTo	Upper value of XDSDocumentEntry.serviceStartTime	O	--
$XDSDocumentEntryServiceStopTimeFrom	Lower value of XDSDocumentEntry.serviceStopTime	O	--
$XDSDocumentEntryServiceStopTimeTo	Upper value of XDSDocumentEntry.serviceStopTime	O	--

Parameter Name	Attribute	Opt	Mult
$XDSDocumentEntryHealthcareFacilityTypeCode[1]	XDSDocumentEntry.healthcareFacilityTypeCode	O	M
$XDSDocumentEntryEventCodeList[1]	XDSDocumentEntry.eventCodeList[3]	O	M
$XDSDocumentEntryConfidentialityCode[1]	XDSDocumentEntry.confidentialityCode[3]	O	M
$XDSDocumentEntryAuthorPerson[4]	XDSDocumentEntry.author	O	M
$XDSDocumentEntryFormatCode[1]	XDSDocumentEntry.formatCode	O	M
$XDSDocumentEntryStatus	XDSDocumentEntry.availabilityStatus	R	M
$XDSDocumentEntryType[6]	XDSDocumentEntry.objectType	O	M

[1]Shall be coded according to specification in Section 3.18.4.1.2.3.4 Coding of Code/Code-Scheme.

[3]Supports AND/OR semantics as specified in Section 3.18.4.1.2.3.5.

[4]The value for this parameter is a pattern compatible with the SQL keyword LIKE which allows the use of the following wildcard characters: % to match any (or no) characters and _ to match a single character. The match shall be applied to the text contained in the Value elements of the authorPerson Slot on the author Classification (value strings of the authorPerson sub-attribute)

[5]The value for this parameter is a pattern compatible with the SQL keyword LIKE which allows the use of the following wildcard characters: % to match any (or no) characters and _ to match a single character.

[6]See Section 3.18.4.1.2.3.6.2.

3.18.4.1.2.3.8 Use of homeCommunityId

The Registry Stored Query makes use of the homeCommunityId which is a globally unique identifier for a community and is used to obtain the Web Services endpoint of services that provide access to data in that community. The homeCommunityId is structured as an OID limited to 64 characters and is specified in URI syntax; for example, the homeCommunityId of 1.2.3 would be formatted as `urn:oid:1.2.3`.

Its use is as follows:

- It is returned within the response to Registry Stored Query and Cross Gateway Query transactions to indicate the association of a response element with a community. It is specified as the ebRIM 'home' attribute within the ExtrinsicObject, RegistryPackage and ObjectRef elements. Document Consumers process the value as an opaque unique identifier.

- It is an optional parameter to Registry Stored Query requests, not requiring a patient id parameter, and Retrieve Document Set requests to indicate which community to direct the request.

For stored queries which do not require the patient id as a parameter, meaning query by EntryUUID or UniqueID:

- If the Registry Stored Query is being addressed to an Initiating Gateway then the Document Consumer may have previously sent a Registry Stored Query to the Initiating Gateway which included a patient id and saved the homeCommunityId which was returned on the element containing the EntryUUID or uniqueID. If this is not the case the Document Consumer shall have access to the correct homeCommunityId through some other means.

- If the Document Consumer received the EntryUUID or uniqueID in a previous Registry Stored Query response which contained a homeCommunityId, then the Document Consumer shall specify the homeCommunityId parameter.

- The homeCommunityId value is specified as the home attribute on the AdhocQuery element of the query request, as in:
  <AdhocQuery id=”…” home=”urn:oid:1.2.3” … >

- Each query request can have at most one homeCommunityId value. If the Document Consumer specifies multiple entryUUID or uniqueID values they must all be associated with the same homeCommunityId value. Multiple individual query requests can be used to retrieve data associated with different homeCommunityIds.

3.18.4.1.2.3.9 Merge Patient ID

Patient identifiers can be merged via messages received through the Patient Identity Feed [ITI-8] or the Patient Identity Feed v3 [ITI-44] transaction. See Section 3.8.4.2 and ITI TF-2b: 3.44.4.2.4 for details.

This section defines the effects that merged patient identifiers have on the Registry Stored Query transaction. The process of merging patient identifiers involves two patient identifiers: the subsumed patient identifier and the surviving patient identifier. The subsumed patient identifier stops being used and all patient records that were associated with that identifier are now associated with the surviving patient identifier. See Section 3.8.4.2.4 for how these identifiers map into the Merge Patient Identifier message.

Several transactions handle processing of merged patient identifiers, e.g.:

- Patient Identity Feed [ITI-8] and Patient Identity Feed v3 [ITI-44] – accept the merge request

- Register Document Set-b [ITI-42] – accepts metadata containing patient identifiers

- Registry Stored Query [ITI-18] – retrieves metadata containing patient identifiers.

The above transactions and the profiles that use them do not specify how patient identifier merging is to be implemented. They do specify the results of the merge in terms of possible rejection of Register Document Set-b transactions and results returned in Registry Stored Query transactions.

The following two sections document the responsibilities of the Document Registry and the Document Consumer in processing Registry Stored Query transactions that reference patient identifiers that are involved in merges.

3.18.4.1.2.3.9.1 Responsibilities of the Document Registry Actor

The rules governing the handling of patient identity merges depend on the following factors:

- Does the stored query contain patient identifier parameters?

- Has the registry received a patient identity merge message which references the patient identity parameter as either the subsumed patient identifier or the surviving patient identifier?

- The content of any previously received merge message can contribute to the result of a stored query.

- More than one merge message may contribute to the results of a stored query (e.g., Patient ID A merged into Patient ID B merged into Patient ID C etc.)

The following assertions shall be met by a Document Registry when returning metadata in a Registry Stored Query transaction. The terms 'subsumed patient identifier' and 'surviving patient identifier' refer to the contents of any previously received merge message.

- If the query includes a patient identifier parameter and that patient identity matches the subsumed patient identifier of a merge message then the query shall return no results. This is not an error condition and the Registry Stored Query transaction shall not return an error status.

- If the query includes a patient identifier and that patient identifier matches the surviving patient identifier of a previous merge message then the query shall return the composite of:

- Metadata registered against the surviving patient identifier

- Metadata registered against the subsumed patient identifier

- Metadata returned shall show the surviving patient identifier in these metadata attributes:

  - XDSSubmissionSet.patientId

  - XDSDocumentEntry.patientId

  - XDSFolder.patientId

- Patient identifiers may be affected by multiple patient identity merges.

- The subsumed patient identifier may have been referenced in a prior A40 Merge message as the surviving patient identifier.

- The surviving patient identifier may have been referenced in a prior A40 Merge message as the surviving patient identifier.

- Patient demographics in XDSDocumentEntry.sourcePatientInfo shall not be altered as a result of an A40 Merge.

3.18.4.1.2.3.9.2 Responsibilities of the Document Consumer Actor

The following assertions affect the Document Consumer:

2835   • The Document Consumer shall depend on the patient identity in the following metadata attributes after a patient identifier is merged:

  • XDSSubmissionSet.patientId

  • XDSDocumentEntry.patientId

  • XDSFolder.patientId

2840   • The Document Registry is required to return the surviving patient identifier of a merge in place of the original subsumed patient identifier.

    • The Document Consumer shall not depend on the patient demographics found in XDSDocumentEntry.sourcePatientInfo after a patient identifier is merged. Patient demographics should be accessed through PIX/PDQ services or their equivalent.

2845   **3.18.4.1.2.4 Stored Query IDs**

The standard XDS queries are assigned the following Query IDs. These IDs are used in the AdhocQueryRequest to reference queries stored on the Document Registry Actor. Query IDs are in UUID format (RFC4122). An error shall be returned when an unsupported stored query ID is received.

2850   Note: This query mechanism can be extended by adding a query by allocating a Query ID, defining query parameters, and implementing the query in the Document Registry.

Query Name	Query ID
FindDocuments	urn:uuid:14d4debf-8f97-4251-9a74-a90016b0af0d
FindSubmissionSets	urn:uuid:f26abbcb-ac74-4422-8a30-edb644bbc1a9
FindFolders	urn:uuid:958f3006-baad-4929-a4de-ff1114824431
GetAll	urn:uuid:10b545ea-725c-446d-9b95-8aeb444eddf3
GetDocuments	urn:uuid:5c4f972b-d56b-40ac-a5fc-c8ca9b40b9d4
GetFolders	urn:uuid:5737b14c-8a1a-4539-b659-e03a34a5e1e4
GetAssociations	urn:uuid:a7ae438b-4bc2-4642-93e9-be891f7bb155
GetDocumentsAndAssociations	urn:uuid:bab9529a-4a10-40b3-a01f-f68a615d247a
GetSubmissionSets	urn:uuid:51224314-5390-4169-9b91-b1980040715a
GetSubmissionSetAndContents	urn:uuid:e8e3cb2c-e39c-46b9-99e4-c12f57260b83
GetFolderAndContents	urn:uuid:b909a503-523d-4517-8acf-8e5834dfc4c7
GetFoldersForDocument	urn:uuid:10cae35a-c7f9-4cf5-b61e-fc3278ffb578
GetRelatedDocuments	urn:uuid:d90e5407-b356-4d91-a89f-873917b4b0e6
FindDocumentsByReferenceId	urn:uuid:12941a89-e02e-4be5-967c-ce4bfc8fe492

3.18.4.1.2.5 Compatibility of Options

2855 The presence or absence of the optional $XDSDocumentEntryType parameter triggers different behaviors on the Document Registry. If this parameter is specified, and the Document Registry does not support it, the Document Registry shall ignore. If it is specified, and the Document Registry does support it, the proper information is returned.

2860
- If the Document Consumer does not support the On-Demand Documents Option, it will send a Registry Stored Query request which does not contain the $XDSDocumentEntryType parameter. The Document Registry will therefore not supply any On-Demand Document Entries in the query response.

- If the Document Consumer *does* support the On-Demand Documents Option, then it will be able to specify the $XDSDocumentEntryType parameter containing the uuid for On-
2865 Demand Document Entries in a Registry Stored Query. A Document Registry with the On-Demand Documents Option will recognize the $XDSDocumentEntryType parameter and process accordingly. A Document Registry which does not support the On-Demand Documents Option will ignore the $XDSDocumentEntryType parameter. Since there cannot be any On-Demand Document Entries held by a Document Registry which does
2870 not support On-Demand Documents, this is a consistent response to the request.

3.18.4.1.2.6 Managing Large Query Responses

ebXML version 3.0 supports query results pagination (ebRS version 3.0 chapter 6.2). The interactions between the stored query capability and the query results pagination capability within the standard have never been reconciled and are not recommended for use together. It is
2875 recommended instead that query pagination be implemented within the Document Consumer Actor.

This can be accomplished by specifying returnType="ObjectRef" on all large queries. This returns a list of references (UUIDs) instead of full objects (large XML structures). This is practical for queries returning thousands of objects. To construct a page for display, a small
2880 number of objects can be retrieved through a second query. This is repeated for each page. As an example, the following sequence of queries could be used to list a large number of documents:

- FindDocuments query with returnType="ObjectRef" which returns a large collections of ObjectRefs (UUIDs)

- GetDocuments query with returnType="LeafClass" issued with a subset of the above
2885 returned UUIDs which returns the details to construct one page of listing

OR

- GetDocumentsAndAssocations query with returnType="LeafClass" issued with a subset of the above returned UUIDs which returns the details to construct one page of listing. By retrieving the Association objects, the existence of document replacement,
2890 transformation, and amendment can be included into the display.

3.18.4.1.2.7 Web Services Transport

The query request and response will be transmitted using Web Services, according to the requirements specified in ITI TF-2x: Appendix V. The specific values for the WSDL describing the Stored Query Service are described in this section.

2895   The Document Registry shall accept a Registry Stored Query Request formatted as a SIMPLE SOAP message and respond with a Registry Stored Query Response formatted as a SIMPLE SOAP message. The Document Consumer shall generate the Registry Stored Query Request formatted as a SIMPLE SOAP message and accept a Registry Stored Query Response formatted as a SIMPLE SOAP message.

2900   **IHE-WSP201) The attribute /wsdl:definitions/@name shall be "DocumentRegistry".**

The following WSDL naming conventions shall apply:

```
       wsdl:definitions/@name="DocumentRegistry":
       query message     -> "RegistryStoredQuery_Message"
2905   query response    -> "RegistryStoredQuery_Response_Message"
       portType          -> "DocumentRegistry_PortType"
       operation         -> "RegistryStoredQuery"
       SOAP 1.2 binding  -> "DocumentRegistry_Binding_Soap12"
       SOAP 1.2 port     -> "DocumentRegistry_Port_Soap12"
```

2910   **IHE-WSP202) The targetNamespace of the WSDL shall be "urn:ihe:iti:xds-b:2007"**

Document Registry: These are the requirements for the Registry Stored Query transaction presented in the order in which they would appear in the Document Registry WSDL definition:

- The following types shall be imported (xsd:import) in the /definitions/types section:

2915
    - namespace=" urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0", schemaLocation="query.xsd"

- The /definitions/message/part/@element attribute of the Registry Stored Query Request message shall be defined as "query:AdhocQueryRequest"

- The /definitions/message/part/@element attribute of the Registry Stored Query Response message shall be defined as "query:AdhocQueryResponse"

2920   - Refer to Table 3.18.4.1.2.7-1 below for additional attribute requirements

- To support the Asynchronous Web Services Exchange Option on the Document Consumer, the Document Registry shall support the use of a non-anonymous response EPR in the WS-Addressing replyTo header.

Table 3.18.4.1.2.7-1: Additional Attribute Requirements

Attribute	Value
/definitions/portType/operation@name	DocumentRegistry_RegistryStoredQuery
/definitions/portType/operation/input/@wsaw:Action	urn:ihe:iti:2007:RegistryStoredQuery
/definitions/portType/operation/output/@wsaw:Action	urn:ihe:iti:2007:RegistryStoredQuery Response

| /definitions/binding/operation/wsoap12:operation/@soapActionRequired | false |

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The following WSDL fragment shows an example of Registry Stored Query transaction definition:

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```xml
<?xml version="1.0" encoding="utf-8"?>
<definitions ...>
  ...
  <types>
        <xsd:schema elementFormDefault="qualified" targetNamespace="urn:ihe:iti:xds-b:2007">
              <xsd:import
                    namespace="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
                    schemaLocation="schema\query.xsd"/>
              ...
        </xsd:schema>
  </types>
  <message name="RegistryStoredQuery_Message">
        <documentation>Registry Stored Query</documentation>
        <part name="body" element="query:AdhocQueryRequest"/>
  </message>
  <message name="RegistryStoredQueryResponse_Message">
        <documentation>Registry Stored Query Response</documentation>
        <part name="body" element="query:AdhocQueryResponse"/>
  </message>
  ...
  <portType name="DocumentRegistry_PortType">
        <operation name="DocumentRegistry_RegistryStoredQuery">
              <input message="ihe:RegistryStoredQuery_Message"
                          wsaw:Action="urn:ihe:iti:2007:RegistryStoredQuery"/>
              <output message="ihe:RegistryStoredQueryResponse_Message"
                          wsaw:Action="urn:ihe:iti:2007:RegistryStoredQueryResponse"/>
        </operation>
        ...
  </portType>
  ...
</definitions>
```

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A full WSDL for the Document Repository and Document Registry Actors is found in ITI TF-2x: Appendix W.

3.18.4.1.2.7.1 Sample SOAP Messages

2965 The samples in the following two sections show a typical SOAP request and its relative SOAP response. The sample messages also show the WS-Addressing headers <a:Action/>, <a:MessageID/>, <a:ReplyTo/>…; these WS-Addressing headers are populated according to ITI TF-2x: Appendix V: Web Services for IHE transactions. The body of the SOAP message is omitted for brevity; in a real scenario the empty element will be populated with the appropriate metadata.

2970 Samples presented in this section are also available online on the IHE FTP site, see ITI TF-2x: Appendix W.

3.18.4.1.2.7.1.1 Sample Registry Stored Query SOAP Request

3.18.4.1.2.7.1.1.1 Synchronous Web Services Exchange

```
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<s:Envelope xmlns:s="http://www.w3.org/2003/05/soap-envelope"
xmlns:a="http://www.w3.org/2005/08/addressing">
  <s:Header>
        <a:Action s:mustUnderstand="1">urn:ihe:iti:2007:RegistryStoredQuery</a:Action>
        <a:MessageID>urn:uuid:def119ad-dc13-49c1-a3c7-e3742531f9b3</a:MessageID>
        <a:ReplyTo s:mustUnderstand="1">>
                <a:Address>http://www.w3.org/2005/08/addressing/anonymous</a:Address>
        </a:ReplyTo>
        <a:To>http://localhost/service/IHEXDSRegistry.svc</a:To>
  </s:Header>
  <s:Body>
  <query:AdhocQueryRequest
                xmlns:query="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
                xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0"
                xmlns:rs="urn:oasis:names:tc:ebxml-regrep:xsd:rs:3.0">
        <query:ResponseOption returnComposedObjects="true" returnType="LeafClass"/>
        <rim:AdhocQuery id=" urn:uuid:14d4debf-8f97-4251-9a74-a90016b0af0d ">
                <rim:Slot name="$XDSDocumentEntryPatientId">
                        <rim:ValueList>

  <rim:Value>'st3498702^^^&amp;1.3.6.1.4.1.21367.2005.3.7&amp;ISO'</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="$XDSDocumentEntryStatus">
                        <rim:ValueList>
                                <rim:Value>('urn:oasis:names:tc:ebxml-
regrep:ResponseStatusType:Approved')</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="$XDSDocumentEntryCreationTimeFrom">
                        <rim:ValueList>
                                <rim:Value>200412252300</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="$XDSDocumentEntryCreationTimeTo">
                        <rim:ValueList>
                                <rim:Value>200501010800</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="$XDSDocumentEntryHealthcareFacilityTypeCode">
                        <rim:ValueList>
                                <rim:Value>('Emergency Department')</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
        </rim:AdhocQuery>
  </query:AdhocQueryRequest>
  </s:Body>
</s:Envelope>
```

3.18.4.1.2.7.1.1.2 Asynchronous Web Services Exchange

```
3025   <s:Envelope
            xmlns:s="http://www.w3.org/2003/05/soap-envelope"
            xmlns:a="http://www.w3.org/2005/08/addressing">
         <s:Header>
            <a:Action s:mustUnderstand="1">urn:ihe:iti:2007:RegistryStoredQuery</a:Action>
3030        <a:MessageID>urn:uuid:a02ca8cd-86fa-4afc-a27c-616c183b2055</a:MessageID>
            <a:ReplyTo>
                   <a:Address> http://192.168.2.4:9080/XDS/DocumentConsumerReceiver.svc </a:Address>
            </a:ReplyTo>
            <a:To
     s:mustUnderstand="1">http://localhost:2647/XdsService/DocumentRegistryReceiver.svc</a:To>
3035     </s:Header>
         <s:Body>
            <query:AdhocQueryRequest
                        xmlns:query="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
                        xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0"
3040                    xmlns:rs="urn:oasis:names:tc:ebxml-regrep:xsd:rs:3.0">
                 <query:ResponseOption returnComposedObjects="true" returnType="LeafClass"/>
                 <rim:AdhocQuery id=" urn:uuid:14d4debf-8f97-4251-9a74-a90016b0af0d ">
                       <rim:Slot name="$XDSDocumentEntryPatientId">
                              <rim:ValueList>
3045
        <rim:Value>st3498702^^^&amp;1.3.6.1.4.1.21367.2005.3.7&amp;ISO</rim:Value>
                              </rim:ValueList>
                       </rim:Slot>
                       <rim:Slot name="$XDSDocumentEntryStatus">
                              <rim:ValueList>
3050                                 <rim:Value>('urn:oasis:names:tc:ebxml-
        regrep:ResponseStatusType:Approved')</rim:Value>
                              </rim:ValueList>
                       </rim:Slot>
3055                   <rim:Slot name="$XDSDocumentEntryCreationTimeFrom">
                              <rim:ValueList>
                                     <rim:Value>200412252300</rim:Value>
                              </rim:ValueList>
                       </rim:Slot>
3060                   <rim:Slot name="$XDSDocumentEntryCreationTimeTo">
                              <rim:ValueList>
                                     <rim:Value>200501010800</rim:Value>
                              </rim:ValueList>
                       </rim:Slot>
3065                   <rim:Slot name="$XDSDocumentEntryHealthcareFacilityTypeCode">
                              <rim:ValueList>
                                     <rim:Value>('Emergency Department')</rim:Value>
                              </rim:ValueList>
                       </rim:Slot>
3070             </rim:AdhocQuery>
            </query:AdhocQueryRequest>
         </s:Body>
     </s:Envelope>
```

3.18.4.1.2.7.1.2 Sample Registry Stored Query SOAP Response

3075 **3.18.4.1.2.7.1.2.1 Synchronous Web Services Exchange**

```
     <s:Envelope xmlns:s="http://www.w3.org/2003/05/soap-envelope"
     xmlns:a="http://www.w3.org/2005/08/addressing">
       <s:Header>
            <a:Action s:mustUnderstand="1">urn:ihe:iti:2007:RegistryStoredQueryResponse</a:Action>
3080        <a:RelatesTo>urn:uuid:def119ad-dc13-49c1-a3c7-e3742531f9b3</a:RelatesTo>
       </s:Header>
       <s:Body>
            <query:AdhocQueryResponse xmlns:query="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"/>
       </s:Body>
3085 </s:Envelope>
```

3.18.4.1.2.7.1.2.2 Asynchronous Web Services Exchange

```
<s:Envelope xmlns:s="http://www.w3.org/2003/05/soap-envelope"
            xmlns:a="http://www.w3.org/2005/08/addressing">
  <s:Header>
        <a:Action s:mustUnderstand="1">urn:ihe:iti:2007:RegistryStoredQueryResponse</a:Action>
<a:MessageID>urn:uuid:D6C21225-8E7B-454E-9750-821622C099DB</a:MessageID>
        <a:RelatesTo>urn:uuid:a02ca8cd-86fa-4afc-a27c-616c183b2055</a:RelatesTo>
              <a:To
s:mustUnderstand="1">http://localhost:2647/XdsService/DocumentConsumerReceiver.svc</a:To>
  </s:Header>
  <s:Body>
        <query:AdhocQueryResponse status="Success"
                    xmlns:query="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
                    xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0">

