

## MSH[1]

| Location  | Data Element                       | Data                | Categorization |
|-----------|------------------------------------|---------------------|----------------|
| MSH-1     | Field Separator                    |                     |                |
| MSH-2     | Encoding Characters                | ^~&                 |                |
| MSH-3     | Sending Application                |                     |                |
| MSH-3.1   | Namespace ID                       | MYIIS               |                |
| MSH-3.2   | Universal ID                       |                     |                |
| MSH-3.3   | Universal ID Type                  |                     |                |
| MSH-4     | Sending Facility                   |                     |                |
| MSH-4.1   | Namespace ID                       | MyStateIIS          |                |
| MSH-4.2   | Universal ID                       |                     |                |
| MSH-4.3   | Universal ID Type                  |                     |                |
| MSH-5     | Receiving Application              |                     |                |
| MSH-5.1   | Namespace ID                       | MYEHR               |                |
| MSH-5.2   | Universal ID                       |                     |                |
| MSH-5.3   | Universal ID Type                  |                     |                |
| MSH-6     | Receiving Facility                 |                     |                |
| MSH-6.1   | Namespace ID                       | Myclinic            |                |
| MSH-6.2   | Universal ID                       |                     |                |
| MSH-6.3   | Universal ID Type                  |                     |                |
| MSH-7     | Date/Time Of Message               |                     |                |
| MSH-7.1   | Time                               | 20211031020020-0500 |                |
| MSH-9     | Message Type                       |                     |                |
| MSH-9.1   | Message Code                       | RSP                 |                |
| MSH-9.2   | Trigger Event                      | K11                 |                |
| MSH-9.3   | Message Structure                  | RSP_K11             |                |
| MSH-10    | Message Control ID                 | 7731029             |                |
| MSH-11    | Processing ID                      |                     |                |
| MSH-11.1  | Processing ID                      | P                   |                |
| MSH-12    | Version ID                         |                     |                |
| MSH-12.1  | Version ID                         | 2.5.1               |                |
| MSH-15    | Accept Acknowledgment Type         | NE                  |                |
| MSH-16    | Application Acknowledgment Type    | NE                  |                |
| MSH-21    | Message Profile Identifier         |                     |                |
| MSH-21.1  | Entity Identifier                  | Z42                 |                |
| MSH-21.2  | Namespace ID                       | CDCPHINVS           |                |
| MSH-21.3  | Universal ID                       |                     |                |
| MSH-21.4  | Universal ID Type                  |                     |                |
| MSH-22    | Sending Responsible Organization   |                     |                |
| MSH-22.1  | Organization Name                  | A_Clinic            |                |
| MSH-22.6  | Assigning Authority                |                     |                |
| MSH-22.7  | Identifier Type Code               | AN                  |                |
| MSH-22.10 | Organization Identifier            | A_Clinic1234        |                |
| MSH-23    | Receiving Responsible Organization |                     |                |
| MSH-23.1  | Organization Name                  |                     |                |
| MSH-23.6  | Assigning Authority                |                     |                |
| MSH-23.7  | Identifier Type Code               |                     |                |
| MSH-23.10 | Organization Identifier            |                     |                |

## MSA[1]

| Location | Data Element | Data | Categorization |
|----------|--------------|------|----------------|
|----------|--------------|------|----------------|

|       |                     |        |  |
|-------|---------------------|--------|--|
| MSA-1 | Acknowledgment Code | AA     |  |
| MSA-2 | Message Control ID  | 793543 |  |

**QAK[1]**

| Location | Data Element          | Data                                   | Categorization |
|----------|-----------------------|--|----------------|
| QAK-1    | Query Tag             | 37374859                               |                |
| QAK-2    | Query Response Status | OK                                     |                |
| QAK-3    | Message Query Name    |  |                |
| QAK-3.1  | Identifier            | Z44                                    |                |
| QAK-3.2  | Text                  | Request Evaluated History and Forecast |                |
| QAK-3.3  | Name of Coding System | CDCPHINVS                              |                |

**QPD[1]**

| Location  | Data Element                                       | Data                                   | Categorization |
|-----------|--|--|----------------|
| QPD-1     | Message Query Name                                 |  |                |
| QPD-1.1   | Identifier   | Z44                                    |                |
| QPD-1.2   | Text   | Request Evaluated History and Forecast |                |
| QPD-1.3   | Name of Coding System                              | CDCPHINVS                              |                |
| QPD-2     | Query Tag  | 37374859                               |                |
| QPD-3     | PatientList  |  |                |
| QPD-3.1   | ID Number  |  |                |
| QPD-3.4   | Assigning Authority                                |  |                |
| QPD-3.5   | Identifier Type Code                               |  |                |
| QPD-4     | PatientName  |  |                |
| QPD-4.1   | Family Name  |  |                |
| QPD-4.1.1 | Surname  | Marina                                 |                |
| QPD-4.2   | Given Name   | Anita                                  |                |
| QPD-4.3   | Second and Further Given Names or Initials Thereof | Francesca                              |                |
| QPD-4.7   | Name Type Code                                     | L                                      |                |
| QPD-5     | PatientMotherMaidenName                            |  |                |
| QPD-5.1   | Family Name  |  |                |
| QPD-5.1.1 | Surname  | Ramirez                                |                |
| QPD-5.7   | Name Type Code                                     | L                                      |                |
| QPD-6     | PatientDateOfBirth                                 |  |                |
| QPD-6.1   | Time   | 19860601                               |                |
| QPD-7     | Patient Sex  | F                                      |                |
| QPD-8     | Patient Address                                    |  |                |
| QPD-8.1   | Street Address                                     |  |                |
| QPD-8.1.1 | Street or Mailing Address                          | 4623 Standish Way                      |                |
| QPD-8.2   | Other Designation                                  |  |                |
| QPD-8.3   | City   | Stamford                               |                |
| QPD-8.4   | State or Province                                  | CT                                     |                |
| QPD-8.5   | Zip or Postal Code                                 | 06903                                  |                |
| QPD-8.6   | Country  | USA                                    |                |
| QPD-8.7   | Address Type                                       | L                                      |                |
| QPD-9     | Phone  |  |                |
| QPD-9.2   | Telecommunication Use Code                         | PRN                                    |                |
| QPD-9.3   | Telecommunication Equipment Type                   | CP                                     |                |
| QPD-9.4   | Email Address                                      |  |                |
| QPD-9.6   | Area/City Code                                     | 203                                    |                |

|         |                          |         |  |
|---------|--------------------------|---------|--|
| QPD-9.7 | Local Number             | 5551213 |  |
| QPD-10  | Multiple birth indicator |         |  |
| QPD-11  | Birth order              |         |  |

**PID[1]**

| Location   | Data Element                                       | Data              | Categorization |
|------------|--|-------------------|----------------|
| PID-1      | Set ID - PID                                       | 1                 |                |
| PID-3[1]   | Patient Identifier List                            |                   |                |
| PID-3[1].1 | ID Number  | 123456            |                |
| PID-3[1].4 | Assigning Authority                                |                   |                |
| PID-3[1].5 | Identifier Type Code                               | MR                |                |
| PID-3[2]   | Patient Identifier List                            |                   |                |
| PID-3[2].1 | ID Number  | 987633            |                |
| PID-3[2].4 | Assigning Authority                                |                   |                |
| PID-3[2].5 | Identifier Type Code                               | SR                |                |
| PID-5      | Patient Name                                       |                   |                |
| PID-5.1    | Family Name  |                   |                |
| PID-5.1.1  | Surname  | Marina            |                |
| PID-5.2    | Given Name   | Anita             |                |
| PID-5.3    | Second and Further Given Names or Initials Thereof | Francesca         |                |
| PID-5.7    | Name Type Code                                     | L                 |                |
| PID-7      | Date/Time of Birth                                 |                   |                |
| PID-7.1    | Time   | 19860601          |                |
| PID-8      | Administrative Sex                                 | F                 |                |
| PID-11     | Patient Address                                    |                   |                |
| PID-11.1   | Street Address                                     |                   |                |
| PID-11.1.1 | Street or Mailing Address                          | 4623 Standish Way |                |
| PID-11.2   | Other Designation                                  |                   |                |
| PID-11.3   | City   | Stamford          |                |
| PID-11.4   | State or Province                                  | CT                |                |
| PID-11.5   | Zip or Postal Code                                 | 06903             |                |
| PID-11.6   | Country  | USA               |                |
| PID-11.7   | Address Type                                       | L                 |                |
| PID-30     | Patient Death Indicator                            |                   |                |