              <!—Rest of AdhocQueryResponse message goes here -->

        </query:AdhocQueryResponse>
  </s:Body>
</s:Envelope>
```

3.18.4.1.3 Expected Actions

The Document Registry shall:

1. Accept a parameterized query in an AdhocQueryRequest message
2. Verify the required parameters are included in the request. Additionally, special rules documented in the above section 'Parameters for Required Queries' shall be verified.
3. Errors shall be returned for the following conditions:

    *   Unknown query ID (error code XDSUnknownStoredQuery)

    *   Required parameter missing (error code XDSStoredQueryParamNumber)

    See ITI TF-3: 4.2.4 Error Reporting for additional error codes and general information on formatting error responses.

4. Process the query as appropriate:

    *   **For Document Registry Actors:** Retrieve the internal implementation template of the query based on the Query ID supplied in the query request. Substitute appropriate parameters as indicated in Section 3.18.4.1.2.3.7 Parameters for Required Queries and execute the query. The Document Registry shall accept the homeCommunityId value if it is specified in a Registry Stored Query request. If a patient identifier specified as a parameter to the query is unknown to the Document Registry it shall return a successful response with no elements.

    *   **For Initiating Gateway Actors:**

        *   Initiating Gateway receives a Registry Stored Query by patient id: It shall determine a) which Responding Gateways this request should be sent to and b) what patient id to use in the Cross Gateway Query. Detailed specification of these steps is not in the intended scope of this profile. Combination of this profile with other existing profiles (e.g., PIX/PDQ), future profiles or configuration mechanisms is possible. Please refer

___

to ITI TF-1: E.7 XCA and Patient Identification Management for possible use of existing profiles PIX and PDQ. For each Responding Gateway identified, the Initiating Gateway shall update the query with the correct patient identifier corresponding to the Responding Gateway's community and initiates a Cross Gateway Query transaction to the Responding Gateway. If the Initiating Gateway is grouped with a Document Consumer it will also initiate a Registry Stored Query to the local Document Registry.

- Initiating Gateway receives a Registry Stored Query by entryUUID or uniqueID: Verify homeCommunityId has been specified. If missing return Failure status with XDSMissingHomeCommunityId error code. If homeCommunityId not recognized return a Failure or PartialSuccess status with XDSUnknownCommunity error code. Determine which Responding Gateway to contact by using the homeCommunityId to obtain the Web Services endpoint of the Responding Gateway. The process of obtaining the Web Services endpoint is not further specified in this profile. If the homeCommunityId represents the local community the Initiating Gateway shall initiate a Registry Stored Query to the local Document Registry. The Initiating Gateway shall specify the homeCommunityId in the Cross Gateway Query by entryUUID or uniqueID which identifies the community associated with the Responding Gateway. For details regarding the homeCommunityId see Section 3.18.4.1.2.3.8 and ITI TF-2b: 3.38.4.1.2.1.

5. Return XML formatted metadata in an AdhocQueryResponse message.

- The Document Registry may specify the homeCommunityID attribute on any appropriate elements

- The Initiating Gateway shall specify the homeCommunityID attribute on all appropriate elements. If the Initiating Gateway contacted a Document Registry, the Document Registry response might not contain the homeCommunityId. In this case the Initiating Gateway shall add the homeCommunityId of its local community to the Document Registry response prior to including it in the consolidated response to the Document Consumer. The homeCommunityId attribute corresponds to the 'home' attribute specified in the ebRIM standard. For more information on homeCommunityId see Section 3.18.4.1.2.3.8 and ITI TF-2b: 3.38.4.1.2.1. The elements that shall include the home attribute are:

- If returntype="LeafClass" the ExtrinsicObject and RegistryPackage elements shall contain the home attribute.

- If returnType="ObjectRef" the ObjectRef element shall contain the home attribute

- If the Initiating Gateway is unable to get an appropriate response from a selected Responding Gateway it shall include in its response to the Document Consumer an XDSUnavailableCommunity error code where the context identifies the unavailable Responding Gateway. In this case, and any other error from a Responding Gateway, the Initiating Gateway shall return to the Document Consumer either a Failure status (if no part was successful) or a PartialSuccess status.

6. When the Document Consumer receives the query response from the Initiating Gateway it must account for two aspects of the response; namely that a) the homeCommunityId attribute will be specified b) the Document Consumer may not be able to map the repository id value directly to the Document Repository. XCA assumes a common coding/vocabulary scheme is used across all communities. For example, all communities shall have common privacy consent vocabularies. The Document Consumer shall retain the values of the homeCommunityId attribute for future interaction with the Initiating Gateway.

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This transaction may return both errors and results in an AdhocQueryResponse message. To do this, the returned AdhocQueryResponse message would contain both a RegistryObjectList element and a RegistryErrorList element. See ITI TF-3: 4.2.4 Error Reporting for additional details on formatting of error responses.

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If the Document Consumer supports the Delayed Document Assembly Option it shall accept the following values of hash and size to indicate that the assembly of the document content has been delayed until the document is retrieved.

3185

- size = 0 (zero)
- hash = da39a3ee5e6b4b0d3255bfef95601890afd80709 (SHA1 hash of a zero length file)

3.18.4.1.3.1 Sample Query Request

3190

This example query specifies:

- The FindDocuments query (id attribute of AdhocQuery element)
- patientID st3498702^^^&1.3.6.1.4.1.21367.2005.3.7&ISO
- Return Approved documents only
- Time range (creation time) 200412252300 to 200501010800
- Healthcare Facility Type Code of Emergency Department

3195

Note that ebRS 3.0 specifies the use of Slot to specify name/value(s) pairs as parameters to a Stored Query.

```
3200    <query:AdhocQueryRequest
               xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
               xmlns:query="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
               xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0"
               xmlns:rs="urn:oasis:names:tc:ebxml-regrep:xsd:rs:3.0">
3205      <query:ResponseOption returnComposedObjects="true" returnType="LeafClass"/>
        <rim:AdhocQuery id="urn:uuid:14d4debf-8f97-4251-9a74-a90016b0af0d">
               <rim:Slot name="$XDSDocumentEntryPatientId">
                     <rim:ValueList>

3210      <rim:Value>'st3498702^^^&amp;1.3.6.1.4.1.21367.2005.3.7&amp;ISO'</rim:Value>
                     </rim:ValueList>
               </rim:Slot>
               <rim:Slot name="$XDSDocumentEntryStatus">
                     <rim:ValueList>
3215                        <rim:Value>('urn:oasis:names:tc:ebxml-
        regrep:StatusType:Approved')</rim:Value>
                     </rim:ValueList>
               </rim:Slot>
               <rim:Slot name="$XDSDocumentEntryCreationTimeFrom">
3220                  <rim:ValueList>
                            <rim:Value>200412252300</rim:Value>
                     </rim:ValueList>
               </rim:Slot>
               <rim:Slot name="$XDSDocumentEntryCreationTimeTo">
3225                  <rim:ValueList>
                            <rim:Value>200501010800</rim:Value>
                     </rim:ValueList>
               </rim:Slot>
               <rim:Slot name="$XDSDocumentEntryHealthcareFacilityTypeCode">
3230                  <rim:ValueList>
                            <rim:Value>('Emergency Department')</rim:Value>
                     </rim:ValueList>
               </rim:Slot>
        </rim:AdhocQuery>
3235    </query:AdhocQueryRequest>
```

The following example shows a get documents query for XDSDocumentEntry objects for a specified list of entryUUIDs (urn:uuid:aff99222-18e3-4812-bc71-c410b2860e18, urn:uuid:aff99222-18e3-4812-bc71-c410b2860e19, urn:uuid:aff99222-18e3-4812-bc71-
3240   c410b2860e20) and corresponding homeCommunityId value (urn:oid:1.2.3):

```
        <query:AdhocQueryRequest … >
            <query:ResponseOption returnComposedObjects="true" returnType="LeafClass"/>
            <rim:AdhocQuery id="urn:uuid:5c4f972b-d56b-40ac-a5fc-c8ca9b40b9d4" home="urn:oid:1.2.3">
3245            <rim:Slot name="$XDSDocumentEntryEntryUUID">
                    <rim:ValueList>
                      <rim:Value>
                     ("urn:uuid:aff99222-18e3-4812-bc71-c410b2860e18",
                             "urn:uuid:aff99222-18e3-4812-bc71-c410b2860e19",
3250             "urn:uuid:aff99222-18e3-4812-bc71-c410b2860e20")
                      </rim:Value>
                    </rim:ValueList>
            </rim:Slot>
        </rim:AdhocQuery>
3255    </query:AdhocQueryRequest>
```

3.18.4.1.3.2 Intentionally Left Blank

3.18.4.1.3.3 Sample Query Response

This sample query response corresponds to the above query. Note that the query response message is coded in version 3.0 ebRIM and ebRS. This sample response and the ebXML Registry version 3.0 schema files are available online. The Implementation Guide found at http://wiki.ihe.net/index.php?title=ITI_Implementation_Guide contains such supplemental material.

```
<?xml version="1.0" encoding="UTF-8"?>
<AdhocQueryResponse
        xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
        xsi:schemaLocation="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0
                file:/Users/bill/RegSchema/V3.0/query.xsd"
        xmlns="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
        xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0"
        status="urn:oasis:names:tc:ebxml-regrep:ResponseStatusType:Success">
  <rim:RegistryObjectList>
        <rim:ExtrinsicObject
                        xmlns:q="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
                        xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0"
                        id="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
                        isOpaque="false"
                        mimeType="text/xml"
                        objectType="urn:uuid:7edca82f-054d-47f2-a032-9b2a5b5186c1"
                        status="urn:oasis:names:tc:ebxml-regrep:StatusType:Approved">
                <rim:Slot name="URI">
                        <rim:ValueList>
                                <rim:Value>http://localhost:8080/XDS/Repository/08a15a6f-5b4a-42de-
8f95-89474f83abdf.xml</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="authorInstitution">
                        <rim:ValueList>
                                <rim:Value>Some
Hospital^^^^^^^^^1.2.3.4.5.6.7.8.9.1789.45</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="creationTime">
                        <rim:ValueList>
                                <rim:Value>200412261119</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="hash">
                        <rim:ValueList>
                                <rim:Value>4cf4f82d78b5e2aac35c31bca8cb79fe6bd6a41e</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="languageCode">
                        <rim:ValueList>
                                <rim:Value>en-us</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="serviceStartTime">
                        <rim:ValueList>
                                <rim:Value>200412230800</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="serviceStopTime">
                        <rim:ValueList>
                                <rim:Value>200412230801</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="size">
                        <rim:ValueList>
                                <rim:Value>54449</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="sourcePatientId">
                        <rim:ValueList>
                                <rim:Value>jd12323^^^wsh</rim:Value>
                        </rim:ValueList>
                </rim:Slot>
                <rim:Slot name="sourcePatientInfo">
                        <rim:ValueList>
                                <rim:Value>PID-3|pid1^^^domain</rim:Value>
                                <rim:Value>PID-5|Doe^John^^^</rim:Value>
```

```
                                    <rim:Value>PID-7|19560527</rim:Value>
                                    <rim:Value>PID-8|M</rim:Value>
3335                                <rim:Value>PID-11|100 Main St^^Metropolis^Il^44130^USA</rim:Value>
                            </rim:ValueList>
                        </rim:Slot>
                        <rim:Name>
                            <rim:LocalizedString charset="UTF-8" value="Sample document 1"
3340    xml:lang="en-us"/>
                        </rim:Name>
                        <rim:Description/>
                        <rim:Classification
                            classificationScheme="urn:uuid:41a5887f-8865-4c09-adf7-
3345    e362475b143a"
                            classifiedObject="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
                            id="urn:uuid:ac872fc0-1c6e-439f-84d1-f76770a0ccdf"
                            nodeRepresentation="Education"
                            objectType="Urn:oasis:names:tc:ebxml-
3350    regrep:ObjectType:RegistryObject:Classification">
                            <rim:Slot name="codingScheme">
                                <rim:ValueList>
                                    <rim:Value>Connect-a-thon classCodes</rim:Value>
                                </rim:ValueList>
3355                        </rim:Slot>
                            <rim:Name>
                                <rim:LocalizedString charset="UTF-8" value="Education"
        xml:lang="en-us"/>
                            </rim:Name>
3360                        <rim:Description/>
                        </rim:Classification>
                        <rim:Classification
                            classificationScheme="urn:uuid:f4f85eac-e6cb-4883-b524-
3365    f2705394840f"
                            classifiedObject="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
                            id="urn:uuid:f1a8c8e4-3593-4777-b7e0-8b0773378705"
                            nodeRepresentation="C"
                            objectType="Urn:oasis:names:tc:ebxml-
3370    regrep:ObjectType:RegistryObject:Classification">
                            <rim:Slot name="codingScheme">
                                <rim:ValueList>
                                    <rim:Value>Connect-a-thon confidentialityCodes</rim:Value>
                                </rim:ValueList>
3375                        </rim:Slot>
                            <rim:Name>
                                <rim:LocalizedString charset="UTF-8" value="Celebrity"
        xml:lang="en-us"/>
                            </rim:Name>
3380                        <rim:Description/>
                        </rim:Classification>
                        <rim:Classification
                            classificationScheme="urn:uuid:a09d5840-386c-46f2-b5ad-
3385    9c3699a4309d"
                            classifiedObject="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
                            id="urn:uuid:b6e49c73-96c8-4058-8c95-914d83bd262a"
                            nodeRepresentation="CDAR2/IHE 1.0"
                            objectType="Urn:oasis:names:tc:ebxml-
        regrep:ObjectType:RegistryObject:Classification">
3390                        <rim:Slot name="codingScheme">
                                <rim:ValueList>
                                    <rim:Value>Connect-a-thon formatCodes</rim:Value>
                                </rim:ValueList>
                            </rim:Slot>
                            <rim:Name>
3395                            <rim:LocalizedString charset="UTF-8" value="CDAR2/IHE 1.0"
        xml:lang="en-us"/>
                            </rim:Name>
                            <rim:Description/>
                        </rim:Classification>
3400                    <rim:Classification
```

```
                                classificationScheme="urn:uuid:f33fb8ac-18af-42cc-ae0e-
ed0b0bdb91e1"
                                classifiedObject="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
                                id="urn:uuid:61e2b376-d74a-4984-ac21-dcd0b8890f9d"
                                nodeRepresentation="Emergency Department"
                                objectType="Urn:oasis:names:tc:ebxml-
regrep:ObjectType:RegistryObject:Classification">
                            <rim:Slot name="codingScheme">
                                <rim:ValueList>
                                    <rim:Value>Connect-a-thon
healthcareFacilityTypeCodes</rim:Value>
                                </rim:ValueList>
                            </rim:Slot>
                            <rim:Name>
                                <rim:LocalizedString charset="UTF-8" value="Assisted Living"
xml:lang="en-us"/>
                            </rim:Name>
                            <rim:Description/>
                    </rim:Classification>
                    <rim:Classification
                                classificationScheme="urn:uuid:cccf5598-8b07-4b77-a05e-
ae952c785ead"
                                classifiedObject="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
                                id="urn:uuid:fb7677c5-c42f-485d-9010-dce0f3cd4ad5"
                                nodeRepresentation="Cardiology"
                                objectType="Urn:oasis:names:tc:ebxml-
regrep:ObjectType:RegistryObject:Classification">
                            <rim:Slot name="codingScheme">
                                <rim:ValueList>
                                    <rim:Value>Connect-a-thon practiceSettingCodes</rim:Value>
                                </rim:ValueList>
                            </rim:Slot>
                            <rim:Name>
                                <rim:LocalizedString charset="UTF-8" value="Cardiology"
xml:lang="en-us"/>
                            </rim:Name>
                            <rim:Description/>
                    </rim:Classification>
                    <rim:Classification
                                classificationScheme="urn:uuid:f0306f51-975f-434e-a61c-
c59651d33983"
                                classifiedObject="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
                                id="urn:uuid:0a8a8ed9-8be5-4a63-9b68-a511adee8ed5"
                                nodeRepresentation="34098-4"
                                objectType="Urn:oasis:names:tc:ebxml-
regrep:ObjectType:RegistryObject:Classification">
                            <rim:Slot name="codingScheme">
                                <rim:ValueList>
                                    <rim:Value>LOINC</rim:Value>
                                </rim:ValueList>
                            </rim:Slot>
                            <rim:Name>
                                <rim:LocalizedString
                                            charset="UTF-8"
                                            value="Conference Evaluation Note" xml:lang="en-
us"/>
                            </rim:Name>
                            <rim:Description/>
                    </rim:Classification>
                    <rim:ExternalIdentifier
                                id="urn:uuid:db9f4438-ffff-435f-9d34-d76190728637"
                                registryObject="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
                                identificationScheme="urn:uuid:58a6f841-87b3-4a3e-92fd-
a8ffeff98427"
                                objectType="ExternalIdentifier"
                                value="st3498702^^^&amp;1.3.6.1.4.1.21367.2005.3.7&amp;ISO">
                            <rim:Name>
                                <rim:LocalizedString
```

```
3470                                              charset="UTF-8"
                                                 value="XDSDocumentEntry.patientId"
                                                 xml:lang="en-us"/>
                             </rim:Name>
                             <rim:Description/>
                     </rim:ExternalIdentifier>
3475                 <rim:ExternalIdentifier
                             id="urn:uuid:c3fcbf0e-9765-4f5b-abaa-b37ac8ff05a5"
                             registryObject="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
                             identificationScheme="urn:uuid:2e82c1f6-a085-4c72-9da3-
8640a32e42ab"
3480                         objectType="ExternalIdentifier"
                             value="1.3.6.1.4.1.21367.2005.3.99.1.1010">
                         <rim:Name>
                             <rim:LocalizedString
                                     charset="UTF-8"
3485                                 value="XDSDocumentEntry.uniqueId"
                                     xml:lang="en-us"/>
                         </rim:Name>
                         <rim:Description/>
                     </rim:ExternalIdentifier>
3490         </rim:ExtrinsicObject>
         <rim:ObjectRef xmlns:q="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0" id="urn:uuid:41a5887f-8865-4c09-adf7-
e362475b143a"/>
             <rim:ObjectRef xmlns:q="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
3495 xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0" id="urn:uuid:f4f85eac-e6cb-4883-b524-
f2705394840f"/>
             <rim:ObjectRef xmlns:q="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0" id="urn:uuid:a09d5840-386c-46f2-b5ad-
9c3699a4309d"/>
3500         <rim:ObjectRef xmlns:q="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0" id="urn:uuid:f33fb8ac-18af-42cc-ae0e-
ed0b0bdb91e1"/>
             <rim:ObjectRef xmlns:q="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0" id="urn:uuid:cccf5598-8b07-4b77-a05e-
3505 ae952c785ead"/>
             <rim:ObjectRef xmlns:q="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0" id="urn:uuid:f0306f51-975f-434e-a61c-
c59651d33983"/>
             <rim:ObjectRef xmlns:q="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
3510 xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0" id="urn:uuid:58a6f841-87b3-4a3e-92fd-
a8ffeff98427"/>
             <rim:ObjectRef xmlns:q="urn:oasis:names:tc:ebxml-regrep:xsd:query:3.0"
xmlns:rim="urn:oasis:names:tc:ebxml-regrep:xsd:rim:3.0" id="urn:uuid:2e82c1f6-a085-4c72-9da3-
8640a32e42ab"/>
3515   </rim:RegistryObjectList>
</AdhocQueryResponse>
```

The following query response is the same as above (repeated sections replaced with …) with the homeCommunityId attribute specified. Subsequent requests specifying entryUUID of

3520 `urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf` or uniqueID of `1.3.6.1.4.1.21367.2005.3.99.1.1010` shall include the homeCommunityId value of urn:oid:1.2.3 in the query.

```
3525   <?xml version="1.0" encoding="UTF-8"?>
       <AdhocQueryResponse ... status="Success">
             <rim:RegistryObjectList>
                <rim:ExtrinsicObject … id="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
       isOpaque="false"  mimeType="text/xml" objectType="urn:uuid:7edca82f-054d-47f2-a032-9b2a5b5186c1"
3530   status="urn:oasis:names:tc:ebxml-regrep:StatusType:Approved" home="urn:oid:1.2.3">