**IZ\_HISTORY\_FORECAST[1].ORC[1]**

| Location | Data Element          | Data               | Categorization |
|----------|-----------------------|--------------------|----------------|
| ORC-1    | Order Control         | RE                 |                |
| ORC-2    | Placer Order Number   |                    |                |
| ORC-2.1  | Entity Identifier     |                    |                |
| ORC-2.2  | Namespace ID          |                    |                |
| ORC-2.3  | Universal ID          |                    |                |
| ORC-2.4  | Universal ID Type     |                    |                |
| ORC-3    | Filler Order Number   |                    |                |
| ORC-3.1  | Entity Identifier     | 197030             |                |
| ORC-3.2  | Namespace ID          | MPC                |                |
| ORC-3.3  | Universal ID          |                    |                |
| ORC-3.4  | Universal ID Type     |                    |                |
| ORC-17   | Entering Organization |                    |                |
| ORC-17.1 | Identifier            | MPC                |                |
| ORC-17.2 | Text                  | Metro Primary Care |                |
| ORC-17.3 | Name of Coding System | HL70362            |                |

**IZ\_HISTORY\_FORECAST[1].RXA[1]**

| Location   | Data Element                                       | Data   | Categorization |
|------------|--|--|----------------|
| RXA-1      | Give Sub-ID Counter                                | 0  |                |
| RXA-2      | Administration Sub-ID Counter                      | 1  |                |
| RXA-3      | Date/Time Start of Administration                  |  |                |
| RXA-3.1    | Time   | 20170601   |                |
| RXA-5      | Administered Code                                  |  |                |
| RXA-5.1    | Identifier   | 94   |                |
| RXA-5.2    | Text   | measles, mumps, rubella, and varicella virus vaccine |                |
| RXA-5.3    | Name of Coding System                              | CVX  |                |
| RXA-6      | Administered Amount                                | 0.5  |                |
| RXA-7      | Administered Units                                 |  |                |
| RXA-7.1    | Identifier   | mL   |                |
| RXA-7.2    | Text   |  |                |
| RXA-7.3    | Name of Coding System                              | UCUM   |                |
| RXA-9      | Administration Notes                               |  |                |
| RXA-9.1    | Identifier   | 01   |                |
| RXA-9.2    | Text   |  |                |
| RXA-9.3    | Name of Coding System                              | NIP001   |                |
| RXA-10     | Administering Provider                             |  |                |
| RXA-10.1   | ID Number  |  |                |
| RXA-10.2   | Family Name  |  |                |
| RXA-10.2.1 | Surname  | Mason  |                |
| RXA-10.3   | Given Name   | Jessica  |                |
| RXA-10.4   | Second and Further Given Names or Initials Thereof |  |                |
| RXA-10.9   | Assigning Authority                                |  |                |
| RXA-10.10  | Name Type Code                                     |  |                |
| RXA-10.13  | Identifier Type Code                               |  |                |
| RXA-11     | Administered-at Location                           |  |                |
| RXA-11.4   | Facility   |  |                |
| RXA-17     | Substance Manufacturer Name                        |  |                |
| RXA-17.1   | Identifier   | MSD  |                |
| RXA-17.2   | Text   | Merck and Co Inc                                     |                |
| RXA-17.3   | Name of Coding System                              | MVX  |                |
| RXA-18     | Substance/Treatment Refusal Reason                 |  |                |
| RXA-18.1   | Identifier   |  |                |
| RXA-18.2   | Text   |  |                |
| RXA-18.3   | Name of Coding System                              |  |                |
| RXA-20     | Completion Status                                  | CP   |                |

**IZ\_HISTORY\_FORECAST[1].RXR[1]**

| Location | Data Element          | Data          | Categorization |
|----------|-----------------------|---------------|----------------|
| RXR-1    | Route                 |               |                |
| RXR-1.1  | Identifier            | C28161        |                |
| RXR-1.2  | Text                  | Intramuscular |                |
| RXR-1.3  | Name of Coding System | NCIT          |                |
| RXR-2    | Administration Site   |               |                |
| RXR-2.1  | Identifier            | LD            |                |
| RXR-2.2  | Text                  | Left Deltoid  |                |
| RXR-2.3  | Name of Coding System | HL70163       |                |

**IZ\_HISTORY\_FORECAST[1].OBSERVATION[1].OBX[1]**

| Location | Data Element                 | Data  | Categorization |
|----------|------------------------------|---|----------------|
| OBX-1    | Set ID - OBX                 | 1   |                |
| OBX-2    | Value Type                   | CE  |                |
| OBX-3    | Observation Identifier       |   |                |
| OBX-3.1  | Identifier                   | 30956-7   |                |
| OBX-3.2  | Text                         | vaccine type  |                |
| OBX-3.3  | Name of Coding System        | LN  |                |
| OBX-4    | Observation Sub-ID           | 1   |                |
| OBX-5    | Observation Value            |   |                |
| OBX-5.1  | Identifier                   | 94  |                |
| OBX-5.2  | Text                         | measles, mumps, rubella,<br>and varicella virus vaccine |                |
| OBX-5.3  | Name of Coding System        | CVX   |                |
| OBX-6    | Units                        |   |                |
| OBX-6.1  | Identifier                   |   |                |
| OBX-6.2  | Text                         |   |                |
| OBX-6.3  | Name of Coding System        |   |                |
| OBX-11   | Observation Result Status    | F   |                |
| OBX-14   | Date/Time of the Observation |   |                |
| OBX-14.1 | Time                         |   |                |

**IZ\_HISTORY\_FORECAST[1].OBSERVATION[2].OBX[1]**

| Location | Data Element                 | Data                       | Categorization |
|----------|------------------------------|----------------------------|----------------|
| OBX-1    | Set ID - OBX                 | 2                          |                |
| OBX-2    | Value Type                   | CE                         |                |
| OBX-3    | Observation Identifier       |                            |                |
| OBX-3.1  | Identifier                   | 59779-9                    |                |
| OBX-3.2  | Text                         | Immunization Schedule used |                |
| OBX-3.3  | Name of Coding System        | LN                         |                |
| OBX-4    | Observation Sub-ID           | 1                          |                |
| OBX-5    | Observation Value            |                            |                |
| OBX-5.1  | Identifier                   | VXC16                      |                |
| OBX-5.2  | Text                         | ACIP                       |                |
| OBX-5.3  | Name of Coding System        | CDCPHINVS                  |                |
| OBX-6    | Units                        |                            |                |
| OBX-6.1  | Identifier                   |                            |                |
| OBX-6.2  | Text                         |                            |                |
| OBX-6.3  | Name of Coding System        |                            |                |
| OBX-11   | Observation Result Status    | F                          |                |
| OBX-14   | Date/Time of the Observation |                            |                |
| OBX-14.1 | Time                         | 20210901                   |                |

**IZ\_HISTORY\_FORECAST[1].OBSERVATION[3].OBX[1]**

| Location | Data Element           | Data          | Categorization |
|----------|------------------------|---------------|----------------|
| OBX-1    | Set ID - OBX           | 3             |                |
| OBX-2    | Value Type             | ID            |                |
| OBX-3    | Observation Identifier |               |                |
| OBX-3.1  | Identifier             | 59781-5       |                |
| OBX-3.2  | Text                   | Dose validity |                |
| OBX-3.3  | Name of Coding System  | LN            |                |
| OBX-4    | Observation Sub-ID     | 1             |                |
| OBX-5    | Observation Value      | Y             |                |
| OBX-6    | Units                  |               |                |

|          |                              |   |  |
|----------|------------------------------|---|--|
| OBX-6.1  | Identifier                   |   |  |
| OBX-6.2  | Text                         |   |  |
| OBX-6.3  | Name of Coding System        |   |  |
| OBX-11   | Observation Result Status    | F |  |
| OBX-14   | Date/Time of the Observation |   |  |
| OBX-14.1 | Time                         |   |  |

#### IZ\_HISTORY\_FORECAST[2].ORC[1]

| Location | Data Element          | Data               | Categorization |
|----------|-----------------------|--------------------|----------------|
| ORC-1    | Order Control         | RE                 |                |
| ORC-2    | Placer Order Number   |                    |                |
| ORC-2.1  | Entity Identifier     |                    |                |
| ORC-2.2  | Namespace ID          |                    |                |
| ORC-2.3  | Universal ID          |                    |                |
| ORC-2.4  | Universal ID Type     |                    |                |
| ORC-3    | Filler Order Number   |                    |                |
| ORC-3.1  | Entity Identifier     | 197030             |                |
| ORC-3.2  | Namespace ID          | MPC                |                |
| ORC-3.3  | Universal ID          |                    |                |
| ORC-3.4  | Universal ID Type     |                    |                |
| ORC-17   | Entering Organization |                    |                |
| ORC-17.1 | Identifier            | MPC                |                |
| ORC-17.2 | Text                  | Metro Primary Care |                |
| ORC-17.3 | Name of Coding System | HL70362            |                |

#### IZ\_HISTORY\_FORECAST[2].RXA[1]

| Location   | Data Element                      | Data   | Categorization |
|------------|-----------------------------------|--|----------------|
| RXA-1      | Give Sub-ID Counter               | 0  |                |
| RXA-2      | Administration Sub-ID Counter     | 1  |                |
| RXA-3      | Date/Time Start of Administration |  |                |
| RXA-3.1    | Time                              | 20170601   |                |
| RXA-5      | Administered Code                 |  |                |
| RXA-5.1    | Identifier                        | 115  |                |
| RXA-5.2    | Text                              | tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine, adsorbed |                |
| RXA-5.3    | Name of Coding System             | CVX  |                |
| RXA-6      | Administered Amount               | 0.5  |                |
| RXA-7      | Administered Units                |  |                |
| RXA-7.1    | Identifier                        | mL   |                |
| RXA-7.2    | Text                              |  |                |
| RXA-7.3    | Name of Coding System             | UCUM   |                |
| RXA-9      | Administration Notes              |  |                |
| RXA-9.1    | Identifier                        | 00   |                |
| RXA-9.2    | Text                              |  |                |
| RXA-9.3    | Name of Coding System             | NIP001   |                |
| RXA-10     | Administering Provider            |  |                |
| RXA-10.1   | ID Number                         |  |                |
| RXA-10.2   | Family Name                       |  |                |
| RXA-10.2.1 | Surname                           | Mason  |                |
| RXA-10.3   | Given Name                        | Jessica  |                |

|           |  |                |  |
|-----------|--|----------------|--|
| RXA-10.4  | Second and Further Given Names or Initials Thereof |                |  |
| RXA-10.9  | Assigning Authority                                |                |  |
| RXA-10.10 | Name Type Code                                     |                |  |
| RXA-10.13 | Identifier Type Code                               |                |  |
| RXA-11    | Administered-at Location                           |                |  |
| RXA-11.4  | Facility   |                |  |
| RXA-17    | Substance Manufacturer Name                        |                |  |
| RXA-17.1  | Identifier   | PMC            |  |
| RXA-17.2  | Text   | Sanofi Pasteur |  |
| RXA-17.3  | Name of Coding System                              | MVX            |  |
| RXA-18    | Substance/Treatment Refusal Reason                 |                |  |
| RXA-18.1  | Identifier   |                |  |
| RXA-18.2  | Text   |                |  |
| RXA-18.3  | Name of Coding System                              |                |  |
| RXA-20    | Completion Status                                  | CP             |  |

#### IZ\_HISTORY\_FORECAST[2].RXR[1]

| Location | Data Element          | Data          | Categorization |
|----------|-----------------------|---------------|----------------|
| RXR-1    | Route                 |               |                |
| RXR-1.1  | Identifier            | C28161        |                |
| RXR-1.2  | Text                  | Intramuscular |                |
| RXR-1.3  | Name of Coding System | NCIT          |                |
| RXR-2    | Administration Site   |               |                |
| RXR-2.1  | Identifier            | LD            |                |
| RXR-2.2  | Text                  | Left Deltoid  |                |
| RXR-2.3  | Name of Coding System | HL70163       |                |

#### IZ\_HISTORY\_FORECAST[2].OBSERVATION[1].OBX[1]

| Location | Data Element                 | Data   | Categorization |
|----------|------------------------------|--|----------------|
| OBX-1    | Set ID - OBX                 | 1  |                |
| OBX-2    | Value Type                   | CE   |                |
| OBX-3    | Observation Identifier       |  |                |
| OBX-3.1  | Identifier                   | 30956-7  |                |
| OBX-3.2  | Text                         | vaccine type   |                |
| OBX-3.3  | Name of Coding System        | LN   |                |
| OBX-4    | Observation Sub-ID           | 1  |                |
| OBX-5    | Observation Value            |  |                |
| OBX-5.1  | Identifier                   | 94   |                |
| OBX-5.2  | Text                         | tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine, adsorbed |                |
| OBX-5.3  | Name of Coding System        | CVX  |                |
| OBX-6    | Units                        |  |                |
| OBX-6.1  | Identifier                   |  |                |
| OBX-6.2  | Text                         |  |                |
| OBX-6.3  | Name of Coding System        |  |                |
| OBX-11   | Observation Result Status    | F  |                |
| OBX-14   | Date/Time of the Observation |  |                |
| OBX-14.1 | Time                         |  |                |

#### IZ\_HISTORY\_FORECAST[2].OBSERVATION[2].OBX[1]

| Location | Data Element                 | Data                       | Categorization |
|----------|------------------------------|----------------------------|----------------|
| OBX-1    | Set ID - OBX                 | 2                          |                |
| OBX-2    | Value Type                   | CE                         |                |
| OBX-3    | Observation Identifier       |                            |                |
| OBX-3.1  | Identifier                   | 59779-9                    |                |
| OBX-3.2  | Text                         | Immunization Schedule used |                |
| OBX-3.3  | Name of Coding System        | LN                         |                |
| OBX-4    | Observation Sub-ID           | 1                          |                |
| OBX-5    | Observation Value            |                            |                |
| OBX-5.1  | Identifier                   | VXC16                      |                |
| OBX-5.2  | Text                         | ACIP                       |                |
| OBX-5.3  | Name of Coding System        | CDCPHINVS                  |                |
| OBX-6    | Units                        |                            |                |
| OBX-6.1  | Identifier                   |                            |                |
| OBX-6.2  | Text                         |                            |                |
| OBX-6.3  | Name of Coding System        |                            |                |
| OBX-11   | Observation Result Status    | F                          |                |
| OBX-14   | Date/Time of the Observation |                            |                |
| OBX-14.1 | Time                         | 20210901                   |                |

**IZ\_HISTORY\_FORECAST[2].OBSERVATION[3].OBX[1]**

| Location | Data Element                 | Data          | Categorization |
|----------|------------------------------|---------------|----------------|
| OBX-1    | Set ID - OBX                 | 3             |                |
| OBX-2    | Value Type                   | ID            |                |
| OBX-3    | Observation Identifier       |               |                |
| OBX-3.1  | Identifier                   | 59781-5       |                |
| OBX-3.2  | Text                         | Dose validity |                |
| OBX-3.3  | Name of Coding System        | LN            |                |
| OBX-4    | Observation Sub-ID           | 1             |                |
| OBX-5    | Observation Value            | Y             |                |
| OBX-6    | Units                        |               |                |
| OBX-6.1  | Identifier                   |               |                |
| OBX-6.2  | Text                         |               |                |
| OBX-6.3  | Name of Coding System        |               |                |
| OBX-11   | Observation Result Status    | F             |                |
| OBX-14   | Date/Time of the Observation |               |                |
| OBX-14.1 | Time                         |               |                |