       …

               <rim:ExternalIdentifier id="urn:uuid:c3fcbf0e-9765-4f5b-abaa-b37ac8ff05a5"
3535   registryObject="urn:uuid:08a15a6f-5b4a-42de-8f95-89474f83abdf"
       identificationScheme="urn:uuid:2e82c1f6-a085-4c72-9da3-8640a32e42ab"
       objectType="ExternalIdentifier" value="1.3.6.1.4.1.21367.2005.3.99.1.1010">
                     <rim:Name>
                        <rim:LocalizedString charset="UTF-8" value="XDSDocumentEntry.uniqueId"
3540   xml:lang="en-us"/>
                     </rim:Name>
                     <rim:Description/>
                   </rim:ExternalIdentifier>
                </rim:ExtrinsicObject>
3545         </rim:RegistryObjectList>
       </AdhocQueryResponse>
```

3.18.4.1.3.4 Intentionally Left Blank

3.18.4.1.3.5 Basic Patient Privacy Enforcement Option

3550 If the Basic Patient Privacy Enforcement Option is implemented:

1. All Document Consumer Actors may provide a list of confidentialityCode in XDS Registry Stored Query Transaction and the XDS Registry will return only document that have at least one matching confidentialityCode. In this way documents without at least one of the requested codes will not be returned.

3555 2. The Document Consumer shall be able to be configured with the Patient Privacy Policies, Patient Privacy Policy Identifiers (OIDs) and associated information necessary to understand and enforce the XDS Affinity Domain Policy. The details of this are product specific and not specified by IHE.

3. The Document Consumer shall not allow access to documents for which the Document Consumer does not understand at least one of the confidentialityCode returned. This assures that a Document Consumer will not improperly handle documents with confidentialityCode that may be more restrictive than the Document Consumer is configured to support.

4. The Document Consumer shall abide by the XDS Affinity Domain Policies represented by the confidentialityCode in the metadata associated with the document. The Document Consumer likely will have user access controls or business rule capabilities to determine the details of how confidentiality codes apply to query results. The details of this are product specific and not specified by IHE. These rules shall reduce the query results to only those that are appropriate to the current situation for that actor and user.

3570 5. Note: The Registry is already required to return only documents that match the requested confidentialityCode (filter) indicated in the Registry Stored Query.

6. Note: Products implementing the Document Registry may be able to further filter Registry Stored Query results through looking at all the Patient Privacy Acknowledgement Documents registered for the patient that have the availabilityStatus of Approved and for which have not expired.

3.18.4.1.3.6 Basic Patient Privacy Proof Option

If the Basic Patient Privacy Consents Proof Option is implemented:

1. The Document Consumer shall be capable of querying for 'Approved' Patient Privacy Acknowledgement Documents in the XDS Affinity Domain. This query should be done by document class so as to catch both formats of document (Consent). The Document Consumer shall be capable of recognizing the eventCodeList from the resulting XDS Metadata. There is no required handling of Patient Privacy Consent Acknowledgement Document XDS Metadata. There is no requirement for the Document Consumer to retrieve the Patient Privacy Acknowledgement Document content.

3.18.5 Security Considerations

Relevant XDS Affinity Domain Security background is discussed in the XDS Security Considerations Section (see ITI TF-1: 10.7).

3.18.5.1 Audit Record Considerations

The Registry Stored Query [ITI-18] transaction is a Query Information event as defined in Table 3.20.4.1.1.1-1. If a status of PartialSuccess is returned, the Actors involved shall record both a success and a failure audit event. The Actors involved shall record audit events according to the following:

3.18.5.1.1 Document Consumer audit message:

	Field Name	Opt	Value Constraints
Event **AuditMessage/** **EventIdentification**	EventID	M	EV(110112, DCM, "Query")
	EventActionCode	M	"E" (Execute)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-18", "IHE Transactions", "Registry Stored Query")
Source (Document Consumer) (1)			
Human Requestor (0..n)			
Destination (Document Registry) (1)			
Audit Source (Document Consumer) (1)			
Patient (0..1)			
Query Parameters (1)			

Where:

Source **AuditMessage/ ActiveParticipant**	UserID	M	If Asynchronous Web Services Exchange is being used, the content of the <wsa:ReplyTo/> element. Otherwise, not specialized.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Human Requestor (if known) **AuditMessage/ ActiveParticipant**	UserID	M	Identity of the human that initiated the transaction.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	U	Access Control role(s) the user holds that allows this transaction.
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*

Destination **AuditMessage/ ActiveParticipant**	UserID	M	SOAP endpoint URI.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

3600

Audit Source **AuditMessage/ AuditSourceIdentification**	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient **(AuditMessage/ ParticipantObjectIdentifi cation)**	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*

Query Parameters (AuditMessage/ ParticipantObjectIdentification)	Field Name	Opt	Value Constraints
	ParticipantObjectTypeCode	M	"2" (system object)
	ParticipantObjectTypeCodeRole	M	"24" (query)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	M	EV("ITI-18", "IHE Transactions", "Registry Stored Query")
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	Stored Query ID (UUID)
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	M	the AdhocQueryRequest, base64 encoded.
	ParticipantObjectDetail	C	The ParticipantObjectDetail element may occur more than once. In one element, set "QueryEncoding"as the value of the attribute *type*, Set the attribute *value* to the character encoding, such as "UTF-8", used to encode the ParticipantObjectQuery before base64 encoding. In another element, set "urn:ihe:iti:xca:2010:homeCommunityId" as the value of the attribute type and the value of the homeCommunityID as the value of the attribute value, if known.

3.18.5.1.2 Document Registry audit message:

3605

	Field Name	Opt	Value Constraints
Event AuditMessage/ EventIdentification	EventID	M	EV(110112, DCM, "Query")
	EventActionCode	M	"E" (Execute)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-18", "IHE Transactions", "Registry Stored Query")
Source (Document Consumer) (1)			
Destination (Document Registry) (1)			
Audit Source (Document Registry) (1)			
Patient (0..1)			
Query Parameters (1)			

Where:

Source AuditMessage/ ActiveParticipant	UserID	M	If Asynchronous Web Services Exchange is being used, the content of the <wsa:ReplyTo/> element. Otherwise, not specialized.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

3610

Destination AuditMessage/ ActiveParticipant	UserID	M	SOAP endpoint URI.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Audit Source AuditMessage/ AuditSourceIdentification	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient (AuditMessage/ ParticipantObjectIdentifi cation)	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*

| Query Parameters (AuditMessage/ ParticipantObjectIdentifi cation)	ParticipantObjectTypeCode	M	"2" (system object)
	ParticipantObjectTypeCodeRole	M	"24" (query)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	M	EV("ITI-18", "IHE Transactions", "Registry Stored Query")
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	Stored Query ID (UUID)
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	M	the AdhocQueryRequest, base64 encoded.
	ParticipantObjectDetail	C	The ParticipantObjectDetail element may occur more than once. In one element, set "QueryEncoding"as the value of the attribute *type*, Set the attribute *value* to the character encoding, such as "UTF-8", used to encode the ParticipantObjectQuery before base64 encoding. In another element, set "urn:ihe:iti:xca:2010:homeCommunityId" as the value of the attribute type and the value of the homeCommunityID as the value of the attribute value, if known.

3615

3.19 Authenticate Node [ITI-19]

This section corresponds to transaction [19] of the IHE ITI Technical Framework. Transaction [ITI-19] is used by the Secure Node Actors

3.19.1 Scope

3620 In the Authenticate Node transaction, the local Secure Node presents its identity to a remote Secure Node, and authenticates the identity of the remote node. After this mutual authentication, other secure transactions may take place through this secure pipe between the two nodes.

In addition, the Secure Node authenticates the identity of the user who requests access to the node. This user authentication is a local operation that does not involve communication with a 3625 remote node.

3.19.2 Use Case Roles
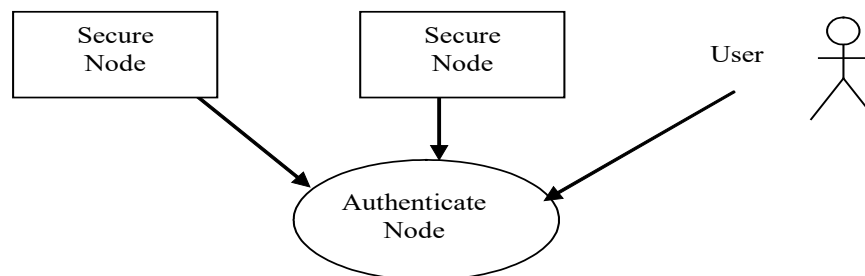
Actor: Secure Node

Role: Establish a protocol specific trust relationship between two nodes in a network.
3630 Establishes the identity of a user, and authorizes access to the patient data and applications at the node.

Actor: User

Role: Someone who wants to have access to the data and applications available at the node.

3.19.3 Referenced Standards

3635 **DICOM:**

- PS3.15 Security Profiles. Annex B1: The Basic TLS Secure Transport Connection Profile.

IETF:

- RFC2246 - Transport Layer Security (TLS) 1.0 and later revisions

3640
- RFC7525 - Recommendations for Secure Use of Transport Layer Security (TLS) and Datagram Transport Layer Security (DTLS)

- RFC3851 - Secure/Multipurpose Internet Mail Extensions (S/MIME) Version 3.1 Message Specification

3645 **ITU-T:**

- Recommendation X.509 (03/00). "Information technology - Open Systems Interconnection - The directory: Public-key and attribute certificate frameworks"

3.19.4 Interaction Diagram

Note: This diagram does not imply sequencing of Authentication Node and Local User Authentication.
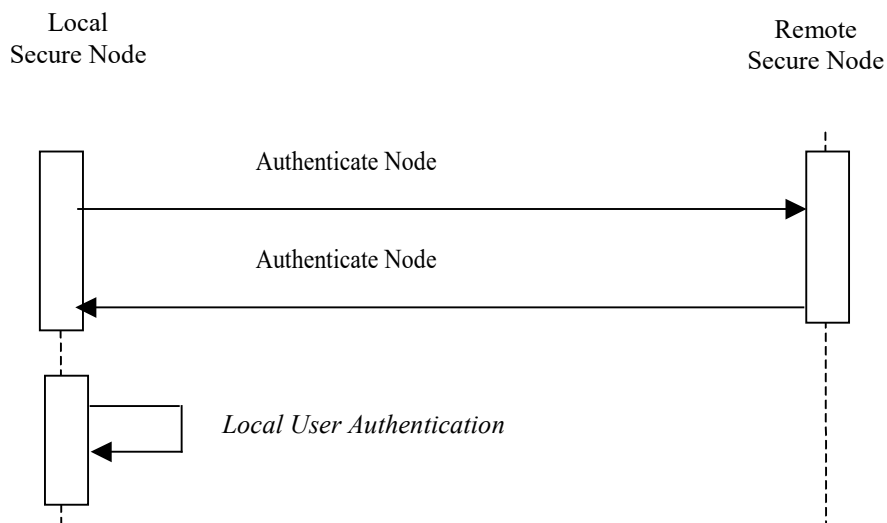
3650

3.19.5 Trigger Events

The Local Secure Node starts the authentication process with the Remote Secure Node when information exchange between the two nodes is requested. The first transaction shall be the 3655 Authenticate Node transaction, and all other PHI transactions performed by IHE actors shall be secure transactions. This authentication process is needed when a secure connection is established.

The Basic Secure Node shall always apply the Authenticate Node process to every DICOM, HTTP, or HL7 connection.

3660 ### 3.19.6 Message Semantics

The Authenticate node transaction involves the exchange of certificates representing the identities of the nodes. These identities are used to authenticate the nodes, to inform authorization, and audit logging.

3.19.6.1 Certificate Validation

3665 The local organization (e.g., XDS Affinity Domain) will make the choice of what mixture of chain of trust and direct comparison is used to authenticate communications. This may be

entirely based on chaining trust to selected CAs, entirely based upon provision of node certificates for direct comparison, or a mixture of both.

3670
> Note: The CAs used for ATNA chain of trust will be different than the default browser trusted list of CAs used for authenticating internet web servers. A worldwide CA, such as VeriSign, is not generally trusted to determine which individual nodes within an organization should and should not communicate patient identifiable information.

When Authenticating the Remote Secure Node, the Local Secure Node:

3675
- Shall be able to perform certificate validation based on signature by a trusted CA (See Section 3.19.6.1.1) and

- Shall be able to perform direct certificate validation to a set of trusted certificates (See Section 3.19.6.1.2)

It may reject communications when the certificate validation fails, or may restrict communications to only that which is appropriate for an unidentified other party.

3680 ### 3.19.6.1.1 Chain to a trusted certificate authority

The Secure Node or Secure Application:

- Shall provide the means for configuring which CAs are trusted to authenticate node certificates for use in a chain of trust. These CAs shall be identified by means of the public signing certificate for the signing CA.

3685
- Shall support digital certificates encoded using both Deterministic Encoding Rules (DER) and Basic Encoding Rules (BER).

- Shall accept communications for which there is a certificate that is signed by a CA that is listed as a trusted signing authority.

3.19.6.1.2 Direct certificate validation

3690 The Secure Node or Secure Application:

- Shall provide means for installing of the required certificates, for example, via removable media or network interchange (where the set of trusted certificates can be a mixture of CA signed certificates and self-signed certificates).

- Shall support digital certificates encoded using both Deterministic Encoding Rules (DER) 3695 and Basic Encoding Rules (BER).

- Shall accept communications for which there is a certificate configured as acceptable for direct certificate validation.

3.19.6.1.3 Other Certificate requirements

The Secure Node shall not require any specific certificate attribute contents, nor shall it reject 3700 certificates that contain unknown attributes or other parameters. Note that for node certificates the CN often is a hostname, attempting to use this hostname provides no additional security and will introduce a new failure mode (e.g., DNS failure).

The certificates used for mutual authentication shall be X509 certificates based on RSA key with key length in the range of 1024-4096, where the key length chosen is based on local site policy.
3705   Maximum expiration time acceptable for certificates should be defined in the applicable security policy. The IHE Technical Framework recommends a maximum expiration time of 2 years.

The method used to determine whether a node is authorized to perform transactions is not specified. This may be use of a set of trusted certificates, based on some attribute value contained in the certificates, access control lists, or some other method. Using a certificate chain back to an
3710   external trusted certificate authority to determine authorizations is strongly discouraged.

3.19.6.2 All Connections carrying Protected Information (PI)

When configured for use on a physically secured network, the normal connection mechanisms may be used.

When configured for use not on a physically secured network implementations shall use the TLS
3715   protocol, and the following ciphersuite shall be supported:

TLS_RSA_WITH_AES_128_CBC_SHA.

The recommended "well-known port 2762" as specified by DICOM shall be used when the Secure node is configured for use not on a physically secured network. When the secure node is configured for use on a physically secured network, a different port number shall be used,
3720   preferably the standard port 104. HL7 does not specify port numbers, but the port number used when configured for use on a physically secured network shall be different than the port number used when configured for use not on a physically secured network.

All Secure Nodes shall be configurable for use on a physically secured network or not on a physically secured network. If Secure Node is configured for physical security, then it may use
3725   the non-TLS DICOM port and protocol.

See RFC7525 "Recommendations for Secure Use of Transport Layer Security (TLS) and Datagram Transport Layer Security (DTLS)" for recommendations on proper use of TLS and appropriate fallback rules.

3.19.6.3 This Header is empty to preserve header numbering

3730   ### 3.19.6.4 Web-Services carrying Protected Information (PI)

A trusted association shall be established between the two nodes utilizing WS-I Basic Security Profile Version 1.1. This association will be used for all secure transactions between the IHE actors in the two nodes. Note that Section 3.19.6.2 "All Connections carrying Protected Information (PI)" and WS-I Basic Security Profile – Section 3 "Transport Layer Mechanisms"
3735   (i.e., http://ws-i.org/profiles/basic-security/1.1/transport) are identical and interoperable.

3.19.6.5 SMTP communication

When configured to use email on a network that is not physically secured, implementations shall use S/MIME (RFC3851):

- The message shall be signed using the signedData format (i.e., encapsulated signature rather than multipart/signed format for detached signature) making the signature verification easier for the remote node. The email shall be digitally signed by the sender, by a one level only detached signature. This digital signature shall be interpreted to mean that the sender is attesting to their authorization to disclose the information to the intended recipient(s). RSA/SHA-1 signature shall be supported by both the sender and the receiver.

- All the certificates of the "trust chain" shall be contained within the signature when using a PKI or out of bound certificate.

The following ciphersuites shall also be supported for encrypted email:

- S/MIME_RSA_WITH_AES_128_CBC_SHA (sender).

- S/MIME_RSA_WITH_3DES_128_CBC_SHA (sender and receiver). Receivers must be able to receive older encryption methods, but for IHE Authenticate Node compliance the sender will use AES.

- The email shall be digitally signed by the sender, by a one level only detached signature, applied BEFORE the encryption. This digital signature shall be interpreted to mean that the sender is attesting to their authorization to disclose the information to the intended recipient(s).

As explained in S/MIME, the sender will generate a unique session key, encrypt the payload of the message using the symmetrical AES algorithm, encrypt the key using the RSA asymmetrical algorithm with each one of receiver(s) public key and attach the result to the message. Each one of the receiver(s) will decrypt this result using its private key, revealing the session key, and decrypt the payload of the message.

This profile does not specify how certificates and keys are obtained or exchanged.

3.19.7 Local User Authentication

The Secure Node starts the authentication process with a User when the User wants to log on to the node. The secure node shall not allow access to PHI to an operator who has not successfully completed the local user authentication. Local user authentication is not an IHE specified network transaction, although it may utilize a network system for user authentication.

This is a local invocation of functions at the Secure Node. The identity of the User will be established by the Secure Node based on methods such as:

- Username with Password

- Biometrics

- Smart card

- Magnetic Card

3775 The User shall log in using his or her own unique individually assigned identity. Identities must be unique across the secure domain. A user may have more than one identity. The Secure Node shall be configurable to maintain a list of authorized users for the Secure Node.

The rules for assignment of unique individual identities to users is part of the Security Policy of the healthcare enterprise. Development of these rules is outside the scope of the IHE Technical Framework. The following examples list a few special cases related to user identification that 3780 may occur in practice.

3.19.7.1 Example: Team approach

When the operator is part of a team performing a procedure, the other members of the team involved in creating and accessing the data should be manually identified and recorded in the procedure log (which may be paper or electronic), and it is assumed that all have accessed the 3785 data even though they were not (and cannot be in most cases) actually logged on to the piece of equipment.

During some procedures, it may be necessary for one operator to relieve the operator who has already been authenticated by the system. It is recommended that the first operator log off and that the system authenticate the new operator.

3790 The audit log supports identification of the active participant. This is often defined as one key member of the team. Other means are used to track the entry and exit of various members of the team. IHE does not specify any specific team identification process.

3.19.7.2 Example: Access to locked exam room, no user logon on modality.

There may be situations where the acquisition modality has no user logon features, and access to 3795 the equipment is controlled by controlling access to the examination room. In these situations an equipment-specific user ID will be used, and access to the room should be recorded in the procedure log (which may be paper or electronic).

3.19.7.3 Example: Enterprise User Authentication

The healthcare enterprise may implement local user authentication using the Enterprise User 3800 Authentication Profile (EUA). This implementation may be mixed with other non-EUA access to the secure domain, based upon each node's internal use an EUA availability.

3805 ## 3.20 Record Audit Event [ITI-20]

This section corresponds to the Record Audit Event [ITI-20] transaction of the IHE IT Infrastructure Technical Framework. This transaction is used to report auditable events to an Audit Record Repository.

3.20.1 Scope

3810 This transaction is used to report auditable events to an Audit Record Repository.

3.20.2 Actor Roles
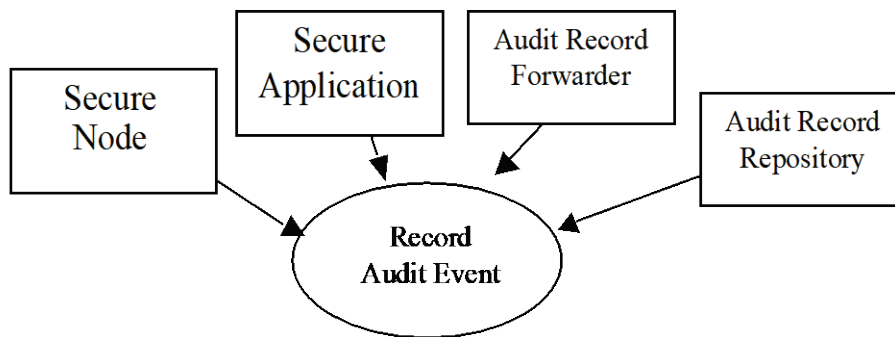
Figure 3.20.2-1: Use-case Diagram

3815 **Table 3.20.2-1: Actor Roles**

Actor:	Any actor or any other application that is grouped with the Secure Node or Secure Application.
Role:	Create an audit record and transmit this record to the Audit Record Repository.
Actor:	Audit Record Repository
Role:	Receive an audit record from the Audit Record Creator and store this for audit purposes.
Actor:	Audit Record Forwarder
Role:	Forward an audit record to Audit Record Repositories.

3.20.3 Referenced Standards

RFC5424	The Syslog Protocol.
RFC5425	Transmission of Syslog Messages over TLS

RFC5426	Transmission of Syslog Messages over UDP
RFC7525	Recommendations for Secure Use of Transport Layer Security (TLS) and Datagram Transport Layer Security (DTLS)
DICOM	DICOM PS3.15 Annex A.5 http://medical.nema.org/medical/dicom/current/output/chtml/part15/sect_A.5.html
ASTM E2147-01	Standard Specification for Audit and Disclosure Logs for Use in Health Information Systems
NIST SP 800-92	Guide to Computer Security Log Management.
W3C XML 1.0	Extensible Markup Language (XML) 1.0

3820 ### 3.20.4 Interaction Diagram
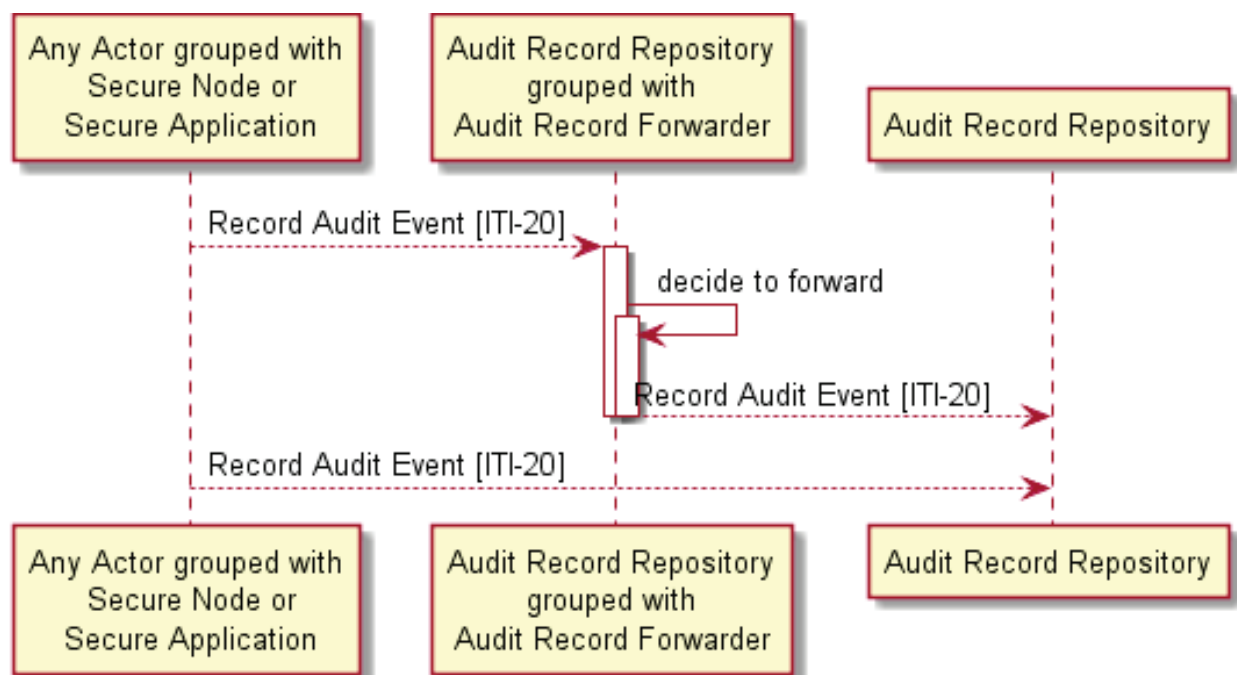
Note 1: Any actor initiating [ITI-20] may send to more than one Audit Record Repository.

Note 2: The Audit Repository that receives an [ITI-20] transaction may or may not be grouped with an Audit Record Forwarder. This diagram does not show a chain of forwarding between actors.

3825 ### 3.20.4.1 Audit Event message

An actor that is grouped with Secure Node or Secure Application detects an event that should be reported and uses the Audit Event message to send a report about the event to an Audit Record Repository.

This Audit Event message uses the Syslog protocol defined by RFC5424. The Syslog protocol is also used for a wide variety of other event reporting purposes.

RFC5424 defines a Syslog message that includes a free-form message. This Audit Event constrains the Syslog message to use a DICOM schema to specify the message content. See Section 3.20.7.

DICOM has defined a basic event report schema, and some basic event descriptions. IHE has extended this to define other specific event reports for security and privacy events. The Audit Event messages defined in this transaction can be mixed together with other Syslog messages. Organizations and systems may also be using these event schema for reporting events not defined by IHE or DICOM.

The Audit Record Repository and Audit Record Forwarder should be prepared to handle Syslog messages in other formats, as well as messages complying with the IHE Audit Trail Format (defined in Section 3.20.7) that are being used for other purposes.

3.20.4.1.1 Trigger Events

There are two trigger events:

1. A Secure Node or Secure Application detects an event that should be reported to the Audit Record Repository. This transaction does not specify all of the policies or reasons for reporting events. They may be specified in other IHE profiles, they may be specified by local law or regulation, or they may be specified by local policy.

2. An Audit Record Forwarder determines that a received Syslog message should be sent to another Audit Record Repository. This transaction does not specify what rules or policies determine whether a Syslog message should be forwarded.

The Secure Node or Secure Application shall create the Audit Event message and transmit it to the Audit Record Repository as soon as possible.

The Audit Record Forwarder shall forward the Audit Event message to the Audit Record Repository as soon as possible.

If the Secure Application, Secure Node, or Audit Record Forwarder is unable to send the message to the Audit Record Repository (e.g., it has lost network connectivity or has lost the TLS connection to the Audit Record Repository), then the actor shall store the audit record locally and send it when it is able.

The Audit Record Forwarder may delete its local copy of the Audit Record after this record has been transmitted to the target Audit Record Repository.

3.20.4.1.1.1 DICOM and IHE Audit Event messages

An actor in any IHE profile, when grouped with a Secure Node or Secure Application, shall be able to report the events defined in Table 3.20.4.1.1.1-1 (previously Table 3.20.6-1). Additional reportable events are often identified for specific events in other IHE profiles, and are documented in that profile or transaction.

These events in this table shall be formatted in accordance with Section 3.20.7.

Table 3.20.4.1.1.1-1: Audit Event triggers (previously Table 3.20.6-1)

Audit Event Trigger	Description	Source Vocabulary
Actor-start-stop	Startup and shutdown of any actor. Applies to all actors. Is distinct from hardware powerup and shutdown.	DICOM PS3.15 A.5.3 "Application Activity"
Audit-Log-Used	The audit trail repository has been accessed or modified by something other than the arrival of audit trail messages.	DICOM PS3.15 A.5.3 "Audit Log Used"
Begin-storing-instances	Begin storing SOP Instances for a study. This may be a mix of instances.	DICOM PS3.15 A.5.3 "Begin Transferring DICOM Instances"
Health-service-event	Health services scheduled and performed within an instance or episode of care. This includes scheduling, initiation, updates or amendments, performing or completing the act, and cancellation. See note below.	IHE Extension (ITI TF-2a: 3.20.7.3) "Health Services Provision Event"
Instances-deleted	SOP Instances are deleted from a specific study. One event covers all instances deleted for the particular study.	DICOM PS3.15 A.5.3 "DICOM Instances Accessed" or "DICOM Study Deleted"
Instances-Stored	Instances for a particular study have been stored on this system. One event covers all instances stored for the particular study.	DICOM PS3.15 A.5.3 "DICOM Instances Transferred"
Medication	Medication orders and administration within an instance or episode of care. This includes initial order, dispensing, delivery, and cancellation. See note below.	IHE Extension (ITI TF-2a: 3.20.7.3) "Medication Event"
Mobile-machine-event	Mobile machine joins or leaves secure domain.	DICOM PS3.15 A.5.3 "Network Entry"
Node-Authentication-failure	A secure node authentication failure has occurred during TLS negotiation, e.g., invalid certificate.	DICOM PS3.15 A.5.3 "Security Alert"
Order-record-event	Order record created, accessed, modified or deleted. Involved actors: Order Placer. This includes initial order, updates or amendments, delivery, completion, and cancellation. See note below.	DICOM PS3.16 Annex D "Order Record"
Patient-care-assignment	Staffing or participant assignment actions relevant to the assignment of healthcare professionals, caregivers attending physician, residents, medical students, consultants, etc. to a patient It also includes change in assigned role or authorization, e.g., relative to healthcare status change, and de-assignment	IHE Extension (ITI TF-2a: 3.20.7.3) "Patient Care Resource Assignment"
Patient-care-episode	Specific patient care episodes or problems that occur within an instance of care. This includes initial assignment, updates or amendments, resolution, completion, and cancellation. See note below.	IHE Extension (ITI TF-2a: 3.20.7.3) "Patient Care Episode"
Patient-care-protocol	Patient association with a care protocol. This includes initial assignment, scheduling, updates or amendments, completion, and cancellation. See note below.	IHE Extension (ITI TF-2a: 3.20.7.3) "Patient Care Protocol"
Patient-record-event	Patient record created, modified, or accessed.	DICOM PS3.16 Annex D "Patient Record"
PHI-export	Any export of PHI on media, either removable physical media such as CD-ROM or electronic transfer of files such as email. Any printing activity, paper or film, local or remote, which prints PHI.	DICOM PS3.15 A.5.3 "Export"

Audit Event Trigger	Description	Source Vocabulary
PHI-import	Any import of PHI on media, either removable physical media such as CD-ROM or electronic transfers of files such as email.	DICOM PS3.15 A.5.3 "Import"
Procedure-record-event	Procedure record created, modified, accessed or deleted.	DICOM PS3.16 Annex D "Procedure Record"