**IZ\_HISTORY\_FORECAST[3].ORC[1]**

| Location | Data Element          | Data   | Categorization |
|----------|-----------------------|--------|----------------|
| ORC-1    | Order Control         | RE     |                |
| ORC-2    | Placer Order Number   |        |                |
| ORC-2.1  | Entity Identifier     |        |                |
| ORC-2.2  | Namespace ID          |        |                |
| ORC-2.3  | Universal ID          |        |                |
| ORC-2.4  | Universal ID Type     |        |                |
| ORC-3    | Filler Order Number   |        |                |
| ORC-3.1  | Entity Identifier     | 197030 |                |
| ORC-3.2  | Namespace ID          | MPC    |                |
| ORC-3.3  | Universal ID          |        |                |
| ORC-3.4  | Universal ID Type     |        |                |
| ORC-17   | Entering Organization |        |                |
| ORC-17.1 | Identifier            | MPC    |                |



|          |                       |                    |  |
|----------|-----------------------|--------------------|--|
| ORC-17.2 | Text                  | Metro Primary Care |  |
| ORC-17.3 | Name of Coding System | HL70362            |  |

**IZ\_HISTORY\_FORECAST[3].RXA[1]**

| Location   | Data Element                                       | Data  | Categorization |
|------------|--|---|----------------|
| RXA-1      | Give Sub-ID Counter                                | 0   |                |
| RXA-2      | Administration Sub-ID Counter                      | 1   |                |
| RXA-3      | Date/Time Start of Administration                  |   |                |
| RXA-3.1    | Time   | 20200901  |                |
| RXA-5      | Administered Code                                  |   |                |
| RXA-5.1    | Identifier   | 185   |                |
| RXA-5.2    | Text   | influenza, recombinant, quadrivalent, injectable, preservative free |                |
| RXA-5.3    | Name of Coding System                              | CVX   |                |
| RXA-6      | Administered Amount                                | 0.5   |                |
| RXA-7      | Administered Units                                 |   |                |
| RXA-7.1    | Identifier   | mL  |                |
| RXA-7.2    | Text   |   |                |
| RXA-7.3    | Name of Coding System                              | UCUM  |                |
| RXA-9      | Administration Notes                               |   |                |
| RXA-9.1    | Identifier   | 00  |                |
| RXA-9.2    | Text   |   |                |
| RXA-9.3    | Name of Coding System                              | NIP001  |                |
| RXA-10     | Administering Provider                             |   |                |
| RXA-10.1   | ID Number  |   |                |
| RXA-10.2   | Family Name  |   |                |
| RXA-10.2.1 | Surname  | Mason   |                |
| RXA-10.3   | Given Name   | Jessica   |                |
| RXA-10.4   | Second and Further Given Names or Initials Thereof |   |                |
| RXA-10.9   | Assigning Authority                                |   |                |
| RXA-10.10  | Name Type Code                                     |   |                |
| RXA-10.13  | Identifier Type Code                               |   |                |
| RXA-11     | Administered-at Location                           |   |                |
| RXA-11.4   | Facility   |   |                |
| RXA-17     | Substance Manufacturer Name                        |   |                |
| RXA-17.1   | Identifier   | PMC   |                |
| RXA-17.2   | Text   | Sanofi Pasteur  |                |
| RXA-17.3   | Name of Coding System                              | MVX   |                |
| RXA-18     | Substance/Treatment Refusal Reason                 |   |                |
| RXA-18.1   | Identifier   |   |                |
| RXA-18.2   | Text   |   |                |
| RXA-18.3   | Name of Coding System                              |   |                |
| RXA-20     | Completion Status                                  | CP  |                |

**IZ\_HISTORY\_FORECAST[3].RXR[1]**

| Location | Data Element          | Data          | Categorization |
|----------|-----------------------|---------------|----------------|
| RXR-1    | Route                 |               |                |
| RXR-1.1  | Identifier            | C28161        |                |
| RXR-1.2  | Text                  | Intramuscular |                |
| RXR-1.3  | Name of Coding System | NCIT          |                |
| RXR-2    | Administration Site   |               |                |

|         |                       |              |  |
|---------|-----------------------|--------------|--|
| RXR-2.1 | Identifier            | LD           |  |
| RXR-2.2 | Text                  | Left Deltoid |  |
| RXR-2.3 | Name of Coding System | HL70163      |  |

**IZ\_HISTORY\_FORECAST[3].OBSERVATION[1].OBX[1]**

| Location | Data Element                 | Data   | Categorization |
|----------|------------------------------|--|----------------|
| OBX-1    | Set ID - OBX                 | 1  |                |
| OBX-2    | Value Type                   | CE   |                |
| OBX-3    | Observation Identifier       |  |                |
| OBX-3.1  | Identifier                   | 30956-7  |                |
| OBX-3.2  | Text                         | vaccine type   |                |
| OBX-3.3  | Name of Coding System        | LN   |                |
| OBX-4    | Observation Sub-ID           | 1  |                |
| OBX-5    | Observation Value            |  |                |
| OBX-5.1  | Identifier                   | 185  |                |
| OBX-5.2  | Text                         | influenza, recombinant,<br>quadrivalent,injectable,<br>preservative free |                |
| OBX-5.3  | Name of Coding System        | CVX  |                |
| OBX-6    | Units                        |  |                |
| OBX-6.1  | Identifier                   |  |                |
| OBX-6.2  | Text                         |  |                |
| OBX-6.3  | Name of Coding System        |  |                |
| OBX-11   | Observation Result Status    | F  |                |
| OBX-14   | Date/Time of the Observation |  |                |
| OBX-14.1 | Time                         |  |                |

**IZ\_HISTORY\_FORECAST[3].OBSERVATION[2].OBX[1]**

| Location | Data Element                 | Data                       | Categorization |
|----------|------------------------------|----------------------------|----------------|
| OBX-1    | Set ID - OBX                 | 2                          |                |
| OBX-2    | Value Type                   | CE                         |                |
| OBX-3    | Observation Identifier       |                            |                |
| OBX-3.1  | Identifier                   | 59779-9                    |                |
| OBX-3.2  | Text                         | Immunization Schedule used |                |
| OBX-3.3  | Name of Coding System        | LN                         |                |
| OBX-4    | Observation Sub-ID           | 1                          |                |
| OBX-5    | Observation Value            |                            |                |
| OBX-5.1  | Identifier                   | VXC16                      |                |
| OBX-5.2  | Text                         | ACIP                       |                |
| OBX-5.3  | Name of Coding System        | CDCPHINVS                  |                |
| OBX-6    | Units                        |                            |                |
| OBX-6.1  | Identifier                   |                            |                |
| OBX-6.2  | Text                         |                            |                |
| OBX-6.3  | Name of Coding System        |                            |                |
| OBX-11   | Observation Result Status    | F                          |                |
| OBX-14   | Date/Time of the Observation |                            |                |
| OBX-14.1 | Time                         | 20210901                   |                |

**IZ\_HISTORY\_FORECAST[3].OBSERVATION[3].OBX[1]**

| Location | Data Element           | Data | Categorization |
|----------|------------------------|------|----------------|
| OBX-1    | Set ID - OBX           | 3    |                |
| OBX-2    | Value Type             | ID   |                |
| OBX-3    | Observation Identifier |      |                |

|          |                              |               |  |
|----------|------------------------------|---------------|--|
| OBX-3.1  | Identifier                   | 59781-5       |  |
| OBX-3.2  | Text                         | Dose validity |  |
| OBX-3.3  | Name of Coding System        | LN            |  |
| OBX-4    | Observation Sub-ID           | 1             |  |
| OBX-5    | Observation Value            | Y             |  |
| OBX-6    | Units                        |               |  |
| OBX-6.1  | Identifier                   |               |  |
| OBX-6.2  | Text                         |               |  |
| OBX-6.3  | Name of Coding System        |               |  |
| OBX-11   | Observation Result Status    | F             |  |
| OBX-14   | Date/Time of the Observation |               |  |
| OBX-14.1 | Time                         |               |  |