Query Information	A query has been received, either as part of an IHE transaction, or as part other products functions. For example: 1) Modality Worklist Query 2) Instance or Image Availability Query 3) PIX, PDQ, or XDS Query Notes: The general guidance is to log the query event with the query parameters and not the result of the query. The result of a query may be very large and is likely to be of limited value vs. the overhead. The query parameters can be used effectively to detect bad behavior and the expectation is that given the query parameters the result could be regenerated if necessary.	DICOM PS3.15 A.5.3 "Query"

Audit Event Trigger	Description	Source Vocabulary
Security Alert	Security Administrative actions create, modify, delete, query, and display the following: Configuration and other changes, e.g., software updates that affect any software that processes protected information. Hardware changes may also be reported in this event. 1. Security attributes and auditable events for the application functions used for patient management, clinical processes, registry of business objects and methods (e.g., WSDL, UDDI), program creation and maintenance, etc. 2. Security domains according to various organizational categories such as entity-wide, institutional, departmental, etc. 3. Security categories or groupings for functions and data such as patient management, nursing, clinical, etc. 4. The allowable access permissions associated with functions and data, such as create, read, update, delete, and execution of specific functional units or object access or manipulation methods. 5. Security roles according to various task-grouping categories such as security administration, admissions desk, nurses, physicians, clinical specialists, etc. It also includes the association of permissions with roles for role-based access control. 6. User accounts. This includes assigning or changing password or other authentication data. It also includes the association of roles with users for role-based access control, or permissions with users for user-based access control. 7. Unauthorized user attempt to use security administration functions. 8. Audit enabling and disabling. 9. User authentication revocation. 10. Emergency Mode Access (aka Break-Glass) Security administration events should always be audited.	DICOM PS3.15 A.5.3 "Security Alert"
User Authentication	This message describes the event of a user log on or log off, whether successful or not. No Participant Objects are needed for this message.	DICOM PS3.15 A.5.3 "User Authentication". For log off based on inactivity, specify UserIsRequestor=false in the User element to indicate that this was not user initiated.
Study-Object-Event	Study is created, modified, accessed, or deleted. This reports on addition of new instances to existing studies as well as creation of new studies.	DICOM PS3.15 A.5.3 "DICOM Instances Accessed"
Study-used	SOP Instances from a specific study are created, modified or accessed. One event covers all instances used for the particular study.	DICOM PS3.15 A.5.3 "DICOM Instances Accessed"

3.20.4.1.1.2 Other event reports

A Secure Node or Secure Application may also report audit events that do not correspond to DICOM events or audit events defined in IHE profiles. For example, a Disclosure can be recorded when an application knows that the act meets the measure of a Disclosure in the legal domain. The Disclosure event is further explained in Section 3.20.8.

Other events may be reported using extensions to the format in Section 3.20.7 or may be reported in another format.

3.20.4.1.2 Message Semantics

The Audit Event message describes an event performed by users or systems. Typical events are queries, views, additions, deletions and changes to data.

An Audit Record Forwarder shall filter and forward Syslog messages unchanged, regardless of their internal format.

A Secure Node or Secure Application shall create and transmit an Audit Event message when reporting an event. This message shall be a Syslog message that is transmitted as described in RFC5424 and formatted as described in Section 3.20.7 Audit Message Format.

Secure Node and Secure Application Actors shall construct the Audit Event message according to the following:

1. If the message contains Unicode characters, the characters shall be encoded using the UTF-8 encoding rules. UTF-8 avoids utilizing the control characters that are mandated by the Syslog protocol, but it may appear to be gibberish to a system that is not prepared for UTF-8.

2. The PRI field shall be set using the facility value of 10 (security/authorization messages). Most Audit Event messages should have the severity value of 5 (normal but significant), although applications may choose values of 4 (Warning condition) if that is appropriate to the more detailed information in the audit message. This means that for most Audit Event messages the PRI field will contain the value "<85>".

3. The MSGID field in the HEADER of the SYSLOG-MSG shall be set to "IHE+RFC-3881" (minus the quotes). (Note that the use of RFC3881 in the value is retained for backward compatibility.)

4. The STRUCTURED-DATA is not used. The MSG field holds the structured event data.

5. The MSG field of the SYSLOG-MSG shall be present and shall be an XML structure using UTF-8 minimal length encoding following the DICOM PS3.15 A.5 format, as described in Section 3.20.7 Audit Message Format. The BOM as specified in RFC5424 for use when the MSG is UTF-8 encoded is discouraged, but acceptable, as this is not well supported and discouraged by Unicode.

3.20.4.1.2.1 Audit Message Transports

This transaction defines two transport mechanisms for Record Audit Event messages:

3905
1. Transmission of Syslog messages over TLS (RFC5425) with The Syslog Protocol (RFC5424) which formalizes sending Syslog messages over a streaming protocol protectable by TLS. See Section 3.20.4.1.2.1.1.

2. Transmission of Syslog messages over UDP (RFC5426) with The Syslog Protocol (RFC5424) which formalizes and obsoletes BSD Syslog protocol defined in RFC3164.
3910
See Section 3.20.4.1.2.1.2.

The Audit Record Repository shall support both transport mechanisms.

The Secure Node, Secure Application, and Audit Record Forwarder Actors shall support at least one of the transport mechanisms.

3.20.4.1.2.1.1 Transmission of Syslog Messages over TLS

3915
Transmission of Syslog messages over TLS (RFC5425) with the Syslog Protocol (RFC5424) formalizes sending Syslog messages over a streaming protocol protectable by TLS.

RFC5424 states that this MUST be TLS version 1.2. For this transaction, that requirement is relaxed to be that it MUST be TLS; version 1.2 is RECOMMENDED.

3.20.4.1.2.1.2 Transmission of Syslog Messages over UDP (formerly:BSD Syslog)

3920
Transmission of Syslog Messages over UDP (RFC5426) with The Syslog Protocol (RFC5424) formalizes and obsoletes the BSD Syslog protocol (RFC3164). This transport mechanism, originally defined in the IHE Radiology Technical Framework, is appropriate in some situations.

The underlying UDP transport may truncate messages longer than 1024 bytes or the MTU size minus the UDP header length. The Audit Record Repository shall accept arbitrarily truncated
3925
messages. The Audit Record Repository shall modify truncated messages so that such messages are well-formed XML (e.g., closing open elements), including possibly partial multi-byte encodings of characters.

Because of the potential for truncated messages and other security concerns, the transmission of Syslog messages over TLS is recommended.

3930
3.20.4.1.2.1.3 Reliable Syslog (deprecated)

The Reliable Syslog "cooked" mode is no longer specified by this transaction. Applications using Reliable Syslog should switch to transmission of Syslog Messages over TLS.

3.20.4.1.3 Expected Actions

An Audit Record Repository (ARR) shall accept any Syslog message that complies with
3935
RFC5424. For each Syslog message it may:

1. Discard the Syslog message as irrelevant.

2. Retain the Syslog message in an internal data store.

3. Perform other processing on the Syslog message.

Audit Record Repositories shall accept UTF-8 encodings and store them without damage, i.e., preserve all 8 bits.

Audit Record Forwarders shall accept UTF-8 encodings and forward them without damage, i.e., preserve all 8 bits.

This transaction does not constrain the kind of Syslog messages that can be conveyed, nor does it specify the capacity or capabilities of the data store in the Audit Record Repository. The expectation is that the internal data store on the Audit Record Repository will be used for subsequent analysis and reporting purposes. This transaction does not specify what such activities will be.

The Audit Record Repository may apply a variety of data retention rules to the data store. This transaction does not specify data retention rules. These are usually dependent upon the purposes assigned to a specific Audit Record Repository.

When the Audit Record Repository is grouped with an Audit Record Forwarder, the Audit Record Forwarder shall:

1. Apply filtering rules to all Syslog messages received by the Audit Record Repository.

2. Forward all Syslog messages that match filters to their configured destinations.

3.20.5 Security Considerations

The use of the TLS transport mechanism is recommended because the audit event messages often contain PHI or other sensitive information. See Section 3.20.4.1.2.1.

The use of the TLS transport mechanism is not always required because there are other means of protection that may be more appropriate in some situations. The decision to use the UDP transport mechanism should be based upon a security and privacy risk analysis.

The data store within the Audit Record Repository may contain sensitive information, and the Audit Record Repository analysis facilities may allow sensitive queries. It will be a high value target for malicious actors, and should be protected accordingly.

The Audit Record Repository is required to generate audit event messages for various kinds of use of the data store and configuration changes. This is specified in Section 3.20.4.1.1.

3.20.6 Retired

This section has been retired. Most of the previous content has been moved to Section 3.20.4. Table 3.20.6-1 "Audit Record trigger events" is now Table 3.20.4.1.1.1-1.

3.20.7 Audit Message Format

All IHE actors shall utilize the IHE Audit Trail Message Format in Section 3.20.7.1. This is a schema based on the standards developed and issued by the IETF, HL7, and DICOM organizations to meet the medical auditing needs as specified by ASTM E2147-01.

Note: The IHE Provisional Audit Message Format has been retired.

3.20.7.1 IHE Audit Trail Message Format

3975 The DICOM Standard, Part 15, Annex A.5 Audit Trail Message Format Profile (see http://medical.nema.org/medical/dicom/current/output/chtml/part15/sect_A.5.html) provides vocabulary and specification of a schema for events that may occur in the context of DICOM equipment. This XML schema was defined based upon joint work by IHE, HL7, DICOM, ASTM E31, and the Joint NEMA/COCIR/JIRA Security and Privacy Committee.

3980 The DICOM Standard provides a schema for the basic messages and states that extensions are valid. This profile does not restrict private extensions that comply with the W3C XML encoding rules for the use of schemas, namespaces, etc.

IHE has extended the DICOM audit schema for more general healthcare use. Some IHE profiles have defined additional events and appropriate audit event messages for those events. Those
3985 audit event messages are often directly associated with IHE transactions. The events are documented in the context of those transactions, and are not documented as part of this transaction.

These audit requirements may be found in the Technical Frameworks from any IHE domain, not just the ITI domain. The notation used in this documentation, which often is in the form of an
3990 audit message table, is that used in the DICOM standard. The messages shall be encoded as instances based on the DICOM schema.

The following notation is used for optionality:

- M   This field is mandatory.

- U   The optionality of this field is unspecialized. The optionality of the underlying standard applies.

- C   This field is mandatory if a specified condition is true.

The IHE Audit Trail Message Format describes events with respect to a single patient. In situations where there is an event that applies to more than one identifiable patient, there shall be
3995 a separate audit event message for each patient.

3.20.7.1.1 RoleIDCode with access control roles

When describing a human user's participation in an event, the RoleIDCode value should represent the access control roles/permissions that authorized the event. RoleIDCode is a CodedValueType. Use of standards-based roles/permissions is recommended, rather than use of
4000 site or application specific codes. Many older security systems are unable to produce this data, hence it is optional, but should be provided when known.

For example: at a site "St Fraser" they have defined a functional role code "NURSEA" for attending nurse. This can be represented as

EV("NURSEA", "St Fraser", "Attending Nurse")

4005 Candidate standards based structural/functional role codes can be found at ISO, HL7, ASTM, and various other sources.

3.20.7.1.2 Audit Encoding of the Purpose of Use value

The Purpose of Use value in the schema indicates the expected ultimate use of the data, rather than a likely near term use such as "send to X". As explained in the IHE Access Control White Paper, there are Access Control decisions that are based on the ultimate use of the data. For example a Patient may have provided a BPPC Consent/Authorization for treatment purposes, but explicitly disallowed any use for research regardless of de-identification methods used.

The Purpose Of Use is also included in the Audit Event message to enable some forms of reporting of Accounting of Disclosures and Breach Notification. To enable this type of Audit Logging and Access Control decision, the assertion in the Provide User Assertion [ITI-40] transaction in the Cross-Enterprise User Assertion (XUA) Profile includes the intended purpose for which the data will be used. One specific PurposeOfUse would be a "Break-Glass"/Emergency-Mode-Access.

The PurposeOfUse value will come from a Value Set. This Value Set should be derived from the codes found in ISO 14265, or XSPA (Cross-Enterprise Security and Privacy Authorization). Implementations should expect that the Value Set used may be using locally defined values. The use of the IHE Sharing of Value Sets (SVS) Profile may assist with this.

When a PurposeOfUse value is available it shall be encoded in the EventIdentification section as "PurposeOfUse" element encoded as a CodedValueType.

For example, the following is how an explicit Disclosure can be recorded when an application knows that the act meets the measure of a Disclosure in the legal domain.

	Field Name	Opt	Value Constraints
Event **AuditMessage/** **EventIdentification**	EventID	M	EV(110106, DCM, "Export")
	EventActionCode	M	"R" (Read)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	PurposeOfUse	O	EV(12, 1.0.14265.1, "Law Enforcement")
	EventTypeCode	M	EV("IHE0006", "IHE", "Disclosure")
Source (Document Repository) (1)			
Destination (Document Consumer) (1)			
Audit Source (Document Repository) (1)			
Document (1..n)			

3.20.7.1.3   ParticipantObjectIDTypeCode

The DICOM schema mandates codeSystemName and originalText for all coded types. When standard codes are not available and the Audit Event Report is still using the integer values that were specified in RFC3881, IHE actors shall use the integer from RFC3881 as the codeValue, the description from RFC3881 in the originalText attribute and "RFC-3881" in the codeSystemName attribute. Where codes from other coding systems are available, those codes should be used because RFC3881 has been deprecated.

4035 **3.20.7.2 RFC3881 format (Deprecated)**

The use of RFC3881 has been deprecated by IHE and IETF.

3.20.8 Disclosures audit message

In some countries a Patient has the right to get an accounting of disclosures. This report includes disclosures of their data that meet regulatory criteria. Most audit events, including export events,
4040 must be post-analyzed to determine whether they describe an event that needs to be included in the accounting of disclosures. For example, in the USA these rules are defined in HIPAA, and only a few kinds of export events meet the criteria to be included in an accounting of disclosures report. When it is known, at the time the event is recorded, that the event is indeed a disclosure, the disclosure audit message can be used to document the event.

4045

The requirements of an accounting of disclosures are defined in ASTM-2147. A disclosure shall include the following, when the value is known:

- Who did the disclosure (the releasing agent),

- When did the disclosure happen,

4050 - Who was the data disclosed to (receiving agent machine and other parties if known),

- What patient was involved (multiple patients would be done as multiple audit entries),

- What data was involved, and

- Why the disclosure was done

There is some other information that may be available:

4055 - Who is the custodian of the data (the official organization responsible), and

- Who authorized the release such as a guardian or relative (authorizing agent)?

The following is the layout of the Disclosure audit event. This pattern will be extended and modified by applications when appropriate.

	Field Name	**Opt**	**Value Constraints**
Event **AuditMessage/** **EventIdentification**	EventID	M	EV(110106, DCM, "Export")
	EventActionCode	M	"R" (Read) for Export
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	PurposeOfUse	M	why was the data disclosed
	EventTypeCode	M	EV(IHE0006, "IHE", "Disclosure") - indicates type
ActiveParticipant - Releasing Agents (0..*)			
ActiveParticipant - Custodian (0..1)			
ActiveParticipant - Authorizing Agent (0..n)			
ActiveParticipant - Receiving Agent (1..n)			
Audit Source (1)			

ParticipantObject – Patient (1)			
ParticipantObject – Data (Document) released (1..n)			
Releasing Agent **AuditMessage/ ActiveParticipant**	UserID	M	Identity of the human that initiated the Disclosure.
	AlternativeUserID	U	not specialized
	UserName	U	not specialized
	UserIsRequestor	M	"true"
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*
Custodian **(if known)** **AuditMessage/ ActiveParticipant**	*UserID*	*U*	*not specialized*
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	M	"false"
	RoleIDCode	M	EV(159541003, SNOMED CT, "Record keeping/library clerk")
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*
Authorizing Agent **(if known)** **AuditMessage/ ActiveParticipant**	*UserID*	*U*	*not specialized*
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	M	"false"
	RoleIDCode	M	EV(429577009, SNOMED CT, "Patient Advocate")
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*
Receiving Agent **AuditMessage/ ActiveParticipant**	*UserID*	*U*	*not specialized*
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	M	"false"
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*
Audit Source **AuditMessage/ AuditSourceIdentification**	*AuditSourceID*	*U*	*not specialized.*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*
Patient **(AuditMessage/ ParticipantObjectIdentification)**	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	M	Shall be: 2 = patient
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*

Data (Document) Released (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"2" (System)
	ParticipantObjectTypeCodeRole	M	"3" (report)
	ParticipantObjectDataLifeCycle	M	Shall be: 11 = disclosure
	ParticipantObjectIDTypeCode	M	Shall be: 9 = Report Number
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The value of <ihe:DocumentUniqueId/>
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*

Releasing Agent AuditMessage/ ActiveParticipant	UserID	M	Identity of the human that initiated the Disclosure.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	M	"true"
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address, as available
Custodian (if known) AuditMessage/ ActiveParticipant	*UserID*	*U*	*not specialized*
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	M	"false"
	RoleIDCode	M	EV(159541003, SNOMED CT, "Record keeping/library clerk")
	NetworkAccessPointTypeCode	*NA*	*not specialized*
	NetworkAccessPointID	*NA*	*not specialized*
Authorizing Agent (if known) AuditMessage/ ActiveParticipant	*UserID*	*U*	*not specialized*
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	M	"false"
	RoleIDCode	M	EV(429577009, SNOMED CT, "Patient Advocate")
	NetworkAccessPointTypeCode	*NA*	*not specialized*
	NetworkAccessPointID	*NA*	*not specialized*
Receiving Agent AuditMessage/ ActiveParticipant	*UserID*	*U*	*not specialized*
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	M	"false"
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*
Audit Source AuditMessage/ AuditSourceIdentification	*AuditSourceID*	*U*	*not specialized.*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

|			
Patient (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	M	Shall be: 2 = patient
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*
Data (Document) **Released** (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"2" (System)
	ParticipantObjectTypeCodeRole	M	"3" (report)
	ParticipantObjectDataLifeCycle	M	Shall be: 11 = disclosure
	ParticipantObjectIDTypeCode	M	Shall be: 9 = Report Number
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The value of <ihe:DocumentUniqueId/>
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*

4065

3.21 Patient Demographics Query [ITI-21]

This section corresponds to transaction [ITI-21] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-21] is used by the Patient Demographics Consumer and Patient Demographics Supplier Actors.

4070 **3.21.1 Scope**

This transaction involves a request by the Patient Demographics Consumer for information about patients whose demographic data match data provided in the query message. The request is received by the Patient Demographics Supplier Actor. The Patient Demographics Supplier immediately processes the request and returns a response in the form of demographic
4075 information for matching patients.

3.21.2 Use Case Roles
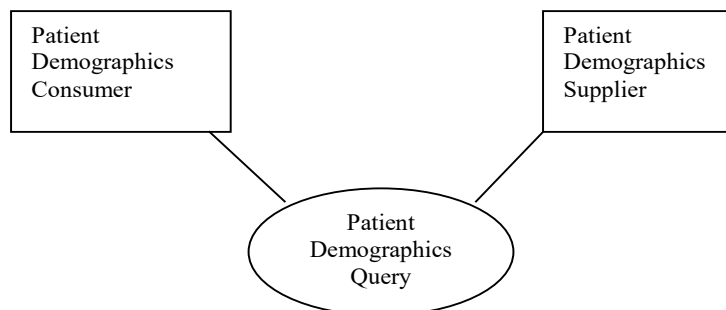
Actor: Patient Demographics Consumer

Role: Requests a list of patients matching a minimal set of demographic criteria (e.g., ID or
4080 partial name) from the Patient Demographics Supplier. Populates its attributes with demographic information received from the Patient Demographics Supplier.

Actor: Patient Demographics Supplier

Role: Returns demographic information for all patients matching the demographic criteria provided by the Patient Demographics Consumer.
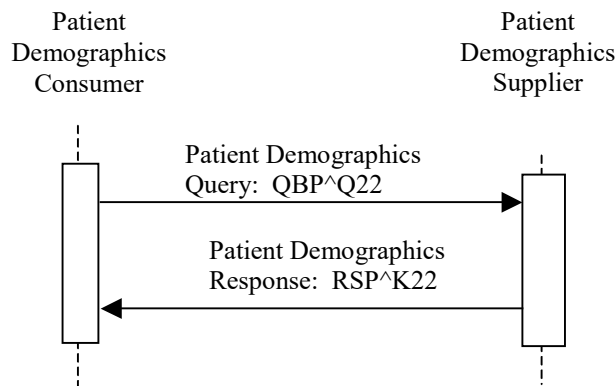
4085 **3.21.3 Referenced Standards**

HL7: Version 2.5, Chapter 2 – Control

Version 2.5, Chapter 3 – Patient Administration

Version 2.5, Chapter 5 – Query

3.21.4 Interaction Diagram

4090

3.21.4.1 Patient Demographics Query

3.21.4.1.1   Trigger Events

A Patient Demographics Consumer's need to select a patient based on demographic information about patients whose information matches a minimal set of known data will trigger the Patient Demographics Query based on the following HL7 trigger event:

4095

Q22 – Find Candidates

3.21.4.1.2   Message Semantics

The Patient Demographics Query is conducted by the HL7 QBP^Q22 message. The Patient Demographics Consumer shall generate the query message whenever it needs to select from a list of patients whose information matches a minimal set of demographic data. The segments of the message listed below are required, and their detailed descriptions are provided in the following subsections.

4100

Table 3.21-1: QBP Query by Parameter

QBP	Query by Parameter	Chapter in HL7 2.5
MSH	Message Header	2
QPD	Query Parameter Definition	5
RCP	Response Control Parameter	5
[DSC]	Continuation Pointer	2

4105   The receiver shall respond to the query by sending the RSP^K22 message. This satisfies the requirements of original mode acknowledgment; no intermediate ACK message is to be sent.

Each Patient Demographics Query request specifies two distinct concepts. The Patient Demographics Query is always targeted at a single source of patient demographic information (referred to in this transaction as the ***patient information source***). A Patient Demographics
4110   Supplier may have knowledge of more than one source of demographics. A Patient

Demographics Supplier shall support at least one source of patient demographics and may support multiple sources of demographics. Section 3.21.4.1.2.1 describes how the Patient Demographics Consumer specifies which source of demographics is requested by the query. Each query response shall return demographics from a single patient information source.

4115   The second concept present in the query is the set of patient identifier domains referenced by the query. These patient identifier domains may or may not be associated with the patient information source. A Patient Demographics Supplier shall support at least one patient identifier domain and may support multiple identifier domains. Section 3.21.4.1.2.2 describes how the Patient Demographics Consumer requests identifiers from one or more patient identifier
4120   domains. Query responses may return patient identifiers from 0, 1 or multiple patient identifier domains.

3.21.4.1.2.1 MSH Segment

The MSH segment shall be constructed as defined in the "Message Control" section (ITI TF-2x: C.2.2).

4125   The Patient Demographics Supplier is able to obtain demographics from at least one and possibly multiple patient information sources. When more than one patient information source is available, Field *MSH-5-Receiving Application* specifies the patient information source that this query is targeting. The Patient Demographics Supplier shall return this value in *MSH-3-Sending Application* of the RSP^K22 response. The value specified in MSH-5 is not related to the value
4130   requested in QPD-8 What Domains Returned.

A list shall be published of all Receiving Applications that the Patient Demographics Supplier supports, for the Patient Demographics Consumer to choose from. Each query is processed against one and only one source of patient demographic information.

Field *MSH-9-Message Type* shall have all three components populated with a value. The first
4135   component shall have a value of **QBP**; the second component shall have a value of **Q22**. The third component it shall have a value of **QBP_Q21**.

3.21.4.1.2.2 QPD Segment

The Patient Demographics Consumer shall send attributes within the QPD segment as described in Table 3.21-2.

4140   **Table 3.21-2: IHE Profile - QPD segment**

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	250	CE	R	0471	01375	Message Query Name
2	32	ST	R+		00696	Query Tag
3		QIP	R			Demographics Fields
8		CX	O			What Domains Returned

Adapted from the HL7 standard, version 2.5

The Consumer shall specify "IHE PDQ Query" for QPD-1.1 Message Query Name. All other components of Message Query Name shall not be populated.

3.21.4.1.2.2.1 Populating QPD-3-Demographics Fields

Field *QPD-3-Demographics Fields* consists of one or more repetitions, each of which contains two components that together contain the name and value of a distinct parameter to the query. Acceptable segments are PID and PD1. Requirements stated in Appendix E apply to parameters of the datatype CX. In particular, specifying @PID.3.1 without @PID.3.4 is not allowed.

Note: The Patient Demographics Consumer may need to provide an Assigning Authority if the human operator has not provided one.

The first component of each parameter contains the name of an HL7 element in the form

@<seg>.<field no>.<component no>.<subcomponent no>

The above format is populated according to common HL7 usage for specifying elements used in query parameters, as follows:

<seg> represents a 3-character segment ID from the HL7 Standard.

<field no> is the number of a field within the segment as shown in the SEQ column of the segment attribute table for the segment selected.

<component no>, for fields whose data types contain multiple components, shall contain the cardinal number of the component being valued. For fields whose data types do not contain multiple components, <component no> shall not be valued and its preceding period shall not appear.

<subcomponent no>, for components whose data types contain multiple subcomponents, shall contain the cardinal number of the subcomponent being valued. For components whose data types do not contain multiple subcomponents, <subcomponent no> shall not be valued and its preceding period shall not appear.

The second subcomponent of each parameter contains the value that is to be matched. If it is desired to constrain the quality of a match within the bounds of an algorithm known to the Supplier, the algorithm and constraint values may be specified in Fields QPD-4 through QPD-7.

The Patient Demographics Consumer may specify, and the Patient Demographics Supplier shall support, the fields in Table 3.21-3. If the Pediatric Demographics Option is supported, then additionally, the Patient Demographics Consumer may specify, and the Patient Demographics Supplier shall support, the fields in Table 3.21-4.

The Patient Demographics Supplier shall return demographic records that reflect the best fit to all of the search criteria.

Table 3.21-3: IHE Profile – QPD-3 fields required to be supported

FLD	ELEMENT NAME
PID.3	Patient Identifier List
PID.5	Patient Name

FLD	ELEMENT NAME
PID.7	Date/Time of Birth
PID.8	Administrative Sex
PID.11	Patient Address
PID.18	Patient Account Number

Table 3.21-4: IHE Profile – Additional QPD-3 fields required to be supported if the Pediatric Demographic Option is supported

FLD	ELEMENT NAME
PID.6	Mother's Maiden Name
PID.13	Phone Number - Home

4180   An example of parameter expressions in QPD-3:

```
@PID.5.1.1^SMITH~@PID.8^F
```

requests all patients whose family name (first subcomponent (data type ST) of the first component (data type FN) of PID-5-Patient Name (data type XPN)) matches the value 'SMITH'
4185   and whose sex (PID-8-Sex (data type IS)) matches the value 'female'.

3.21.4.1.2.2.2   Populating QPD-8-What Domains Returned

As is specified in the discussion of the Find Candidates (Q22) Query in Chapter 3 of the HL7 Standard, field QPD-8 restricts the set of domains for which identifiers are returned in PID-3:

1. In a multiple-domain environment, QPD-8 may be used to identify one or more domains
4190   of interest to the Patient Demographics Consumer and from which the Consumer wishes to obtain a value for *PID-3-Patient Identifier*. Note that the patient information source designated by MSH-5 may or may not be associated with any of the Patient ID Domains listed in *QPD-8-What Domains Returned*.

2. If QPD-8 is empty, the Patient Demographics Supplier shall return all Patient IDs known
4195   by the Patient Demographics Supplier for each patient that matches the search criteria. See Case 1 in Section 3.21.4.2.2.8 for details on how this information is returned.

3. If QPD-8 is specified and the domains are recognized, the Patient Demographics Supplier shall return the Patient IDs for each patient that matches the search criteria. See Case 2 in Section 3.21.4.2.2.8 for details on how this information is returned.

4200   4. Any domain not recognized by the Patient Demographics Supplier is an error condition. See Case 3 in Section 3.21.4.2.2.8 how to handle this condition.

5. In a single-domain environment, QPD-8 may be ignored by the Patient Demographics Supplier. The Supplier shall always return the identifier from the Patient ID Domain known by the Patient Demographics Supplier.

4205   Within field QPD-8, only component 4 (Assigning Authority) shall be valued.

The Patient Demographics Supplier may or may not be able to supply additional identifiers from the domains specified in QPD-8. A discussion of how QPD-8 is processed is included in the architectural discussion in the "Using Patient Data Query (PDQ) in a Multi-Domain Environment" section (ITI TF-2x: Appendix M).

4210   The Patient Demographics Consumer shall be able to support at least one of the following mechanisms for specifying QPD-8:

1. Transmit an empty value and receive all identifiers in all domains known by the Patient Demographics Supplier (one or more domains), or

2. Transmit a single value and receive zero or more identifiers in a single domain, or

4215   3. Transmit multiple values and receive multiple identifiers in those multiple domains.

3.21.4.1.2.3 RCP Segment

The Patient Demographics Consumer shall send attributes within the RCP segment as described in Table 3.21-5. Fields not listed are optional and may be ignored.

Table 3.21-5: IHE Profile - RCP segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	1	ID	R	0091	00027	Query Priority
2	10	CQ	O	0126	00031	Quantity Limited Request

4220   *Adapted from the HL7 standard, version 2.5*

3.21.4.1.2.3.1   Populating RCP-1-Query Priority

Field *RCP-1-Query Priority* shall always contain **I**, signifying that the response to the query is to be returned in Immediate mode.

4225 #### 3.21.4.1.2.3.2   Populating RCP-2-Quantity Limited Request

The Patient Demographics Consumer may request that responses to the query be sent, using the HL7 Continuation Protocol, in increments of a specified number of patient records. (In the context of the HL7 query, a patient record is defined as the PID segment and any segments accompanying it for each patient.) It is desirable to request an incremental response if the query
4230   could result in hundreds or thousands of matches or "hits."

The Patient Demographics Supplier shall support the HL7 Continuation Protocol.

Field RCP-2 is of data type CQ, which contains two components. The first component contains the number of increments, always expressed as an integer greater than 0, while the second component contains the kind of increment, always RD to signify that incremental replies are
4235   specified in terms of records.

For example, 50RD requests 50 records at a time.

See the "Incremental Response Processing" (Section 3.21.4.1.3.3) and the "Expected Actions" section of the Patient Demographics Query Response message (Section 3.21.4.2.3) for more information on the implementation of the continuation protocol.

3.21.4.1.2.4 DSC Segment

The Patient Demographics Consumer may request additional increments of data by specifying this segment on the query request. This segment should be omitted on the initial query request. Its purpose is to request additional increments of the data from the Patient Demographic Supplier.

Table 3.21-9: IHE Profile - DSC segment

SEQ	LEN	DT	OPT	TBL#	ITEM #	ELEMENT NAME
1	180	ST	O		00014	Continuation Pointer
2	1	ID	O	0398	01354	Continuation Style

3.21.4.1.2.4.1   Populating DSC-1 Continuation Pointer

To request additional increments of data, DSC-1 (Continuation Pointer) shall echo the value from RSP^K22 DSC-1.

3.21.4.1.2.4.2   Populating DSC-2 Continuation Style

DSC-2 (Continuation Style) shall always contain I, signifying that this is part of an interactive continuation message.

3.21.4.1.3   Expected Actions

3.21.4.1.3.1 Immediate Acknowledgement

The Patient Demographics Supplier shall immediately return an RSP^K22 response message as specified below in Section 3.21.4.2, "Patient Demographics Response." The RSP^K22 response message incorporates original mode application acknowledgment as specified in the "Acknowledgment Modes" section (ITI TF-2x: C.2.3). The Supplier shall use *MSH-3-Sending Application* of the RSP^K22 to return the value it received from the Patient Demographics Consumer in Field *MSH-5-Receiving Application* of the QBP^Q22 message.

3.21.4.1.3.2 Query Parameter Processing

The Patient Demographics Supplier shall be capable of accepting, searching on, and responding with attributes in the QPD segment as specified in Table 3.21-2.

The Patient Demographics Supplier must be capable of receiving all possible representations of an Assigning Authority (patient identifier domain) in QPD.8.4 (What Domain Returned): 1) namespace, 2) universal id (OID) and 3) both namespace and universal id (OID).

4270 Handling of phonetic issues, alternate spellings, upper and lower case, wildcards, accented characters, etc., if deemed appropriate, is to be supported by the Patient Demographics Supplier rather than by the Patient Demographics Consumer. The Supplier shall return at least all exact matches to the query parameters sent by the Consumer; IHE does not further specify matching requirements.

3.21.4.1.3.3 Incremental Response Processing

4275 The Patient Demographics Supplier shall be capable of accepting and processing attributes in the RCP segment as listed in Table 3.21-5. In particular, the Patient Demographics Supplier shall respond in immediate mode (as specified by a *RCP-1-Query Priority* value of **I**).

Also, the Patient Demographics Supplier shall be able to interpret *RCP-2-Quantity Limited Request* to return successive responses of partial lists of records according to the HL7 Continuation Protocol, as described in Section 3.21.4.2 below and in the HL7 Standard.

3.21.4.2 Patient Demographics Response

4280 ### 3.21.4.2.1   Trigger Events

The Patient Demographics Supplier's response to the Find Candidates message shall be the following message:

K22 – Find Candidates response

3.21.4.2.2   Message Semantics

4285 The Patient Demographics Response is conducted by the RSP^K22 message. The Patient Demographics Supplier shall generate this message in direct response to the QBP^Q22 message previously received. This message satisfies the Application Level, Original Mode Acknowledgement for the HL7 QBP^Q22 message.

The segments of the message listed without enclosing square brackets in the table below are
4290 required. Detailed descriptions of all segments listed in the table below are provided in the following subsections. Other segments of the message are optional.

Table 3.21-6: RSP Segment Pattern Response

RSP	Segment Pattern Response	Chapter in HL7 2.5
MSH	Message Header	2
MSA	Message Acknowledgement	2
[{ERR}]	Error	2
QAK	Query Acknowledgement	5
QPD	Query Parameter Definition	5
[{ PID	Patient Identification	3
[PD1]		
[QRI] }]	Query Response Instance	5
[DSC]	Continuation Pointer	2

3.21.4.2.2.1 MSH Segment

The MSH segment shall be constructed as defined in the "Message Control" section (ITI TF-2x: C.2.2).

Field *MSH-3-Sending Application* specifies the patient information source that processed the query. The Patient Demographics Supplier shall use Field *MSH-3-Sending Application* of the RSP^K22 message to return the value it received from the Patient Demographics Consumer in Field *MSH-5-Receiving Application* of the QBP^Q22 message.

Field *MSH-9-Message Type* shall have all three components populated with a value. The first component shall have a value of **RSP**; the second component shall have a value of **K22**. The third component shall have a value of **RSP_K21**.

3.21.4.2.2.2 MSA Segment

The Patient Demographics Supplier is not required to send any attributes within the MSA segment beyond what is specified in the HL7 standard. See the "Acknowledgment Modes" section (ITI TF-2x: C.2.3) for the list of all required and optional fields within the MSA segment.

3.21.4.2.2.3 QAK Segment

The Patient Demographics Supplier shall send attributes within the QAK segment as defined in Table 3.21-7. For the details on filling in QAK-2 (Query Response Status) refer to the "Patient Demographics Supplier Actor Query Response Behavior" in Section 3.21.4.2.2.8.

QAK-1 (Query Tag) shall echo the same value of QPD-2 (Query Tag) of the QBP^Q22 message, to allow the Patient Demographics Query Consumer to match the response to the corresponding query request.

Table 3.21-7: IHE Profile - QAK segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	32	ST	R		00696	Query Tag
2	2	ID	R+	0208	00708	Query Response Status

Adapted from the HL7 standard, version 2.5

3.21.4.2.2.4 QPD Segment

The Patient Demographics Supplier shall echo the QPD Segment value that was sent in the QBP^Q22 message.

3.21.4.2.2.5 PID Segment

The Patient Demographics Supplier shall return one PID segment group (i.e., one PID segment plus any segments associated with it in the message syntax shown in Table 3.21-6) for each matching patient record found. The Supplier shall return the attributes within the PID segment as

specified in Table 3.21-8. In addition, the Patient Demographics Supplier shall return all other attributes within the PID segment for which it is able to supply values.

Table 3.21-8: IHE Profile - PID segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
3	250	CX	R		00106	Patient Identifier List
5	250	XPN	R		00108	Patient Name
7	26	TS	R2		00110	Date/Time of Birth
8	1	IS	R2	0001	00111	Administrative Sex
11	250	XAD	R2		00114	Patient Address
18	250	CX	R2		00121	Patient Account Number

Adapted from the HL7 standard, version 2.5

The Patient Demographics Supplier may or may not be able to supply additional identifiers from the domains specified in QPD-8. Inability to supply an identifier in a particular domain is not an error, provided that the domain is recognized.

The PID segment and its associated PD1 and QRI segments are returned only when the Patient Demographics Supplier is able to associate the search information in QPD-3 with one or more patient records in the patient information source associated with *MSH-5-Receiving Application*. See the "Patient Demographics Supplier Actor Query Response Behavior" Section 3.21.4.2.2.8 for a detailed description of how the Patient Demographics Supplier responds to the query request under various circumstances.

3.21.4.2.2.6 QRI Segment

For each patient for which the Patient Demographics Supplier returns a PID Segment, it may optionally return the QRI (Query Response Instance) segment, but is not required to do so. Refer to the HL7 Standard, Version 2.5, Chapter 5, Section 5.5.5, for more information.

3.21.4.2.2.7 DSC Segment

If the number of records is specified in *RCP-2-Quantity Limited Request*, the Patient Demographics Supplier shall return an incremental response of that number of records when the number of matching records it finds exceeds the number of records specified in RCP-2.

As long as the Patient Demographics Supplier has records to return in addition to those returned in the incremental response, the Supplier shall return a DSC Segment. The single field of the DSC Segment shall contain a unique alphanumeric value (the Continuation Pointer) that the Patient Demographics Consumer may return in the DSC of the QBP^Q22 message to request the next increment of responses. The Supplier shall return increments as many times as the Consumer requests them (and there are increments to return), and shall stop when the Consumer sends a cancel query (QCN^J01) message (or when there are no more increments to return).

3.21.4.2.2.8 Patient Demographics Supplier Actor Query Response Behavior

The Patient Demographics Supplier shall perform the matching of patient data based on the query parameter values it receives. The information provided by the Patient Demographics Supplier to Patient Demographics Consumer Actors is a list of possible matching patients from the patient information source associated with the value that the Consumer sent in *MSH-5-Receiving Application* of the query message.

If domains are specified in *QPD-8-What Domains Returned* and are recognized by the Patient Demographics Supplier, the response will also, for each patient, contain any Patient ID values found in the specified domains.

The mechanics of the matching algorithms used are internal to the Patient Demographics Supplier and are outside of the scope of this framework.

The Patient Demographics Supplier shall respond to the query request as described by the following 3 cases:

Case 1: The Patient Demographics Supplier finds (in the patient information source associated with *MSH-5-Receiving Application*) at least one patient record matching the criteria sent in *QPD-3-Demographics Fields*. No patient identifier domains are requested in *QPD-8-What Domains Returned*.

AA (application accept) is returned in MSA-1.

OK (data found, no errors) is returned in QAK-2.

One PID segment group (i.e., one PID segment plus any segments associated with it in the message syntax shown in Table 3.21-6) is returned from the patient information source for each patient record found. If the Patient Demographics Supplier returns data for multiple patients, it shall return these data in successive occurrences of the PID segment group.

Within each PID segment, field *PID-3-Patient Identifier List* contains one or more identifiers from the set of Patient ID Domains known by the Patient Demographics Supplier.

If an incremental number of records are specified in *RCP-2-Quantity Limited Request*, and the number of records to be sent exceeds that incremental number, the Supplier returns only the incremental number of records, followed by a DSC segment containing a uniquely valued Continuation Pointer.

The consumer will specify the value of the continuation pointer in the DSC segment on the subsequent query request to request the next increment of responses.

Case 2: The Patient Demographics Supplier finds (in the patient information source associated with *MSH-5-Receiving Application*) at least one patient record matching the criteria sent in *QPD-3-Demographics Fields*. One or more patient identifier domains are requested in *QPD-8-What Domains Returned*; the Supplier recognizes all the requested domains.

AA (application accept) is returned in MSA-1.

OK (data found, no errors) is returned in QAK-2.

4390 One PID segment group (i.e., one PID segment plus any segments associated with it in the message syntax shown in Table 3.21-6) is returned for each matching patient record found. If the Patient Demographics Supplier returns data for multiple patients, it shall return these data in successive occurrences of the PID segment group.

Within each PID segment, field *PID-3-Patient Identifier List* contains, in successive occurrences
4395 delimited by the repetition separator, the identifiers from all the Patient ID Domains requested in QPD-8. In each occurrence of PID-3, component 4 contains the assigning authority value for one Patient ID Domain, and component 1 contains the Patient ID value in that domain. If an identifier does not exist for a domain that was specified on QPD-8, that identifier is not returned in the list. If all entries in the list of patient identifiers are eliminated, which would leave PID-3
4400 empty, then the corresponding PID segment group shall not be present in the response at all.

If an incremental number of records is specified in *RCP-2-Quantity Limited Request*, and the number of records to be sent exceeds that incremental number, the Supplier returns only the incremental number of records, followed by a DSC segment containing a uniquely valued Continuation Pointer.

4405 The consumer will specify the value of the continuation pointer in the DSC segment on the subsequent query request to request the next increment of responses.

Case 3: The Patient Demographics Supplier does not recognize one or more of the domains in *QPD-8-What Domains Returned*.

AE (application error) is returned in MSA-1 and in QAK-2.

4410 For each domain that was not recognized, an ERR segment is returned in which the components of *ERR-2-Error Location* are valued as follows.

COMP #	COMPONENT NAME	VALUE
1	Segment ID	QPD
2	Sequence	1
3	Field Position	8
4	Field Repetition	*(see below)*
5	Component Number	*(empty)*
6	Subcomponent Number	*(empty)*

ERR-2.4-Field Repetition identifies the ordinal occurrence of QPD-8 that contained the
4415 unrecognized domain. As specified by HL7, *ERR-2.5-Component Number* and *ERR-2.6-Subcomponent Number* are not valued because we are referring to the entire field QPD-8.

ERR-3-HL7 Error Code is populated with the error condition code 204 (unknown key identifier). Together with the values in ERR-2, this signifies that the Patient Demographics Supplier did not recognize the domain for *QPD-8-What Domains Returned*.

3.21.4.2.3   Expected Actions

The Patient Demographics Consumer will use the demographic information provided by the Patient Demographics Supplier to perform the functions for which it requested the information, e.g., providing a pick list to the user.

If the Supplier has sent a DSC segment containing a continuation pointer value, additional increments of data are available upon request by the Consumer. After receiving each increment of data that includes a DSC segment containing a continuation pointer value, the Consumer should take one of the following actions.

- If the Consumer wishes to receive another increment of the data, the Consumer reissues the query message using a new unique value in *MSH-10-message control ID* and adding the DSC segment after the RCP segment. DSC-1 shall echo the continuation pointer returned in RSP^K22 DSC-1 segment.

- If the Consumer does not wish to receive another increment of the data, the Consumer issues a cancel query (QCN^J01) message. The consumer shall echo the query tag from QAK-1 in QID-1 and the query message name from QPD-1 in QID-2.

- If the Consumer does not reissue the query or send a cancel query message, the query will eventually terminate.

If the Supplier has not sent a DSC segment containing a continuation pointer value, no more increments of data are available and no further action by the Consumer is required.

3.21.4.3 Canceling a query

The Patient Demographic Consumer can send a cancel trigger to notify the Patient Demographic Supplier that no more incremental responses will be requested, and the interactive query can be terminated. This cancellation trigger is optional. How long the Patient Demographic Supplier retains query results (for incremental response) is an implementation decision and therefore beyond the scope of IHE.

3.21.4.3.1   Trigger Events

The Patient Demographic Consumer which received a RSP^K22 response message indicating there are more incremental responses data available, can terminate the interactive query with the following HL7 trigger event:

J01 – Cancel query status

3.21.4.3.2   Message Semantics

Canceling a query is conducted by the QCN^J01 message. The Patient Demographic Consumer can generate this message to notify the Patient Demographic Supplier that no more data is desired. The segments of the message listed below are required, and their details descriptions are provided in the following subsections.

Table 3.21-10: QCN Cancel query

QCN	Cancel query	Chapter in HL7 2.5
MSH	Message Header	2
QID	Query identification Segment	5

The receiver shall acknowledge this cancel by the HL7 ACK message. See ITI TF-2x: C.2.3, "Acknowledgement Modes", for definition and discussion of the ACK message.

3.21.4.3.2.1 MSH Segment

The MSH segment shall be constructed as defined in the "Message Control" section (ITI TF-2x: C.2.2).

MSH-9 (Message Type) shall have three components. The first component shall have the value of QCN; the second component shall have a value of J01. The third component shall have the value of QCN_J01.

3.21.4.3.2.2 QID Segment

The QID segment contains the information necessary to uniquely identify the query being cancelled.

Table 3.21-11: IHE Profile - QID segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	32	ST	R		00696	Query Tag
2	250	CE	R	0471	01375	Message Query Name

3.21.4.3.2.2.1 Populating QID-1 Query Tag

QID-1 (Query Tag) uniquely identifies the query to be canceled. This field shall contain the same value specified in QPD-2.

3.21.4.3.2.2.2 Populating QID-2 Message Query Name

QID-2 (Message Query Name) identifies the name of the query. It is an identifier of the conformance statement for this query. This field shall contain the same value specified in QPD-1.

3.21.5 Security Considerations

3.21.5.1 Audit Record Considerations

The Patient Demographics Query Transaction is a Query Information event as defined in Table 3.20.4.1.1.1-1. The Actors involved shall record audit events according to the following:

3.21.5.1.1   Patient Demographics Consumer audit message:

	Field Name	Opt	Value Constraints
Event **AuditMessage/** **EventIdentification**	EventID	M	EV(110112, DCM, "Query")
	EventActionCode	M	"E" (Execute)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-21", "IHE Transactions", "Patient Demographics Query")
Source (Patient Demographics Consumer) (1)			
Human Requestor (0..n)			
Destination (Patient Demographics Supplier) (1)			
Audit Source (Patient Demographics Consumer) (1)			
Patient (0..n)			
Query Parameters (1)			

4485   Where:

	Field Name	Opt	Value Constraints
Source **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Demographics Consumer facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

	Field Name	Opt	Value Constraints
Human **Requestor** **(if known)** **AuditMessage/** **ActiveParticipant**	UserID	M	Identity of the human that initiated the transaction.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	U	Access Control role(s) the user holds that allows this transaction.
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*

4490

Destination AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Demographics Source facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Audit Source AuditMessage/ AuditSourceIdentification	*AuditSourceID*	*U*	*not specialized.*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*

4495

Query Parameters (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"2" (system object)
	ParticipantObjectTypeCodeRole	M	"24" (query)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	M	EV("ITI-21", "IHE Transactions", "Patient Demographics Query")
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	*U*	*not specialized*
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	M	The complete query message (including MSH and QPD segments), base64 encoded.
	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

4500

3.21.5.1.2 Patient Demographics Source audit message:

	Field Name	Opt	Value Constraints
Event **AuditMessage/** **EventIdentification**	EventID	M	EV(110112, DCM, "Query")
	EventActionCode	M	"E" (Execute)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-21", "IHE Transactions", "Patient Demographics Query")
Source (Patient Demographics Consumer) (1)			
Destination (Patient Demographics Supplier) (1)			
Audit Source (Patient Demographics Supplier) (1)			
Patient (0..n)			
Query Parameters (1)			

Where:

	Field	Opt	Value
Source **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Demographics Consumer facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

	Field	Opt	Value
Destination **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Demographics Supplier facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

4505

	Field	Opt	Value
Audit Source **AuditMessage/** **AuditSourceIdentification**	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*

4510

| **Query Parameters** (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"2" (system object)
	ParticipantObjectTypeCodeRole	M	"24" (query)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	M	EV("ITI-21", "IHE Transactions", "Patient Demographics Query")
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	*U*	*not specialized*
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	M	The complete query message (including MSH and QPD segments), base64 encoded.
	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

3.22 Patient Demographics and Visit Query [ITI-22]

This section corresponds to transaction [ITI-22] of the IHE IT Infrastructure Technical
4515   Framework. Transaction [ITI-22] is used by the Patient Demographics Consumer and Patient
Demographics Supplier Actors.

3.22.1 Scope

This transaction involves a request by the Patient Demographics Consumer for information about
patients whose demographic and visit data match data provided in the query message. The
4520   request is received by the Patient Demographics Supplier Actor. The Patient Demographics
Supplier immediately processes the request and returns a response in the form of demographic
and visit information for matching patients.

3.22.2 Use Case Roles