#### IZ\_HISTORY\_FORECAST[4].ORC[1]

| Location | Data Element          | Data     | Categorization |
|----------|-----------------------|----------|----------------|
| ORC-1    | Order Control         | RE       |                |
| ORC-2    | Placer Order Number   |          |                |
| ORC-2.1  | Entity Identifier     |          |                |
| ORC-2.2  | Namespace ID          |          |                |
| ORC-2.3  | Universal ID          |          |                |
| ORC-2.4  | Universal ID Type     |          |                |
| ORC-3    | Filler Order Number   |          |                |
| ORC-3.1  | Entity Identifier     | 9999     |                |
| ORC-3.2  | Namespace ID          | OP       |                |
| ORC-3.3  | Universal ID          |          |                |
| ORC-3.4  | Universal ID Type     |          |                |
| ORC-17   | Entering Organization |          |                |
| ORC-17.1 | Identifier            | STIIS    |                |
| ORC-17.2 | Text                  | StateIIS |                |
| ORC-17.3 | Name of Coding System | HL70362  |                |

#### IZ\_HISTORY\_FORECAST[4].RXA[1]

| Location | Data Element                      | Data             | Categorization |
|----------|-----------------------------------|------------------|----------------|
| RXA-1    | Give Sub-ID Counter               | 0                |                |
| RXA-2    | Administration Sub-ID Counter     | 1                |                |
| RXA-3    | Date/Time Start of Administration |                  |                |
| RXA-3.1  | Time                              | 20211031         |                |
| RXA-5    | Administered Code                 |                  |                |
| RXA-5.1  | Identifier                        | 998              |                |
| RXA-5.2  | Text                              | no vaccine admin |                |
| RXA-5.3  | Name of Coding System             | CVX              |                |
| RXA-6    | Administered Amount               | 999              |                |
| RXA-7    | Administered Units                |                  |                |
| RXA-7.1  | Identifier                        |                  |                |
| RXA-7.2  | Text                              |                  |                |
| RXA-7.3  | Name of Coding System             |                  |                |
| RXA-9    | Administration Notes              |                  |                |
| RXA-9.1  | Identifier                        |                  |                |
| RXA-9.2  | Text                              |                  |                |
| RXA-9.3  | Name of Coding System             |                  |                |
| RXA-10   | Administering Provider            |                  |                |
| RXA-10.1 | ID Number                         |                  |                |

|            |  |    |  |
|------------|--|----|--|
| RXA-10.2   | Family Name  |    |  |
| RXA-10.2.1 | Surname  |    |  |
| RXA-10.3   | Given Name   |    |  |
| RXA-10.4   | Second and Further Given Names or Initials Thereof |    |  |
| RXA-10.9   | Assigning Authority                                |    |  |
| RXA-10.10  | Name Type Code                                     |    |  |
| RXA-10.13  | Identifier Type Code                               |    |  |
| RXA-11     | Administered-at Location                           |    |  |
| RXA-11.4   | Facility   |    |  |
| RXA-17     | Substance Manufacturer Name                        |    |  |
| RXA-17.1   | Identifier   |    |  |
| RXA-17.2   | Text   |    |  |
| RXA-17.3   | Name of Coding System                              |    |  |
| RXA-18     | Substance/Treatment Refusal Reason                 |    |  |
| RXA-18.1   | Identifier   |    |  |
| RXA-18.2   | Text   |    |  |
| RXA-18.3   | Name of Coding System                              |    |  |
| RXA-20     | Completion Status                                  | NA |  |

**IZ\_HISTORY\_FORECAST[4].OBSERVATION[1].OBX[1]**

| Location | Data Element                 | Data                               | Categorization |
|----------|------------------------------|------------------------------------|----------------|
| OBX-1    | Set ID - OBX                 | 1                                  |                |
| OBX-2    | Value Type                   | CE                                 |                |
| OBX-3    | Observation Identifier       |                                    |                |
| OBX-3.1  | Identifier                   | 30956-7                            |                |
| OBX-3.2  | Text                         | vaccine type                       |                |
| OBX-3.3  | Name of Coding System        | LN                                 |                |
| OBX-4    | Observation Sub-ID           | 1                                  |                |
| OBX-5    | Observation Value            |                                    |                |
| OBX-5.1  | Identifier                   | 88                                 |                |
| OBX-5.2  | Text                         | influenza, unspecified formulation |                |
| OBX-5.3  | Name of Coding System        | CVX                                |                |
| OBX-6    | Units                        |                                    |                |
| OBX-6.1  | Identifier                   |                                    |                |
| OBX-6.2  | Text                         |                                    |                |
| OBX-6.3  | Name of Coding System        |                                    |                |
| OBX-11   | Observation Result Status    | F                                  |                |
| OBX-14   | Date/Time of the Observation |                                    |                |
| OBX-14.1 | Time                         |                                    |                |

**IZ\_HISTORY\_FORECAST[4].OBSERVATION[2].OBX[1]**

| Location | Data Element           | Data                       | Categorization |
|----------|------------------------|----------------------------|----------------|
| OBX-1    | Set ID - OBX           | 2                          |                |
| OBX-2    | Value Type             | CE                         |                |
| OBX-3    | Observation Identifier |                            |                |
| OBX-3.1  | Identifier             | 59779-9                    |                |
| OBX-3.2  | Text                   | Immunization Schedule used |                |
| OBX-3.3  | Name of Coding System  | LN                         |                |
| OBX-4    | Observation Sub-ID     | 1                          |                |
| OBX-5    | Observation Value      |                            |                |
| OBX-5.1  | Identifier             | VXC16                      |                |

|          |                              |           |  |
|----------|------------------------------|-----------|--|
| OBX-5.2  | Text                         | ACIP      |  |
| OBX-5.3  | Name of Coding System        | CDCPHINVS |  |
| OBX-6    | Units                        |           |  |
| OBX-6.1  | Identifier                   |           |  |
| OBX-6.2  | Text                         |           |  |
| OBX-6.3  | Name of Coding System        |           |  |
| OBX-11   | Observation Result Status    | F         |  |
| OBX-14   | Date/Time of the Observation |           |  |
| OBX-14.1 | Time                         | 20211031  |  |

**IZ\_HISTORY\_FORECAST[4].OBSERVATION[3].OBX[1]**

| Location | Data Element                 | Data                 | Categorization |
|----------|------------------------------|----------------------|----------------|
| OBX-1    | Set ID - OBX                 | 3                    |                |
| OBX-2    | Value Type                   | DT                   |                |
| OBX-3    | Observation Identifier       |                      |                |
| OBX-3.1  | Identifier                   | 30980-7              |                |
| OBX-3.2  | Text                         | Date vaccination due |                |
| OBX-3.3  | Name of Coding System        | LN                   |                |
| OBX-4    | Observation Sub-ID           | 1                    |                |
| OBX-5    | Observation Value            | 20210901             |                |
| OBX-6    | Units                        |                      |                |
| OBX-6.1  | Identifier                   |                      |                |
| OBX-6.2  | Text                         |                      |                |
| OBX-6.3  | Name of Coding System        |                      |                |
| OBX-11   | Observation Result Status    | F                    |                |
| OBX-14   | Date/Time of the Observation |                      |                |
| OBX-14.1 | Time                         |                      |                |