```
┌─────────────┐                    ┌─────────────┐
│ Patient     │                    │ Patient     │
│ Demographics│                    │ Demographics│
│ Consumer    │                    │ Supplier    │
└─────────────┘                    └─────────────┘
         \                          /
          \                        /
           ╭──────────────────╮
           │     Patient       │
           │ Demographics and  │
           │   Visit Query     │
           ╰──────────────────╯
```
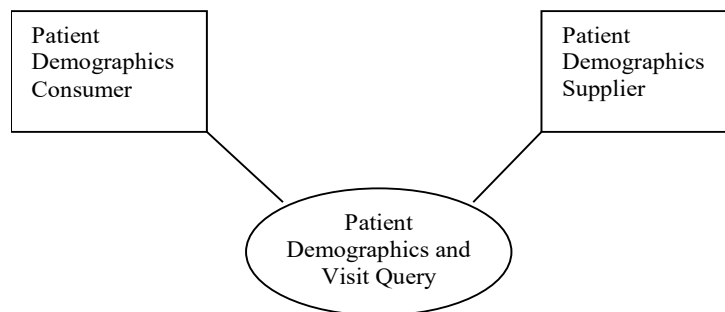
4525

Actor: Patient Demographics Consumer

Role: Requests a list of patients matching a minimal set of demographic (e.g., ID or partial
name) and visit criteria from the Patient Demographics Supplier. Populates its attributes with
demographic and visit information received from the Patient Demographics Supplier.

4530   **Actor:** Patient Demographics Supplier

Role: Returns demographic and visit information for all patients matching the demographic and
visit criteria provided by the Patient Demographics Consumer.
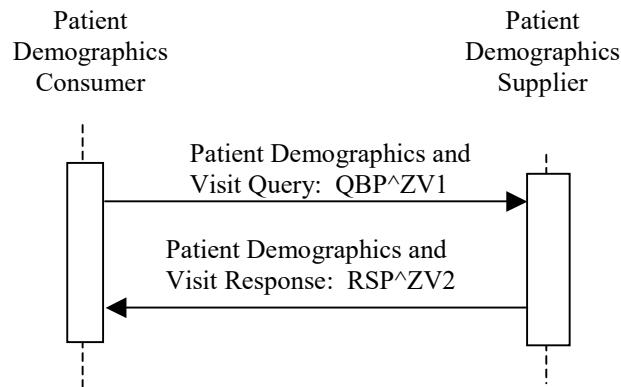
3.22.3 Referenced Standards

HL7:

4535   Version 2.5, Chapter 2 – Control

Version 2.5, Chapter 3 – Patient Administration

Version 2.5, Chapter 5 – Query

3.22.4 Interaction Diagram

4540

3.22.4.1 Patient Demographics and Visit Query

3.22.4.1.1   Trigger Events

4545 A Patient Demographics Consumer's need to select a patient based on demographic and visit information about patients whose information matches a minimal set of known data will trigger the Patient Demographics and Visit Query based on the following HL7 trigger event:

ZV1 – Find Candidates from Visit Information

3.22.4.1.2   Message Semantics

4550 The Patient Demographics and Visit Query transaction is conducted by the HL7 QBP^ZV1 message. The Patient Demographics Consumer shall generate the query message whenever it needs to select from a list of patients whose information matches a minimal set of demographic and visit data. The segments of the message listed below are required, and their detailed descriptions are provided in the following subsections.

Table 3.22-1: QBP Query by Parameter

QBP	Query by Parameter	Chapter in HL7 2.5
MSH	Message Header	2
QPD	Query Parameter Definition	5
RCP	Response Control Parameter	5
[DSC]	Continuation Pointer	2

4555

The receiver shall respond to the query by sending the RSP^ZV2 message. This satisfies the requirements of original mode acknowledgment; no intermediate ACK message is to be sent.

Each Patient Demographics and Visit Query request specifies two distinct concepts. The Patient Demographics and Visit Query is always targeted at a single source of patient demographic
4560 information (referred to in this transaction as the ***patient information source***). A Patient Demographics Supplier may have knowledge of more than one source of demographics. A

Patient Demographics Supplier shall support at least one source of patient demographics and may support multiple sources of demographics. Section 3.21.4.1.2.1 describes how the Patient Demographics Consumer specifies which source of demographics are requested by the query. Each query response shall return demographics from a single patient information source.

The second concept present in the query is the set of patient identifier domains referenced by the query. These patient identifier domains may or may not be associated with the patient information source. A Patient Demographics Supplier shall support at least one patient identifier domain and may support multiple identifier domains. Section 3.21.4.1.2.2 describes how the Patient Demographics Consumer requests identifiers from one or more patient identifier domains. Query responses may return patient identifiers from 0, 1 or multiple patient identifier domains.

3.22.4.1.2.1 MSH Segment

The MSH segment shall be constructed as defined in the "Message Control" section (ITI TF-2x: C.2.2).

The Patient Demographics Supplier is able to obtain demographics from at least one and possibly multiple patient information sources. When more than one patient information source is available, Field *MSH-5-Receiving Application* specifies the patient information source that this query is targeting. The Patient Demographics Supplier shall return this value in *MSH-3-Sending Application* of the RSP^ZV2 response. The value specified in MSH-5 is not related to the value requested in QPD-8 What Domains Returned.

A list shall be published of all Receiving Applications that the Patient Demographics Supplier supports, for the Patient Demographics Consumer to choose from. Each query is processed against one and only one source of patient demographic information.

Field *MSH-9-Message Type* shall have all three components populated with a value. The first component shall have a value of **QBP**; the second component shall have a value of **ZV1**. The third component shall have a value of **QBP_Q21**.

3.22.4.1.2.2 QPD Segment

The Patient Demographics Consumer shall send attributes within the QPD segment as described in Table 3.22-2.

Table 3.22-2: IHE Profile - QPD segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	250	CE	R	0471	01375	Message Query Name
2	32	ST	R+		00696	Query Tag
3		QIP	R			Demographics and Visit Fields
8		CX	O			What Domains Returned

Adapted from the HL7 standard, version 2.5

The Consumer shall specify "IHE PDQ Query" for QPD-1.1 Message Query Name. All other components of Message Query Name shall not be populated.

3.22.4.1.2.2.1   Parameters in QPD-3-Demographics and Visit-Related Fields

Field *QPD-3-Demographics and Visit-Related Fields* consists of one or more repetitions, each of which contains two components that together contain the name and value of a distinct parameter to the query. Acceptable segments are PID, PD1, PV1, and PV2.

The first component of each parameter contains the name of an HL7 element in the form

@<seg>.<field no>.<component no>.<subcomponent no>

The above format is populated according to common HL7 usage for specifying elements used in query parameters, as follows:

<seg> represents a 3-character segment ID from the HL7 Standard.

<field no> is the number of a field within the segment as shown in the SEQ column of the segment attribute table for the segment selected.

<component no>, for fields whose data types contain multiple components, shall contain the cardinal number of the component being valued. For fields whose data types do not contain multiple components, <component no> shall not be valued and its preceding period should not appear.

<subcomponent no>, for components whose data types contain multiple subcomponents, shall contain the cardinal number of the subcomponent being valued. For components whose data types do not contain multiple subcomponents, <subcomponent no> shall not be valued and its preceding period shall not appear.

The second subcomponent of each parameter contains the value that is to be matched. If it is desired to constrain the quality of a match within the bounds of an algorithm known to the Supplier, the algorithm and constraint values may be specified in Fields QPD-4 through QPD-7.

The Patient Demographics Consumer may specify, and the Patient Demographics Supplier shall support, the fields in Table 3.22-3. If the Pediatric Demographics Option is supported, then additionally, the Patient Demographics Consumer may specify, and the Patient Demographics Supplier shall support, the fields in Table 3.22-3a.

Table 3.22-3: IHE Profile – QPD-3 fields required to be supported

FLD	ELEMENT NAME
PID.3	Patient Identifier List
PID.5	Patient Name
PID.7	Date/Time of Birth
PID.8	Administrative Sex
PID.11	Patient Address
PID.18	Patient Account Number

Table 3.22-3a: IHE Profile – QPD-3 fields required to be additionally supported if Pediatric Demographics is supported

FLD	ELEMENT NAME
PID.6	Mother's Maiden Name
PID.13	Phone Number - Home

4625

In addition, the Patient Demographics Supplier should support the fields in the following table, and it shall support at least one of them. Some fields may not be relevant to particular care settings (e.g., inpatient, day patient) and will thus not be supportable by domains in those care settings.

4630 **Table 3.22-4: IHE Profile – QPD-3 fields recommended to be supported**

FLD	ELEMENT NAME
PV1.2	Patient Class
PV1.3	Assigned Patient Location
PV1.7	Attending Doctor
PV1.8	Referring Doctor
PV1.9	Consulting Doctor
PV1.10	Hospital Service
PV1.17	Admitting Doctor
PV1.19	Visit Number

The Patient Demographics Supplier shall return demographic records that reflect the best fit to all of the search criteria.

Examples of parameter expressions in QPD-3:

4635

```
@PID.5.1.1^SMITH~@PID.8^F
```

requests all patients whose family name (first subcomponent (data type ST) of the first component (data type FN) of PID-5-Patient Name (data type XPN)) matches the value 'SMITH' and whose sex (PID-8-Sex (data type IS)) matches the value 'female'.

4640