**IZ\_HISTORY\_FORECAST[5].ORC[1]**

| Location | Data Element          | Data     | Categorization |
|----------|-----------------------|----------|----------------|
| ORC-1    | Order Control         | RE       |                |
| ORC-2    | Placer Order Number   |          |                |
| ORC-2.1  | Entity Identifier     |          |                |
| ORC-2.2  | Namespace ID          |          |                |
| ORC-2.3  | Universal ID          |          |                |
| ORC-2.4  | Universal ID Type     |          |                |
| ORC-3    | Filler Order Number   |          |                |
| ORC-3.1  | Entity Identifier     | 9999     |                |
| ORC-3.2  | Namespace ID          | OP       |                |
| ORC-3.3  | Universal ID          |          |                |
| ORC-3.4  | Universal ID Type     |          |                |
| ORC-17   | Entering Organization |          |                |
| ORC-17.1 | Identifier            | STIIS    |                |
| ORC-17.2 | Text                  | StateIIS |                |
| ORC-17.3 | Name of Coding System | HL70362  |                |

**IZ\_HISTORY\_FORECAST[5].RXA[1]**

| Location | Data Element                      | Data | Categorization |
|----------|-----------------------------------|------|----------------|
| RXA-1    | Give Sub-ID Counter               | 0    |                |
| RXA-2    | Administration Sub-ID Counter     | 1    |                |
| RXA-3    | Date/Time Start of Administration |      |                |

|            |  |                  |  |
|------------|--|------------------|--|
| RXA-3.1    | Time   | 20211031         |  |
| RXA-5      | Administered Code                                  |                  |  |
| RXA-5.1    | Identifier   | 998              |  |
| RXA-5.2    | Text   | no vaccine admin |  |
| RXA-5.3    | Name of Coding System                              | CVX              |  |
| RXA-6      | Administered Amount                                | 999              |  |
| RXA-7      | Administered Units                                 |                  |  |
| RXA-7.1    | Identifier   |                  |  |
| RXA-7.2    | Text   |                  |  |
| RXA-7.3    | Name of Coding System                              |                  |  |
| RXA-9      | Administration Notes                               |                  |  |
| RXA-9.1    | Identifier   |                  |  |
| RXA-9.2    | Text   |                  |  |
| RXA-9.3    | Name of Coding System                              |                  |  |
| RXA-10     | Administering Provider                             |                  |  |
| RXA-10.1   | ID Number  |                  |  |
| RXA-10.2   | Family Name  |                  |  |
| RXA-10.2.1 | Surname  |                  |  |
| RXA-10.3   | Given Name   |                  |  |
| RXA-10.4   | Second and Further Given Names or Initials Thereof |                  |  |
| RXA-10.9   | Assigning Authority                                |                  |  |
| RXA-10.10  | Name Type Code                                     |                  |  |
| RXA-10.13  | Identifier Type Code                               |                  |  |
| RXA-11     | Administered-at Location                           |                  |  |
| RXA-11.4   | Facility   |                  |  |
| RXA-17     | Substance Manufacturer Name                        |                  |  |
| RXA-17.1   | Identifier   |                  |  |
| RXA-17.2   | Text   |                  |  |
| RXA-17.3   | Name of Coding System                              |                  |  |
| RXA-18     | Substance/Treatment Refusal Reason                 |                  |  |
| RXA-18.1   | Identifier   |                  |  |
| RXA-18.2   | Text   |                  |  |
| RXA-18.3   | Name of Coding System                              |                  |  |
| RXA-20     | Completion Status                                  | NA               |  |

**IZ\_HISTORY\_FORECAST[5].OBSERVATION[1].OBX[1]**

| Location | Data Element           | Data   | Categorization |
|----------|------------------------|--|----------------|
| OBX-1    | Set ID - OBX           | 1  |                |
| OBX-2    | Value Type             | CE   |                |
| OBX-3    | Observation Identifier |  |                |
| OBX-3.1  | Identifier             | 30956-7  |                |
| OBX-3.2  | Text                   | vaccine type   |                |
| OBX-3.3  | Name of Coding System  | LN   |                |
| OBX-4    | Observation Sub-ID     | 1  |                |
| OBX-5    | Observation Value      |  |                |
| OBX-5.1  | Identifier             | 115  |                |
| OBX-5.2  | Text                   | tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine, adsorbed |                |
| OBX-5.3  | Name of Coding System  | CVX  |                |
| OBX-6    | Units                  |  |                |
| OBX-6.1  | Identifier             |  |                |
| OBX-6.2  | Text                   |  |                |

|          |                              |   |  |
|----------|------------------------------|---|--|
| OBX-6.3  | Name of Coding System        |   |  |
| OBX-11   | Observation Result Status    | F |  |
| OBX-14   | Date/Time of the Observation |   |  |
| OBX-14.1 | Time                         |   |  |

**IZ\_HISTORY\_FORECAST[5].OBSERVATION[2].OBX[1]**

| Location | Data Element                 | Data                       | Categorization |
|----------|------------------------------|----------------------------|----------------|
| OBX-1    | Set ID - OBX                 | 2                          |                |
| OBX-2    | Value Type                   | CE                         |                |
| OBX-3    | Observation Identifier       |                            |                |
| OBX-3.1  | Identifier                   | 59779-9                    |                |
| OBX-3.2  | Text                         | Immunization Schedule used |                |
| OBX-3.3  | Name of Coding System        | LN                         |                |
| OBX-4    | Observation Sub-ID           | 1                          |                |
| OBX-5    | Observation Value            |                            |                |
| OBX-5.1  | Identifier                   | VXC16                      |                |
| OBX-5.2  | Text                         | ACIP                       |                |
| OBX-5.3  | Name of Coding System        | CDCPHINVS                  |                |
| OBX-6    | Units                        |                            |                |
| OBX-6.1  | Identifier                   |                            |                |
| OBX-6.2  | Text                         |                            |                |
| OBX-6.3  | Name of Coding System        |                            |                |
| OBX-11   | Observation Result Status    | F                          |                |
| OBX-14   | Date/Time of the Observation |                            |                |
| OBX-14.1 | Time                         | 20210601                   |                |

**IZ\_HISTORY\_FORECAST[5].OBSERVATION[3].OBX[1]**

| Location | Data Element                 | Data                 | Categorization |
|----------|------------------------------|----------------------|----------------|
| OBX-1    | Set ID - OBX                 | 3                    |                |
| OBX-2    | Value Type                   | DT                   |                |
| OBX-3    | Observation Identifier       |                      |                |
| OBX-3.1  | Identifier                   | 30980-7              |                |
| OBX-3.2  | Text                         | Date vaccination due |                |
| OBX-3.3  | Name of Coding System        | LN                   |                |
| OBX-4    | Observation Sub-ID           | 1                    |                |
| OBX-5    | Observation Value            | 20220601             |                |
| OBX-6    | Units                        |                      |                |
| OBX-6.1  | Identifier                   |                      |                |
| OBX-6.2  | Text                         |                      |                |
| OBX-6.3  | Name of Coding System        |                      |                |
| OBX-11   | Observation Result Status    | F                    |                |
| OBX-14   | Date/Time of the Observation |                      |                |
| OBX-14.1 | Time                         |                      |                |

| Location | Data Element        | Data  | Categorization |
|----------|---------------------|-------|----------------|
| MSH-1    | Field Separator     |       |                |
| MSH-2    | Encoding Characters | ^~\&  |                |
| MSH-3    | Sending Application |       |                |
| MSH-3.1  | Namespace ID        | MYIIS |                |
| MSH-3.2  | Universal ID        |       |                |
| MSH-3.3  | Universal ID Type   |       |                |

|           |                                    |                     |  |
|-----------|------------------------------------|---------------------|--|
| MSH-4     | Sending Facility                   |                     |  |
| MSH-4.1   | Namespace ID                       | MyStateIIS          |  |
| MSH-4.2   | Universal ID                       |                     |  |
| MSH-4.3   | Universal ID Type                  |                     |  |
| MSH-5     | Receiving Application              |                     |  |
| MSH-5.1   | Namespace ID                       | MYEHR               |  |
| MSH-5.2   | Universal ID                       |                     |  |
| MSH-5.3   | Universal ID Type                  |                     |  |
| MSH-6     | Receiving Facility                 |                     |  |
| MSH-6.1   | Namespace ID                       | Myclinic            |  |
| MSH-6.2   | Universal ID                       |                     |  |
| MSH-6.3   | Universal ID Type                  |                     |  |
| MSH-7     | Date/Time Of Message               |                     |  |
| MSH-7.1   | Time                               | 20211031020020-0500 |  |
| MSH-9     | Message Type                       |                     |  |
| MSH-9.1   | Message Code                       | RSP                 |  |
| MSH-9.2   | Trigger Event                      | K11                 |  |
| MSH-9.3   | Message Structure                  | RSP_K11             |  |
| MSH-10    | Message Control ID                 | 7731029             |  |
| MSH-11    | Processing ID                      |                     |  |
| MSH-11.1  | Processing ID                      | P                   |  |
| MSH-12    | Version ID                         |                     |  |
| MSH-12.1  | Version ID                         | 2.5.1               |  |
| MSH-15    | Accept Acknowledgment Type         | NE                  |  |
| MSH-16    | Application Acknowledgment Type    | NE                  |  |
| MSH-21    | Message Profile Identifier         |                     |  |
| MSH-21.1  | Entity Identifier                  | Z42                 |  |
| MSH-21.2  | Namespace ID                       | CDCPHINVS           |  |
| MSH-21.3  | Universal ID                       |                     |  |
| MSH-21.4  | Universal ID Type                  |                     |  |
| MSH-22    | Sending Responsible Organization   |                     |  |
| MSH-22.1  | Organization Name                  | A_Clinic            |  |
| MSH-22.6  | Assigning Authority                |                     |  |
| MSH-22.7  | Identifier Type Code               | AN                  |  |
| MSH-22.10 | Organization Identifier            | A_Clinic1234        |  |
| MSH-23    | Receiving Responsible Organization |                     |  |
| MSH-23.1  | Organization Name                  |                     |  |
| MSH-23.6  | Assigning Authority                |                     |  |
| MSH-23.7  | Identifier Type Code               |                     |  |
| MSH-23.10 | Organization Identifier            |                     |  |

| Location | Data Element        | Data   | Categorization |
|----------|---------------------|--------|----------------|
| MSA-1    | Acknowledgment Code | AA     |                |
| MSA-2    | Message Control ID  | 793543 |                |

| Location | Data Element          | Data     | Categorization |
|----------|-----------------------|----------|----------------|
| QAK-1    | Query Tag             | 37374859 |                |
| QAK-2    | Query Response Status | OK       |                |
| QAK-3    | Message Query Name    |          |                |
| QAK-3.1  | Identifier            | Z44      |                |



|         |                       |  |  |
|---------|-----------------------|--|--|
| QAK-3.2 | Text                  | Request Evaluated History and Forecast |  |
| QAK-3.3 | Name of Coding System | CDCPHINVS                              |  |

| Location  | Data Element                                       | Data                                   | Categorization |
|-----------|--|--|----------------|
| QPD-1     | Message Query Name                                 |  |                |
| QPD-1.1   | Identifier   | Z44                                    |                |
| QPD-1.2   | Text   | Request Evaluated History and Forecast |                |
| QPD-1.3   | Name of Coding System                              | CDCPHINVS                              |                |
| QPD-2     | Query Tag  | 37374859                               |                |
| QPD-3     | PatientList  |  |                |
| QPD-3.1   | ID Number  |  |                |
| QPD-3.4   | Assigning Authority                                |  |                |
| QPD-3.5   | Identifier Type Code                               |  |                |
| QPD-4     | PatientName  |  |                |
| QPD-4.1   | Family Name  |  |                |
| QPD-4.1.1 | Surname  | Marina                                 |                |
| QPD-4.2   | Given Name   | Anita                                  |                |
| QPD-4.3   | Second and Further Given Names or Initials Thereof | Francesca                              |                |
| QPD-4.7   | Name Type Code                                     | L                                      |                |
| QPD-5     | PatientMotherMaidenName                            |  |                |
| QPD-5.1   | Family Name  |  |                |
| QPD-5.1.1 | Surname  | Ramirez                                |                |
| QPD-5.7   | Name Type Code                                     | L                                      |                |
| QPD-6     | PatientDateOfBirth                                 |  |                |
| QPD-6.1   | Time   | 19860601                               |                |
| QPD-7     | Patient Sex  | F                                      |                |
| QPD-8     | Patient Address                                    |  |                |
| QPD-8.1   | Street Address                                     |  |                |
| QPD-8.1.1 | Street or Mailing Address                          | 4623 Standish Way                      |                |
| QPD-8.2   | Other Designation                                  |  |                |
| QPD-8.3   | City   | Stamford                               |                |
| QPD-8.4   | State or Province                                  | CT                                     |                |
| QPD-8.5   | Zip or Postal Code                                 | 06903                                  |                |
| QPD-8.6   | Country  | USA                                    |                |
| QPD-8.7   | Address Type                                       | L                                      |                |
| QPD-9     | Phone  |  |                |
| QPD-9.2   | Telecommunication Use Code                         | PRN                                    |                |
| QPD-9.3   | Telecommunication Equipment Type                   | CP                                     |                |
| QPD-9.4   | Email Address                                      |  |                |
| QPD-9.6   | Area/City Code                                     | 203                                    |                |
| QPD-9.7   | Local Number                                       | 5551213                                |                |
| QPD-10    | Multiple birth indicator                           |  |                |
| QPD-11    | Birth order  |  |                |

| Location   | Data Element            | Data   | Categorization |
|------------|-------------------------|--------|----------------|
| PID-1      | Set ID - PID            | 1      |                |
| PID-3[1]   | Patient Identifier List |        |                |
| PID-3[1].1 | ID Number               | 123456 |                |
| PID-3[1].4 | Assigning Authority     |        |                |
| PID-3[1].5 | Identifier Type Code    | MR     |                |
| PID-3[2]   | Patient Identifier List |        |                |

|            |  |                   |  |
|------------|--|-------------------|--|
| PID-3[2].1 | ID Number  | 987633            |  |
| PID-3[2].4 | Assigning Authority                                |                   |  |
| PID-3[2].5 | Identifier Type Code                               | SR                |  |
| PID-5      | Patient Name                                       |                   |  |
| PID-5.1    | Family Name  |                   |  |
| PID-5.1.1  | Surname  | Marina            |  |
| PID-5.2    | Given Name   | Anita             |  |
| PID-5.3    | Second and Further Given Names or Initials Thereof | Francesca         |  |
| PID-5.7    | Name Type Code                                     | L                 |  |
| PID-7      | Date/Time of Birth                                 |                   |  |
| PID-7.1    | Time   | 19860601          |  |
| PID-8      | Administrative Sex                                 | F                 |  |
| PID-11     | Patient Address                                    |                   |  |
| PID-11.1   | Street Address                                     |                   |  |
| PID-11.1.1 | Street or Mailing Address                          | 4623 Standish Way |  |
| PID-11.2   | Other Designation                                  |                   |  |
| PID-11.3   | City   | Stamford          |  |
| PID-11.4   | State or Province                                  | CT                |  |
| PID-11.5   | Zip or Postal Code                                 | 06903             |  |
| PID-11.6   | Country  | USA               |  |
| PID-11.7   | Address Type                                       | L                 |  |
| PID-30     | Patient Death Indicator                            |                   |  |

#### ORC - 1

| Location | Data Element          | Data               | Categorization |
|----------|-----------------------|--------------------|----------------|
| ORC-1    | Order Control         | RE                 |                |
| ORC-2    | Placer Order Number   |                    |                |
| ORC-2.1  | Entity Identifier     |                    |                |
| ORC-2.2  | Namespace ID          |                    |                |
| ORC-2.3  | Universal ID          |                    |                |
| ORC-2.4  | Universal ID Type     |                    |                |
| ORC-3    | Filler Order Number   |                    |                |
| ORC-3.1  | Entity Identifier     | 197030             |                |
| ORC-3.2  | Namespace ID          | MPC                |                |
| ORC-3.3  | Universal ID          |                    |                |
| ORC-3.4  | Universal ID Type     |                    |                |
| ORC-17   | Entering Organization |                    |                |
| ORC-17.1 | Identifier            | MPC                |                |
| ORC-17.2 | Text                  | Metro Primary Care |                |
| ORC-17.3 | Name of Coding System | HL70362            |                |