```
@PV1.3.2^389~@PV1.3.3^2
```

requests all patients whose room number (second component (data type IS) of PV1-3-Assigned Patient Location (data type PL)) matches the value 389 and whose bed number (third component (data type IS) of PV1-3-Assigned Patient Location (data type PL)) matches the value 2.

4645 **3.22.4.1.2.2.2   Populating QPD-8-What Domains Returned**

As in the Patient Demographics Query [ITI-21] transaction, field QPD-8 restricts the set of domains for which identifiers are returned in PID-3:

1. In a multiple-domain environment, QPD-8 may be used to identify one or more domains of interest to the Patient Demographics Consumer and from which the Consumer wishes to obtain a value for *PID-3-Patient Identifier*. Note that the patient information source designated by MSH-5 may or may not be associated with any of the Patient ID Domains listed in *QPD-8-What Domains Returned*.

2. If QPD-8 is empty, the Patient Demographics Supplier shall return all Patient IDs known by the Patient Demographics Supplier for each patient that matches the search criteria. See Case 1 in Section 3.21.4.2.2.8 for details on how this information is returned.

3. If QPD-8 is specified and the domains are recognized, the Patient Demographics Supplier shall return the Patient IDs for each patient that matches the search criteria. See Case 2 in Section 3.21.4.2.2.8 for details on how this information is returned.

4. Any domain not recognized by the Patient Demographics Supplier is an error condition. See Case 3 in Section 3.21.4.2.2.8 how to handle this condition.

5. In a single-domain environment, QPD-8 may be ignored by the Patient Demographics Supplier. The Supplier shall always return the identifier from the Patient ID Domain known by the Patient Demographics Supplier.

Within field QPD-8, only component 4 (Assigning Authority) shall be valued.

The Patient Demographics Supplier may or may not be able to supply additional identifiers from the domains specified in QPD-8. A discussion of how QPD-8 is processed is included in the architectural discussion in the "Using Patient Data Query (PDQ) in a Multi-Domain Environment" section (ITI TF-2x: Appendix M).

The Patient Demographics Consumer shall be able to support at least one of the following mechanisms for specifying QPD-8:

1. Transmit an empty value and receive all identifiers in all domains known by the Patient Demographics Supplier (one or more domains), or

2. Transmit a single value and receive zero or more identifiers in a single domain, or

3. Transmit multiple values and receive multiple identifiers in those multiple domains.

3.22.4.1.2.3 RCP Segment

The Patient Demographics Consumer shall send attributes within the RCP segment as described in Table 3.22-5. Fields not listed are optional.

Table 3.22-5: IHE Profile - RCP segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	1	ID	R	0091	00027	Query Priority
2	10	CQ	O	0126	00031	Quantity Limited Request

Adapted from the HL7 standard, version 2.5

3.22.4.1.2.3.1   Populating RCP-1-Query Priority

Field *RCP-1-Query Priority* shall always contain **I**, signifying that the response to the query is to be returned in Immediate mode.

3.22.4.1.2.3.2   Populating RCP-2-Quantity Limited Request

The Patient Demographics Consumer may request that responses to the query be sent, using the HL7 Continuation Protocol, in increments of a specified number of patient records. (In the context of the HL7 query, a patient record is defined as the PID segment and any segments accompanying it for each patient.) It is desirable to request an incremental response if the query could result in hundreds or thousands of matches or "hits."

The Patient Demographics Supplier shall support the HL7 Continuation Protocol.

Field RCP-2 is of data type CQ, which contains two components. The first component contains the number of increments, always expressed as an integer greater than 0, while the second component contains the kind of increment, always RD to signify that incremental replies are specified in terms of records.

For example, 50RD requests 50 records at a time.

See the "Incremental Response Processing" Section 3.22.4.1.3.3 and the "Expected Actions" Section 3.22.4.2.3 of the Patient Demographics Query Response message for more information on the implementation of the continuation protocol.

3.22.4.1.2.4 DSC Segment

The Patient Demographics Consumer may request additional increments of data by specifying this segment on the query request. This segment should be omitted on the initial query request. Its purpose is to request additional increments of the data from the Patient Demographic Supplier.

Table 3.22-5a: IHE Profile - DSC segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	180	ST	O		00014	Continuation Pointer
2	1	ID	O	0398	01354	Continuation Style

3.22.4.1.2.4.1   Populating DSC-1 Continuation Pointer

To request additional increments of data, DSC-1 (Continuation Pointer) shall echo the value from RSP^K22 DSC-1.

3.22.4.1.2.4.2   Populating DSC-2 Continuation Style

DSC-2 (Continuation Style) shall always contain "I", signifying that this is part of an interactive continuation message.

3.22.4.1.3   Expected Actions

3.22.4.1.3.1 Immediate Acknowledgement

The Patient Demographics Supplier shall immediately return an RSP^ZV2 response message as specified below in Section 3.22.4.2, "Patient Demographics Response." The RSP^ZV2 response message incorporates original mode application acknowledgment as specified in the "Acknowledgment Modes" section (ITI TF-2x: C.2.3). The Supplier shall use Field *MSH-3-Sending Application* of the RSP^ZV2 message to return the value it received from the Patient Demographics Consumer in Field *MSH-5-Receiving Application* of the QBP^ZV1 message.

3.22.4.1.3.2 Query Parameter Processing

The Patient Demographics Supplier shall be capable of accepting, searching on, and responding with attributes in the QPD segment as specified in Table 3.22-2.

The Patient Demographics Supplier must be capable of receiving all valid combinations of subcomponents that make up the Assigning Authority component (i.e., all valid combinations of QPD-3.8).

Handling of phonetic issues, alternate spellings, upper and lower case, wildcards, accented characters, etc., if deemed appropriate, is to be supported by the Patient Demographics Supplier rather than by the Patient Demographics Consumer. The Supplier shall return at least all exact matches to the query parameters sent by the Consumer; IHE does not further specify matching requirements.

3.22.4.1.3.3 Incremental Response Processing

The Patient Demographics Supplier shall be capable of accepting and processing attributes in the RCP segment as listed in Table 3.22-5. In particular, the Patient Demographics Supplier shall respond in immediate mode (as specified by a *RCP-1-Query Priority* value of **I**).

Also, the Patient Demographics Supplier shall be able to interpret *RCP-2-Quantity Limited Request* to return successive responses of partial lists of records according to the HL7 Continuation Protocol, as described in Section 3.22.4.2 below and in the HL7 Standard.

3.22.4.2 Patient Demographics and Visit Response

3.22.4.2.1   Trigger Events

The Patient Demographics Supplier's response to the Find Candidates with Visit Information message shall be the following message:

ZV2 – Find Candidates with Visit Information response

3.22.4.2.2   Message Semantics

The Patient Demographics and Visit Response transaction is conducted by the RSP^ZV2 message. The Patient Demographics Supplier shall generate this message in direct response to the QBP^ZV1 message previously received. This message satisfies the Application Level, Original Mode Acknowledgement for the HL7 QBP^ZV1 message.

The segments of the message listed without enclosing square brackets in Table 3.22-6 are required. Detailed descriptions of all segments listed in the table below are provided in the following subsections. Other segments of the message are optional.

4750

Table 3.22-6: RSP Segment Pattern Response

RSP	Segment Pattern Response	Chapter in HL7 2.5
MSH	Message Header	2
MSA	Message Acknowledgement	2
[{ERR}]	Error	2
QAK	Query Acknowledgement	5
QPD	Query Parameter Definition	5
[{ PID	Patient Identification	3
[PD1]	Additional Patient Demographics	3
PV1	Patient Visit	3
[PV2]	Patient Visit – Additional Information	3
[QRI] }]	Query Response Instance	5
[DSC]	Continuation Pointer	2

3.22.4.2.2.1 MSH Segment

The MSH segment shall be constructed as defined in the "Message Control" section (ITI TF-2x: C.2.2).

4755   Field *MSH-3-Sending Application* specifies the patient information source that processed the query. The Patient Demographics Supplier shall use Field *MSH-3-Sending Application* of the RSP^ZV2 message to return the value it received from the Patient Demographics Consumer in Field *MSH-5-Receiving Application* of the QBP^Q22 message.

Field *MSH-9-Message Type* shall have all three components populated with a value. The first
4760   component shall have a value of **RSP**; the second component shall have a value of **ZV2**. The third component shall have a value of **RSP_ZV2**.

3.22.4.2.2.2 MSA Segment

The Patient Demographics Supplier is not required to send any attributes within the MSA segment beyond what is specified in the HL7 standard. See the "Acknowledgment Modes"
4765   section (ITI TF-2x: C.2.3) for the list of all required and optional fields within the MSA segment.

3.22.4.2.2.3 QAK Segment

The Patient Demographics Supplier shall send attributes within the QAK segment as defined in Table 3.22-7. For the details on filling in QAK-2 (Query Response Status) refer to the "Patient Demographics Supplier Actor Query Response Behavior" Section 3.22.4.2.2.11.

4770   QAK-1 (Query Tag) shall echo the same value of QPD-2 (Query Tag) of the QBP^Q22 message, to allow the Patient Demographics Query Consumer to match the response to the corresponding query request.

Table 3.22-7: IHE Profile - QAK segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	32	ST	R		00696	Query Tag
2	2	ID	R+	0208	00708	Query Response Status

Adapted from the HL7 standard, version 2.5

4775   ### 3.22.4.2.2.4 QPD Segment

The Patient Demographics Supplier shall echo the QPD Segment value that was sent in the QBP^ZV1 message.

3.22.4.2.2.5 PID Segment

The Patient Demographics Supplier shall return one PID segment group (i.e., one PID segment
4780   plus any segments associated with it in the message syntax shown in Table 3.22-6) for each matching patient record found. The Supplier shall return the attributes within the PID segment as specified in Table 3.22-8. If the Pediatric Demographics Option is supported, then additionally, the Supplier shall return the attributes within the PID segment as specified in Table 3.22-9. In addition, the Patient Demographics Supplier shall return all other attributes within the PID
4785   segment for which it is able to supply values.

Table 3.22-8: IHE Profile - PID segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
3	250	CX	R		00106	Patient Identifier List
5	250	XPN	R		00108	Patient Name
7	26	TS	R2		00110	Date/Time of Birth
8	1	IS	R2	0001	00111	Administrative Sex
11	250	XAD	R2		00114	Patient Address
18	250	CX	R2		00121	Patient Account Number

Table 3.22-8a: IHE Profile, Pediatric Demographics Option - PID segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
6	250	XPN	R2		00109	Mother's Maiden Name
13	250	XTN	R2		00116	Phone Number - Home
24	1	ID	R2	0136	00127	Multiple Birth Indicator
25	2	NM	R2		00128	Birth Order (within live births)
33	26	TS	R2		01537	Last Update Date/Time

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
34	241	HD	R2		01538	Last Update Facility

Adapted from the HL7 standard, version 2.5

4790

The Patient Demographics Supplier may or may not be able to supply additional identifiers from the domains specified in QPD-8. Inability to supply an identifier in a particular domain is not an error, provided that the domain is recognized.

The PID segment and the PD1, PV1, PV2, and QRI segments that are associated with it are
4795   returned only when the Patient Demographics Supplier is able to associate the search information in QPD-3 with one or more patient records in the patient information source associated with *MSH-5-Receiving Application*. See the "Patient Demographics Supplier Actor Query Response Behavior" Section 3.22.4.2.2.11) for a detailed description of how the Patient Demographics Supplier responds to the query request under various circumstances.

4800   ### 3.22.4.2.2.6 PD1 Segment

For each patient for which the Patient Demographics Supplier returns a PID segment, it may optionally return the PD1 (Patient Additional Demographics) segment, but is not required to do so.

3.22.4.2.2.7 PV1 Segment

4805   For each patient for which the Patient Demographics Supplier returns a PID segment, it shall also return a PV1 Segment in which attributes are populated as specified in Table 3.22-9. In addition, the Patient Demographics Supplier shall return all other attributes within the PV1 segment for which it is able to supply values.

Table 3.22-9: IHE Profile – PV1 segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
2	1	IS	R	0004	00132	Patient Class
3	80	PL	R2		00133	Assigned Patient Location
7	250	XCN	R2	0010	00137	Attending Doctor
8	250	XCN	R2	0010	00138	Referring Doctor
9	250	XCN	R2	0010	00139	Consulting Doctor
10	3	IS	R2	0069	00140	Hospital Service
17	250	XCN	R2	0010	00147	Admitting Doctor
19	250	CX	R2		00149	Visit Number

4810   *Adapted from the HL7 standard, version 2.5*

3.22.4.2.2.8 PV2 Segment

For each patient for which the Patient Demographics Supplier returns a PID segment, it may optionally return the PV2 (Patient Visit – Additional Information) segment, but is not required to do so.

3.22.4.2.2.9 QRI Segment

For each patient for which the Patient Demographics Supplier returns a PID segment, it may optionally return the QRI (Query Response Instance) segment, but is not required to do so. Refer to the HL7 Standard, Version 2.5, Chapter 5, Section 5.5.5, for more information.

3.22.4.2.2.10 DSC Segment

If a number of records is specified in *RCP-2-Quantity Limited Request*, the Patient Demographics Supplier shall return an incremental response of that number of records when the number of matching records it finds exceeds the number of records specified in RCP-2.

As long as the Patient Demographics Supplier has records to return in additional to those returned in the incremental response, the Supplier shall return a DSC Segment. The single field of the DSC Segment shall contain a unique alphanumeric value (the Continuation Pointer) that the Patient Demographics Consumer may return in the DSC segment of the QBP^ZV1 message to request the next increment of responses. The Supplier shall return increments as many times as the Consumer requests them (and there are increments to return), and shall stop when the Consumer sends a cancel query (QCN^J01) message (or when there are no more increments to return). The Supplier shall signal no more increments by omitting the DSC segment.

3.22.4.2.2.11 Patient Demographics Supplier Actor Query Response Behavior

The Patient Demographics Supplier shall perform the matching of patient data based on the query parameter values it receives. The information provided by the Patient Demographics Supplier to Patient Demographics Consumer Actors is a list of possible matching patients from the patient information source associated with the value that the Consumer sent in *MSH-5-Receiving Application* of the query message.

If domains are specified in *QPD-8-What Domains Returned* and are recognized by the Patient Demographics Supplier, the response will also, for each patient, contain any Patient ID values found in the specified domains.

The mechanics of the matching algorithms used are internal to the Patient Demographics Supplier and are outside of the scope of this framework.

The Patient Demographics Supplier shall respond to the query request as described by the following 3 cases:

Case 1: The Patient Demographics Supplier finds (in the patient information source associated with *MSH-5-Receiving Application*) at least one patient record matching the criteria sent in *QPD-3-Demographics Fields*. No patient identifier domains are requested in *QPD-8-What Domains Returned*.

AA (application accept) is returned in MSA-1.

OK (data found, no errors) is returned in QAK-2.

4850 One PID-PV1 segment group (i.e., one PID segment and one PV1 segment, plus any segments associated with them in the message syntax shown in Table 3.22-6) is returned from the patient information source for each patient record found. If the Patient Demographics Supplier returns data for multiple patients, it shall return these data in successive occurrences of the PID-PV1 segment group.

4855 Within each PID segment, field *PID-3-Patient Identifier List* contains one or more identifiers from the set of Patient ID Domains known by the Patient Demographics Supplier.

If an incremental number of records are specified in *RCP-2-Quantity Limited Request*, and the number of records found exceeds that incremental number, the Supplier returns only the incremental number of records, followed by a DSC segment containing a uniquely valued
4860 Continuation Pointer.

The consumer will specify the value of the continuation pointer in the DSC segment on the subsequent query request to request the next increment of responses.

Case 2: The Patient Demographics Supplier finds (in the patient information source associated with *MSH-5-Receiving Application*) at least one patient record matching the criteria sent in
4865 *QPD-3-Demographics Fields*. One or more patient identifier domains are requested in *QPD-8-What Domains Returned*; the Supplier recognizes all the requested domains.

AA (application accept) is returned in MSA-1.

OK (data found, no errors) is returned in QAK-2.

One PID-PV1 segment group (i.e., one PID and one PV1 segment plus any segments associated
4870 with them in the message syntax shown in Table 3.22-6) is returned for each matching patient record found. If the Patient Demographics Supplier returns data for multiple patients, it shall return these data in successive occurrences of the PID segment group.

Within each PID segment, field *PID-3-Patient Identifier List* contains, in successive occurrences delimited by the repetition separator, the identifiers from all the Patient ID Domains requested in
4875 QPD-8. In each occurrence of PID-3, component 4 contains the assigning authority value for one Patient ID Domain, and component 1 contains the Patient ID value in that domain. If an identifier does not exist for a domain that was specified on QPD-8, nothing is returned in the list.

If an incremental number of records is specified in *RCP-2-Quantity Limited Request*, and the number of records to be sent exceeds that incremental number, the Supplier returns only the
4880 incremental number of records, followed by a DSC segment containing a uniquely valued Continuation Pointer.

The consumer will specify the value of the continuation pointer in the DSC segment on the subsequent query request to request the next increment of responses.

Case 3: The Patient Demographics Supplier does not recognize one or more of the domains in
4885 *QPD-8-What Domains Returned*.

AE (application error) is returned in MSA-1 and in QAK-2.

For each domain that was not recognized, an ERR segment is returned in which the components of *ERR-2-Error Location* are valued as follows.

COMP #	COMPONENT NAME	VALUE
1	Segment ID	QPD
2	Sequence	1
3	Field Position	8
4	Field Repetition	*(see below)*
5	Component Number	*(empty)*
6	Subcomponent Number	*(empty)*

4890

ERR-2.4-Field Repetition identifies the ordinal occurrence of QPD-8 that contained the unrecognized domain. As specified by HL7, *ERR-2.5-Component Number* and *ERR-2.6-Subcomponent Number* are not valued because we are referring to the entire field QPD-8.

ERR-3-HL7 Error Code is populated with the error condition code 204 (unknown key identifier).
4895   Together with the values in ERR-2, this signifies that the Patient Demographics Supplier did not recognize the domain for *QPD-8-What Domains Returned*.

3.22.4.2.3   Expected Actions

The Patient Demographics Consumer will use the demographic information provided by the Patient Demographics Supplier to perform the functions for which it requested the information,
4900   e.g., providing a pick list to the user.

If the Supplier has sent a DSC segment containing a continuation pointer value, additional increments of data are available upon request by the Consumer. After receiving each increment of data that includes a DSC segment containing a continuation pointer value, the Consumer should take one of the following actions.

4905   • If the Consumer wishes to receive another increment of the data, the Consumer reissues the query message using a new unique value in *MSH-10-message control ID* and adding the DSC segment after the RCP segment. DSC-1 shall echo the continuation pointer returned in RSP^K22 DSC-1 segment.

   • If the Consumer does not wish to receive another increment of the data, the Consumer
4910   issues a cancel query (QCN^J01) message.

   • If the Consumer does not reissue the query or send a cancel query message, the query will eventually terminate.

If the Supplier has not sent a DSC segment containing a continuation pointer value, no more increments of data are available and no further action by the Consumer is required.

3.22.4.3 Canceling a query

The Patient Demographic Consumer can send a cancel trigger to notify the Patient Demographic Supplier that no more incremental response will be requested, and interactive query can be terminated. This cancellation trigger is optional. How long the Patient Demographic Supplier retains query results (for incremental response) is an implementation decision and therefore beyond the scope of IHE.

3.22.4.3.1 Trigger Events

The Patient Demographic Consumer which received a RSP^K22 response message indicating there more incremental response data available, can terminate the interactive query with the following HL7 trigger event:

J01 – Cancel query status

3.22.4.3.2 Message Semantics

Canceling a query is conducted by the QCN^J01 message. The Patient Demographic Consumer can generate this message to notify the Patient Demographic Supplier that no more data is desired. The segments of the message listed below are required, and their details descriptions are provided in the following subsections.

Table 3.22-10: QCN Cancel query

QCN	Cancel query	Chapter in HL7 2.5
MSH	Message Header	2
QID	Query identification Segment	5

The receiver shall acknowledge this cancel by the HL7 ACK message. See ITI TF-2x: C.2.3, "Acknowledgement Modes", for definition and discussion of the ACK message.

3.22.4.3.2.1 MSH Segment

The MSH segment shall be constructed as defined in the "Message Control" section (ITI TF-2x: C.2.2).

MSH-9 (Message Type) shall have three components. The first component shall have the value of QCN; the second component shall have a value of J01. The third component shall have the value of QCN_J01.

3.22.4.3.2.2 QID Segment

The QID segment contains the information necessary to uniquely identify the query being cancelled.

_____

Table 3.22-11: IHE Profile - QID segment

SEQ	LEN	DT	OPT	TBL#	ITEM#	ELEMENT NAME
1	32	ST	R		00696	Query Tag
2	250	CE	R	0471	01375	Message Query Name

4945

3.22.4.3.2.2.1 Populating QID-1 Query Tag

QID-1 (Query Tag) uniquely identifies the query to be canceled. This field shall contain the same value specified in QPD-2.

3.22.4.3.2.2.2 Populating QID-2 Message Query Name

4950 QID-2 (Message Query Name) identifies the name of the query. It is an identifier of the conformance statement for this query. This field shall contain the same value specified in QPD-1.

3.22.5 Security Considerations

3.22.5.1 Audit Record Considerations

4955 The Patient Demographics Query Transaction is a Query Information event as defined in Table 3.20.4.1.1.1-1. The Actors involved shall record audit events according to the following:

3.22.5.1.1 Patient Demographics Consumer audit message:

	Field Name	Opt	Value Constraints
Event **AuditMessage/** **EventIdentification**	EventID	M	EV(110112, DCM, "Query")
	EventActionCode	M	"E" (Execute)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-22", "IHE Transactions", "Patient Demographics and Visit Query")
Source (Patient Demographics Consumer) (1)			
Human Requestor (0..n)			
Destination (Patient Demographics Supplier) (1)			
Audit Source (Patient Demographics Consumer) (1)			
Patient (0..n)			
Query Parameters (1)			

Where:

	Field Name	Opt	Value Constraints
Source **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Demographics Consumer facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*

_____

	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Human Requestor (if known) AuditMessage/ ActiveParticipant	UserID	M	Identity of the human that initiated the transaction.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	U	Access Control role(s) the user holds that allows this transaction.
	NetworkAccessPointTypeCode	*U*	*not specialized*
	NetworkAccessPointID	*U*	*not specialized*

4960

Destination AuditMessage/ ActiveParticipant	UserID	M	The identity of the Patient Demographics Source facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Audit Source AuditMessage/ AuditSourceIdentification	*AuditSourceID*	*U*	*not specialized*
	AuditEnterpriseSiteID	*U*	*not specialized*
	AuditSourceTypeCode	*U*	*not specialized*

Patient (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	*M*	*not specialized*
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	M	The patient ID in HL7 CX format.
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	*U*	*not specialized*
	ParticipantObjectDetail	*U*	*not specialized*

Query Parameters (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"2" (system object)
	ParticipantObjectTypeCodeRole	M	"24" (query)
	ParticipantObjectDataLifeCycle	*U*	*not specialized*
	ParticipantObjectIDTypeCode	M	EV("ITI-22", "IHE Transactions", "Patient Demographics and Visit Query")
	ParticipantObjectSensitivity	*U*	*not specialized*
	ParticipantObjectID	*U*	*not specialized*

|			
	ParticipantObjectName	*U*	*not specialized*
	ParticipantObjectQuery	M	the QPD segment of the query - Base64 encoded
	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

3.22.5.1.2   Patient Demographics Source audit message:

4965

	Field Name	Opt	Value Constraints
Event **AuditMessage/** **EventIdentification**	EventID	M	EV(110112, DCM, "Query")
	EventActionCode	M	"E" (Execute)
	EventDateTime	*M*	*not specialized*
	EventOutcomeIndicator	*M*	*not specialized*
	EventTypeCode	M	EV("ITI-22", "IHE Transactions", "Patient Demographics and Visit Query")
Source (Patient Demographics Consumer) (1)			
Destination (Patient Demographics Supplier) (1)			
Audit Source (Patient Demographics Supplier) (1)			
Patient (0..n)			
Query Parameters (1)			

Where:

Source **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Demographics Consumer facility and sending application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	*U*	*not specialized*
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110153, DCM, "Source")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

Destination **AuditMessage/** **ActiveParticipant**	UserID	M	The identity of the Patient Demographics Supplier facility and receiving application from the HL7 message; concatenated together, separated by the | character.
	AlternativeUserID	M	The process ID as used within the local operating system in the local system logs.
	UserName	*U*	*not specialized*
	UserIsRequestor	*U*	*not specialized*
	RoleIDCode	M	EV(110152, DCM, "Destination")
	NetworkAccessPointTypeCode	M	"1" for machine (DNS) name, "2" for IP address
	NetworkAccessPointID	M	The machine name or IP address.

4970

Audit Source AuditMessage/ AuditSourceIdentification	AuditSourceID	U	*not specialized*
	AuditEnterpriseSiteID	U	*not specialized*
	AuditSourceTypeCode	U	*not specialized*

Patient (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"1" (Person)
	ParticipantObjectTypeCodeRole	M	"1" (Patient)
	ParticipantObjectDataLifeCycle	U	*not specialized*
	ParticipantObjectIDTypeCode	M	*not specialized*
	ParticipantObjectSensitivity	U	*not specialized*
	ParticipantObjectID	M	The patient ID in HL7 CX format.
	ParticipantObjectName	U	*not specialized*
	ParticipantObjectQuery	U	*not specialized*
	ParticipantObjectDetail	U	*not specialized*

Query Parameters (AuditMessage/ ParticipantObjectIdentification)	ParticipantObjectTypeCode	M	"2" (system object)
	ParticipantObjectTypeCodeRole	M	"24" (query)
	ParticipantObjectDataLifeCycle	U	*not specialized*
	ParticipantObjectIDTypeCode	M	EV("ITI-22", "IHE Transactions", "Patient Demographics and Visit Query")
	ParticipantObjectSensitivity	U	*not specialized*
	ParticipantObjectID	U	*not specialized*
	ParticipantObjectName	U	*not specialized*
	ParticipantObjectQuery	M	the QPD segment of the query - Base64 encoded
	ParticipantObjectDetail	M	Type=MSH-10 (the literal string), Value=the value of MSH-10 (from the message content, base64 encoded)

3.23 Find Personnel White Pages [ITI-23]

This section corresponds to transaction [ITI-23] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-23] is used by the Personnel White Pages Consumer and the DNS Server Actors.

3.23.1 Scope

This transaction is used to locate the Personnel White Pages directory.

3.23.2 Use Case Roles
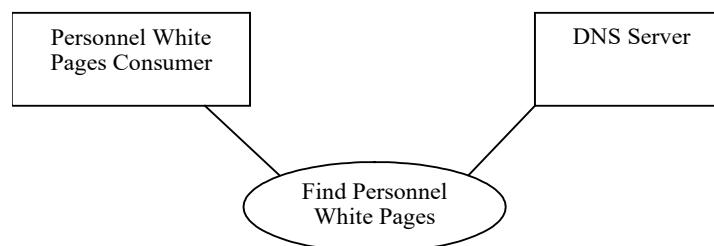
Actor: Personnel White Pages Consumer

Role: Requests Locating information for the Personnel White Pages Directory

4985 Actor: DNS Server

Role: Provides locating information about the Personnel White Pages Directory

3.23.3 Referenced Standard

IETF: RFC2181 Clarifications to the DNS Specification

RFC2219 Use of DNS Aliases for Network Services

4990   RFC2782 A DNS RR for specifying the location of services (DNS SRV)

DICOM: DICOM Supplement 67 – Configuration Management

Note: Normative RFC's are frequently updated by issuance of subsequent RFC's. The original older RFC is not modified to include references to the newer RFC. This transaction lists the applicable RFC's in effect at the time of publication. Subsequent updates and clarifications to 4995 these RFC's should also be applied.

3.23.4 Interaction Diagram
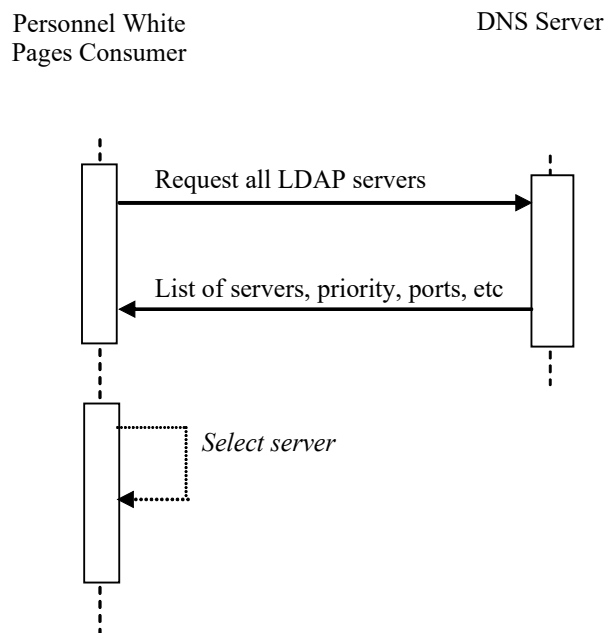
3.23.4.1 Request all LDAP servers

5000 The RFC2782 DNS RR is used for specifying the location of services (DNS SRV). It specifies a mechanism for requesting the names and rudimentary descriptions for machines that provide network services. The DNS client requests the descriptions for all machines that are registered as

offering a particular service name. In this case the service name requested will be "_ldap._tcp". The DNS server may respond with multiple names for a single request.

3.23.4.1.1　Trigger Events

This transaction is used by the Personnel White Pages Consumer prior to any access to the Personnel White Pages Directory.

3.23.4.1.2　Message Semantics

The Personnel White Pages Consumer shall request a list of all the LDAP servers available. The Personnel White Pages Consumer shall use the priority, capacity, and location information provided by DNS as part of the server selection process. (RFC2782 recommends the proper use of these parameters).

> Notes:
>
> -- Multiple LDAP servers providing access to a common replicated LDAP database is a commonly supported configuration. This permits LDAP servers to be located where appropriate for best performance and fault tolerance. The DNS server response information provides guidance for selecting the most appropriate server.
>
> -- There may also be multiple LDAP servers providing different databases. In this situation the client may have to examine several servers to find the one that supports the Personnel White Pages Directory (See Section 3.24.4.1.2.2).
>
> -- The client may have a mechanism for manual default selection of the LDAP server to be used if the DNS server does not provide an LDAP server location.

3.23.4.1.3　Expected Actions

The DNS Server shall return all known LDAP servers in accordance with RFC2782.

3.24　Query Personnel White Pages [ITI-24]

This section corresponds to transaction [ITI-24] of the IHE IT Infrastructure Technical Framework. Transaction [ITI-24] is used by the Personnel White Pages Consumer and the Personnel White Pages Directory Actors.

3.24.1 Scope

This transaction is used to retrieve information from the Personnel White Pages directory.

The RFC3377 "Lightweight Directory Access Protocol (v3): Technical Specification" specifies a mechanism for making queries of a database corresponding to an LDAP schema. The LDAP client can compose requests in the LDAP query language, and the LDAP server will respond with the results for a single request.

3.24.2 Use Case Roles
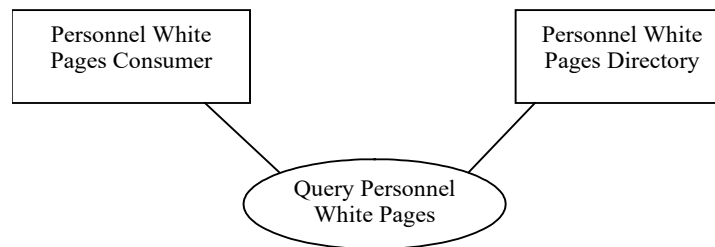
5035 Actor: Personnel White Pages Consumer

Role: Requests information about a human workforce member(s)

Actor: Personnel White Pages Directory

Role: Provides information about one or more human workforce member

3.24.3 Referenced Standard

5040 **IETF**: RFC2181 - Clarifications to the DNS Specification

RFC1766 - Tags for the Identification of Languages

RFC2251 - Lightweight Directory Access Protocol (v3)

RFC2252 - Lightweight Directory Access Protocol (v3): Attribute Syntax Definitions

5045 RFC2253 - Lightweight Directory Access Protocol (v3): UTF-8 String Representation of Distinguished Names

RFC2256 - A Summary of the X.500(96) User Schema for use with LDAPv3

RFC2798 - Definition of the inetOrgPerson LDAP Object Class

RFC2829 - Authentication Methods for LDAP

5050 RFC2830 - LDAPv3: Extension for Transport Layer Security

RFC3377 - Lightweight Directory Access Protocol (v3): Technical Specification

ISO: ISO/TS 17090 directory standard for healthcare identity management

CRU: Projet de schémas d'annuaires et de schémas de registres de resources numériques interopérables pour les administrations Document technique – v1, novembre 2002

5055 **ITU-T**: E.123: Notation for national and international telephone numbers

HL7: HL7 Version 2.5, Chapter 2 – Control

3.24.4 Interaction Diagram
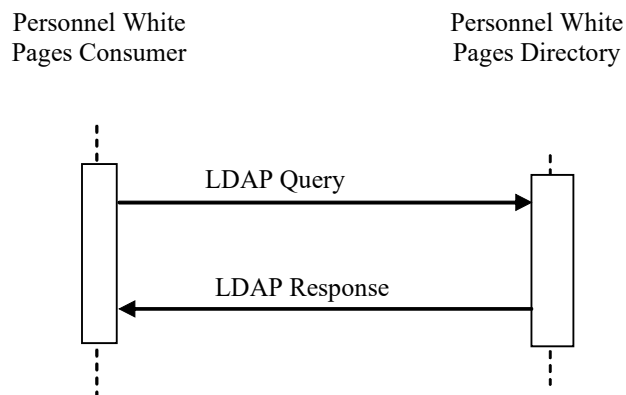
3.24.5 LDAP Query/Response

5060 The Personnel White Pages Consumer may make a wide variety of queries and cascaded queries using LDAP. The Personnel White Pages Consumer and Personnel White Pages Directory shall support the data model described here.

A commonly supported configuration type has multiple LDAP servers providing access to a common replicated LDAP database. This permits LDAP servers to be located where appropriate
5065 for best performance and fault tolerance. The replication rules chosen for the LDAP servers affect the visible data consistency. LDAP permits inconsistent views of the database during updates and replications. This inconsistency may result in a consumer receiving the person's previous demographics or contact information. This should not be a problem for our use-cases as none of them are life critical.

5070 #### 3.24.5.1 Trigger Events

Personnel White Pages Consumer requires some Personnel White Pages information on one or more human workforce members.

3.24.5.2 Message Semantics

The transaction uses standard LDAP v3 query/response mechanisms.

5075 #### 3.24.5.2.1 User Authentication

Some of the attributes to be retrieved using this transaction may be considered sensitive to the healthcare personnel. It is the responsibility of the Personnel White Pages Directory to enforce these protections. To protect records and/or attributes, the Personnel White Pages Consumer may be called upon to provide user credentials.

5080 Anonymous authentication shall be implemented on Personnel White Pages Directory and is optional for Personnel White Pages Consumer. Anonymous authentication shall be implemented as described in LDAP v3 Section 4.2 Bind Operation.

Simple Authentication shall be implemented on the Personnel White Pages Directory and is optional for the Personnel White Pages Consumer. Simple authentication shall be implemented as described in LDAP v3 Section 4.2 Bind Operation. This authentication type is not recommended for use over networks that are not otherwise secured as the username and password are transferred in the clear. The use of SSL-Simple Authentication is a better choice.

SSL-Simple Authentication shall be implemented on the Personnel White Pages Directory and is optional for the Personnel White Pages Consumer. SSL-Simple Authentication is not defined in any normative text, but is consistently implemented and often referred to as "ldaps". The PWP Consumer shall connect to port 636 using SSL against the PWP Directory Certificate. The LDAP v3 conversation then continues with Simple Authentication as defined in LDAP v3 Section 4.2 Bind Operation.

PWP specifies read operations on personnel demographics. The use of bi-directional TLS authentication, such as that defined in ATNA Profile, is not necessary as this profile does not provide access to Protected Health Information (PHI). The use of SSL to cover the authentication and query process is sufficient in this Profile.

3.24.5.2.2   Base DN Discovery

The Personnel White Pages represents a branch within the "LDAP" directory. Branches in LDAP are defined by a "Base DN". The list of Base DNs that are provided by a LDAP directory can be found by doing a LDAP Query with a NULL (i.e., "") Base DN, and ObjectClass="DN". The Personnel White Pages Directory shall contain a person object with the cn="IHE-ITI-PWP". The Personnel White Pages Consumer may thus search through the list of Base DNs that the LDAP Directory contains for this cn object. The Personnel White Pages Directory identified in this way shall contain person/inetOrgPerson objects that conform to the Query Personnel White Pages Directory Transaction.

Note: The first LDAP server that yields a result on the search for IHE-ITI-PWP can be used. There is no need to search further.

3.24.5.2.3   Query Encoding

Note that the LDAP transactions utilize UTF-8 encoding unless otherwise noted. The schema shown here is the commonly used schema found in X.500 Schema for LDAP and inetOrgPerson. Extensions beyond this schema are not recommended. The base schema must be preserved to ensure interoperability. Schema extensions shall not introduce attributes that duplicate the meaning of any attribute specified in this Profile.

These attributes are multi-valued unless explicitly defined as single-valued. At this time there is no universally implemented method to distinguish the purpose for any of the instances in a multi-valued attribute. The IHE recommends that the first entry contain the preferred value, and that applications use the first entry whenever a single value must be selected.

The following table shows the attributes found in Person (OrganizationalPerson and ResidentialPerson) as defined in RFC2256 and inetOrgPerson as defined in RFC2798. The first three columns contain the definitions from the standards for reference. Within the table the

fourth column is the IHE recommendation for use with further discussion found in the fifth column.

KEY for IHE REQ Column:

5125 R – The Personnel White Pages Directory shall contain valid values for these attributes. These values are critical to Healthcare workflow.

R2 – The Personnel White Pages Directory shall contain valid values for these attributes if the value is available. These attributes are sufficiently useful that the provider should utilize it in the defined way. Personnel White Pages Consumers should expect that the information in these 5130 attributes are valid, but shall be robust to empty values.

O – The Personnel White Paged Directory may contain values for these optional attributes. The IHE has identified sufficiently useful purpose or defined an interoperable way to use the value. The IHE may profile these values in future profiles.

D – Although these attributes are defined in inetOrgPerson/Person, their use is discouraged. This 5135 is typically due to the attribute being obsolete, poorly implemented, or not available for query.

Table 3.24.5-1: Attributes found in Person (OrganizationalPerson and ResidentialPerson)

Attribute Name	Source	• Definition • Standard defined Optionality • Description	IHE REQ	IHE Comment
aliasedObjectName	RFC2256	• Alias Object Name • Optional • The aliasedObjectName attribute is used by the directory service if the entry containing this attribute is an alias.	O	
audio	RFC2798	• Audio • Optional • Not well defined	D	The audio format defined is obsolete.
businessCategory	RFC2798	• Business Category • Optional • describes the kind of business performed by an organization	D	Not well defined
carLicense	RFC2798	• Vehicle license or registration plate • Optional • Used to record the values of the license or registration plate associated with an individual • (e.g., 6ABC246)	O	
cn	RFC2256	• Common Name • Required • This is the X.500 commonName attribute, which contains a name of an object. If the user is a person, it is typically the person's full name. • (e.g., Barbara Jensen)	R	See Section 3.24.5.2.3.1 Use of language tag and HL7 Name Data Type
departmentNumber	RFC2798	• Department Number • Optional • Identifies a department within an organization. This can be numeric or alphanumeric • (e.g., Radiology)	O	
description	RFC2798	• Description • Optional • This attribute contains a human-readable description of the object.	D	
destinationIndicator	RFC2256	• Destination Indicator • Optional • This attribute is used for the telegram service	D	Originally defined as part of telegram addressing.

Attribute Name	Source	• Definition • Standard defined Optionality • Description	IHE REQ	IHE Comment
displayName	RFC2798	• Display Name • Optional • Singular • When displaying a person's name, especially within a one-line summary list, it is useful to be able to identify a name to be used. Since other attribute types such as 'cn' are multivalued, an additional attribute type is needed. Display name is defined for this purpose. • (e.g., Babs Jensen)	R	
employeeNumber	RFC2798	• Employee Number • Optional • Singular • Numeric or alphanumeric identifier assigned to a person, typically based on order of hire or association with an organization. • (e.g., 42)	O	
employeeType	RFC2798	• Employee Type • Optional • Used to identify the employer to employee relationship. Typical values used will be "Contractor", "Employee", "Intern", "Temp", "External", and "Unknown" but any value may be used. • (e.g., External)	O	
facsimileTelephoneNumber	RFC2256	• FAX Number • Optional • A value of this attribute is a telephone number for a facsimile terminal (and, optionally, its parameters). • (e.g., +1 408 555 1992)	R2	See Section 3.24.5.2.3.3 Phone Numbers
givenName	RFC2798	• Name • Optional • The givenName attribute is used to hold the part of a person's name which is not their surname nor middle name. • (e.g., Barbara)	R2	
homePhone	RFC2798	• Home Phone • Optional • (e.g., +1 408 555 1862)	O	

Attribute Name	Source	• Definition • Standard defined Optionality • Description	IHE REQ	IHE Comment
homePostalAddress	RFC2798	• Home Postal Address • Optional • This attribute contains a home address used by a Postal Service to perform services for the object.	O	
initials	RFC2798	• Initials • Optional • The initials attribute contains the initials of some or all of an individual's names, but not the surname(s). • (e.g., BJJ)	R2	
internationaliSDNNumber	RFC2798	• International ISDN Number • Optional	D	
jpegPhoto	RFC2798	• JPEG Photograph • Optional • Used to store one or more images of a person using the JPEG File Interchange Format	O	
l	RFC2256	• Locality Name • Optional • This is the X.500 localityName attribute, which contains the name of a locality, such as a city, county or other geographic region.	O	
labeledURI	RFC2798	• URI • Optional • (e.g., http://www.ihe.net IHE Home)	O	
mail	RFC2798	• E-Mail Address • Optional • User's e-mail address in RFC822 compliant form • (e.g., bjensen@siroe.com)	R2	
manager	RFC2798	• Manager • Optional • Distinguished Name of the Manager	O	In Healthcare the manager of an individual is not clear. The manager attribute does not include enough information to determine the type of manager indicated.

Attribute Name	Source	• Definition • Standard defined Optionality • Description	IHE REQ	IHE Comment
mobile	RFC2798	• Mobile/cellular phone number • Optional • A value of this attribute is a telephone number complying with ITU Recommendation E.123. • (e.g., +1 408 555 1941)	R2	This attribute should contain only business use mobile phone numbers. See Section 3.24.5.2.3.3 Phone Numbers
o	RFC2256	• Organization • Optional • Highest-level organization name, e.g., a company name, to which ou attribute entries belong. • (e.g., Saint-ihe-hospital.local)	R2	
objectClass	RFC2256	• Object Class • Required • The values of the objectClass attribute describe the kind of object which an entry represents. The objectClass attribute is present in every entry, with at least two values. One of the values is either "top" or "alias". • (e.g., top, person, organizationalPerson, inetOrgPerson)	R	
ou	RFC2256	• Organizational Unit Name • Optional • This is the X.500 organizationalUnitName attribute, which contains the name of an organizational unit. • (e.g., Radiologists)	R2	
pager	RFC2798	• Pager phone number • Optional • A value of this attribute is a telephone number complying with ITU Recommendation E.123.	R2	This attribute should contain only business use mobile phone numbers. See Section 3.24.5.2.3.3 Phone Numbers
photo	RFC2798	• Photo • Optional • Photo attribute values are encoded in G3 fax format with an ASN.1 wrapper.	D	The format is too cumbersome. See jpegPhoto.
physicalDeliveryOfficeName	RFC2256	• Post Office Name • Optional • This attribute contains the name that a Postal Service uses to identify a post office.	R2	

Attribute Name	Source	• **Definition** • **Standard defined Optionality** • **Description**	IHE REQ	IHE Comment
postalAddress	RFC2256	• Postal Address • Optional • This attribute contains an address used by a Postal Service to perform services for the object.	R2	
postalCode	RFC2256	• Postal Code • Optional • This attribute contains a code used by a Postal Service to identify a postal service zone, such as a US ZIP code	R2	
postOfficeBox	RFC2256	• Post Office Box • Optional • This attribute contains the number that a Postal Service uses when a customer arranges to receive mail at a box on premises of the Postal Service.	R2	
preferredDeliveryMethod	RFC2798	• Delivery Method • Optional • Singular • Coded value (delivery-value) • (e.g., any, physical, telephone)	O	
preferredLanguage	RFC2798	• Preferred Language • Optional • Singular • Preferred written or spoken language for a person. Values for this attribute type MUST conform to the definition of the Accept-Language header field defined in [RFC2068] with one exception: the sequence "Accept-Language" ":" should be omitted. • The following example indicates that this person prefers French, prefers British English 80%, and general English 70%. (e.g., fr, en-gb;q=0.8, en;q=0.7)	R2	
registeredAddress	RFC2256	• Registered Address • Optional • A postal address suitable for reception of expedited documents, where it is necessary to have the recipient accept delivery.	O	
roomNumber	RFC2798	• Room Number • Optional	O	
secretary	RFC2798	• Secretary • Optional • Distinguished name of the secretary	O	

Attribute Name	Source	• Definition • Standard defined Optionality • Description	IHE REQ	IHE Comment
seeAlso	RFC2798	• See Also references • Optional • Distinguished name of other interesting Objects	D	
sn	RFC2256	• Surname • Required • This is the X.500 surname attribute, which contains the family name of a person • (e.g., Jensen)	R	
st	RFC2256	• State or Province • Optional • This is the X.500 stateOrProvinceName attribute, which contains the full name of a state or province	R2	
street	RFC2256	• Street Address • Optional • This is the X.500 streetAddress attribute, which contains the physical address of the object to which the entry corresponds, such as an address for package delivery.	R2	
telephoneNumber	RFC2256	• Telephone number • Optional • A value of this attribute is a telephone number complying with ITU Recommendation E.123.	R2	See Section 3.24.5.2.3.3 Phone Numbers
teletexTerminalIdentifier	RFC2798	• Teletex Terminal Identifier • Optional	D	
telexNumber	RFC2798	• Telex Number • Optional	D	
title	RFC2256	• Title • Optional • This attribute contains the title, such as "Vice President", of a person in their organizational context. The "personalTitle" attribute would be used for a person's title independent of their job function. • (e.g., manager, product development)	R2	
uid	RFC2798	• User ID • Optional • The user ID use for system login. • (e.g., bjensen)	O	See Section 3.24.5.2.3.2 Use of uid

Attribute Name	Source	• Definition • Standard defined Optionality • Description	IHE REQ	IHE Comment
userCertificate	RFC2798	• User Identity Certificate • Optional • This attribute is to be stored and requested in the binary form, as 'userCertificate;binary'.	D	The PKCS12 format includes the private key and shall not be publicly available.
userPassword	RFC2256	• User password • Optional • Passwords are stored using an Octet String syntax and are not encrypted. Transfer of cleartext passwords are strongly discouraged where the underlying transport service cannot guarantee confidentiality and may result in disclosure of the password to unauthorized parties.	D	Generally Not Accessible
userPKCS12	RFC2798	• User PKCS #12 • Optional • PKCS #12 [PKCS12] provides a format for exchange of personal identity information. When such information is stored in a directory service, the userPKCS12 attribute should be used. This attribute is to be stored and requested in binary form, as 'userPKCS12;binary'. The attribute values are PFX PDUs stored as binary data.	D	The PKCS12 format includes the private key and shall not be publicly available.
userSMIMECertificate	RFC2798	• User S/MIME Certificate • Optional • A PKCS#7 [RFC2315] SignedData, where the content that is signed is ignored by consumers of userSMIMECertificate values. It is recommended that values have a `contentType' of data with an absent `content' field. Values of this attribute contain a person's entire certificate chain and an smimeCapabilities field [RFC2633] that at a minimum describes their SMIME algorithm capabilities. Values for this attribute are to be stored and requested in binary form, as 'userSMIMECertificate;binary'. If available, this attribute is preferred over the userCertificate attribute for S/MIME applications.	O	
x121Address	RFC2256	• Address for X.121 • Optional	D	

Attribute Name	Source	• Definition • Standard defined Optionality • Description	IHE REQ	IHE Comment
x500uniqueIdentifier	RFC2798	• Unique identifier • Optional • The x500UniqueIdentifier attribute is used to distinguish between objects when a distinguished name has been reused. This is a different attribute type from both the "uid" and "uniqueIdentifier" types.	O	

3.24.5.2.3.1 Use of language tag and HL7 Name Data Type (XCN)

Many people have different variations of their name to be used depending on the context and language. This is easily supported in LDAP through the use of the language tag as documented in RFC1766. This language tag can be applied to any attribute but is most useful on names.

HL7 has a well-defined format for encoding names (HL7 XCN). LDAP 'name' attributes marked with a language tag of "lang-x-ihe" shall be encoded using the HL7 XCN Data Type. UTF-8 shall be used for any characters outside ASCII.

Example use of the language tag:

```
objectclass: Top
objectclass: person
objectclass: organizationalPerson
objectclass: inetOrgPerson
dn: cn=Wang XiaoDong, ou=Radiologists, o=Saint-ihe-hospital.local
cn: Wang XiaoDong
cn: XiaoDong, Wang, Florida Department of Health:123456789
cn;lang-cn: 王 小東
cn;lang-x-ihe: ^Wang^XiaoDong^^^^^^^^^^^A~^王^小東^^^^^^^^^^^I
sn: Wang
givenname: XiaoDong
givenname;lang-cn: 小東
sn;lang-cn: 王
ou: People
uid: XiaoDong
title: Sample HL7 person
mail: Wang.XiaoDong@foo.bar.com
telephonenumber: 555-555-5678
```

3.24.5.2.3.2 Use of uid

The uid attribute is a multi-valued attribute that is intended to be used for User ID. It is likely that one of the values for uid will be the enterprise User ID. Enterprises that implement the PWP Profile shall implement the following values for the uid attribute:

1. If an enterprise has implemented both IHE ITI EUA and PWP Profiles, one of the uid attributes shall contain the IHE ITI EUA user identity in <user>@<realm> format.

5170   2. If an enterprise has implemented a UPIN, one of the uid attributes shall contain the UPIN value in the format <UPIN>@UPIN. Where a UPIN is the Universal Physician Identification Number as assigned by the assigning authority in which the facility operates (e.g., CMS in the USA).

3.24.5.2.3.3 Phone Numbers

5175 Phone numbers shall be represented in the PWP Directory using E.123 notation. E.123 is a notation for national and international telephone numbers. Recommendation E.123 defines a standard way to write telephone numbers, e-mail addresses, and web addresses. It recommends the following formats (when dialing the area code is optional for local calling):

Telephone number:

5180   National notation   (042) 123 4567

    International notation +31 42 123 4567

E.123 also recommends that a hypen (-), space ( ), or period (.) be used to visually separate groups of numbers. The parentheses are used to indicate digits that are sometimes not dialed. A slash (/) is used to indicate alternate numbers. This information is important if you want to make 5185 sure people know how to dial a phone number in a specific country.

The use of National notation and International notation will be a local PWP Directory policy. PWP Consumers shall expect to receive both notations.

3.24.5.2.4 Expected Actions

The Personnel White Pages Directory shall provide the appropriate response to the indicated 5190 query given LDAP query rules, local access control policy, and the current information it the directory.

Note: Any attribute is valid to query on, the results of the query may be quick or may take a long time to complete. Each Personnel White Pages Directory will be optimized differently based on architecture and configuration. We expect that the following attributes will be query keys more 5195 often than others (cn, displayname, objectclass, sn, uid, givenName, initials, mail, o, ou, and employeeNumber).

Directory shall support Anonymous, Simple, and SSL-Simple Authentications.

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