#### ORC - 2

| Location | Data Element        | Data   | Categorization |
|----------|---------------------|--------|----------------|
| ORC-1    | Order Control       | RE     |                |
| ORC-2    | Placer Order Number |        |                |
| ORC-2.1  | Entity Identifier   |        |                |
| ORC-2.2  | Namespace ID        |        |                |
| ORC-2.3  | Universal ID        |        |                |
| ORC-2.4  | Universal ID Type   |        |                |
| ORC-3    | Filler Order Number |        |                |
| ORC-3.1  | Entity Identifier   | 197030 |                |
| ORC-3.2  | Namespace ID        | MPC    |                |
| ORC-3.3  | Universal ID        |        |                |
| ORC-3.4  | Universal ID Type   |        |                |

|          |                       |                    |  |
|----------|-----------------------|--------------------|--|
| ORC-17   | Entering Organization |                    |  |
| ORC-17.1 | Identifier            | MPC                |  |
| ORC-17.2 | Text                  | Metro Primary Care |  |
| ORC-17.3 | Name of Coding System | HL70362            |  |

#### ORC - 3

| Location | Data Element          | Data               | Categorization |
|----------|-----------------------|--------------------|----------------|
| ORC-1    | Order Control         | RE                 |                |
| ORC-2    | Placer Order Number   |                    |                |
| ORC-2.1  | Entity Identifier     |                    |                |
| ORC-2.2  | Namespace ID          |                    |                |
| ORC-2.3  | Universal ID          |                    |                |
| ORC-2.4  | Universal ID Type     |                    |                |
| ORC-3    | Filler Order Number   |                    |                |
| ORC-3.1  | Entity Identifier     | 197030             |                |
| ORC-3.2  | Namespace ID          | MPC                |                |
| ORC-3.3  | Universal ID          |                    |                |
| ORC-3.4  | Universal ID Type     |                    |                |
| ORC-17   | Entering Organization |                    |                |
| ORC-17.1 | Identifier            | MPC                |                |
| ORC-17.2 | Text                  | Metro Primary Care |                |
| ORC-17.3 | Name of Coding System | HL70362            |                |

#### ORC - 4

| Location | Data Element          | Data     | Categorization |
|----------|-----------------------|----------|----------------|
| ORC-1    | Order Control         | RE       |                |
| ORC-2    | Placer Order Number   |          |                |
| ORC-2.1  | Entity Identifier     |          |                |
| ORC-2.2  | Namespace ID          |          |                |
| ORC-2.3  | Universal ID          |          |                |
| ORC-2.4  | Universal ID Type     |          |                |
| ORC-3    | Filler Order Number   |          |                |
| ORC-3.1  | Entity Identifier     | 9999     |                |
| ORC-3.2  | Namespace ID          | OP       |                |
| ORC-3.3  | Universal ID          |          |                |
| ORC-3.4  | Universal ID Type     |          |                |
| ORC-17   | Entering Organization |          |                |
| ORC-17.1 | Identifier            | STIIS    |                |
| ORC-17.2 | Text                  | StateIIS |                |
| ORC-17.3 | Name of Coding System | HL70362  |                |

#### ORC - 5

| Location | Data Element          | Data | Categorization |
|----------|-----------------------|------|----------------|
| ORC-1    | Order Control         | RE   |                |
| ORC-2    | Placer Order Number   |      |                |
| ORC-2.1  | Entity Identifier     |      |                |
| ORC-2.2  | Namespace ID          |      |                |
| ORC-2.3  | Universal ID          |      |                |
| ORC-2.4  | Universal ID Type     |      |                |
| ORC-3    | Filler Order Number   |      |                |
| ORC-3.1  | Entity Identifier     | 9999 |                |
| ORC-3.2  | Namespace ID          | OP   |                |
| ORC-3.3  | Universal ID          |      |                |
| ORC-3.4  | Universal ID Type     |      |                |
| ORC-17   | Entering Organization |      |                |

|          |                       |          |  |
|----------|-----------------------|----------|--|
| ORC-17.1 | Identifier            | STIIS    |  |
| ORC-17.2 | Text                  | StateIIS |  |
| ORC-17.3 | Name of Coding System | HL70362  |  |

#### RXA - 1

| Location   | Data Element                                       | Data   | Categorization |
|------------|--|--|----------------|
| RXA-1      | Give Sub-ID Counter                                | 0  |                |
| RXA-2      | Administration Sub-ID Counter                      | 1  |                |
| RXA-3      | Date/Time Start of Administration                  |  |                |
| RXA-3.1    | Time   | 20170601   |                |
| RXA-5      | Administered Code                                  |  |                |
| RXA-5.1    | Identifier   | 94   |                |
| RXA-5.2    | Text   | measles, mumps, rubella, and varicella virus vaccine |                |
| RXA-5.3    | Name of Coding System                              | CVX  |                |
| RXA-6      | Administered Amount                                | 0.5  |                |
| RXA-7      | Administered Units                                 |  |                |
| RXA-7.1    | Identifier   | mL   |                |
| RXA-7.2    | Text   |  |                |
| RXA-7.3    | Name of Coding System                              | UCUM   |                |
| RXA-9      | Administration Notes                               |  |                |
| RXA-9.1    | Identifier   | 01   |                |
| RXA-9.2    | Text   |  |                |
| RXA-9.3    | Name of Coding System                              | NIP001   |                |
| RXA-10     | Administering Provider                             |  |                |
| RXA-10.1   | ID Number  |  |                |
| RXA-10.2   | Family Name  |  |                |
| RXA-10.2.1 | Surname  | Mason  |                |
| RXA-10.3   | Given Name   | Jessica  |                |
| RXA-10.4   | Second and Further Given Names or Initials Thereof |  |                |
| RXA-10.9   | Assigning Authority                                |  |                |
| RXA-10.10  | Name Type Code                                     |  |                |
| RXA-10.13  | Identifier Type Code                               |  |                |
| RXA-11     | Administered-at Location                           |  |                |
| RXA-11.4   | Facility   |  |                |
| RXA-17     | Substance Manufacturer Name                        |  |                |
| RXA-17.1   | Identifier   | MSD  |                |
| RXA-17.2   | Text   | Merck and Co Inc                                     |                |
| RXA-17.3   | Name of Coding System                              | MVX  |                |
| RXA-18     | Substance/Treatment Refusal Reason                 |  |                |
| RXA-18.1   | Identifier   |  |                |
| RXA-18.2   | Text   |  |                |
| RXA-18.3   | Name of Coding System                              |  |                |
| RXA-20     | Completion Status                                  | CP   |                |

#### RXA - 2

| Location | Data Element                  | Data | Categorization |
|----------|-------------------------------|------|----------------|
| RXA-1    | Give Sub-ID Counter           | 0    |                |
| RXA-2    | Administration Sub-ID Counter | 1    |                |

|            |  |  |  |
|------------|--|--|--|
| RXA-3      | Date/Time Start of Administration                  |  |  |
| RXA-3.1    | Time   | 20170601   |  |
| RXA-5      | Administered Code                                  |  |  |
| RXA-5.1    | Identifier   | 115  |  |
| RXA-5.2    | Text   | tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine, adsorbed |  |
| RXA-5.3    | Name of Coding System                              | CVX  |  |
| RXA-6      | Administered Amount                                | 0.5  |  |
| RXA-7      | Administered Units                                 |  |  |
| RXA-7.1    | Identifier   | mL   |  |
| RXA-7.2    | Text   |  |  |
| RXA-7.3    | Name of Coding System                              | UCUM   |  |
| RXA-9      | Administration Notes                               |  |  |
| RXA-9.1    | Identifier   | 00   |  |
| RXA-9.2    | Text   |  |  |
| RXA-9.3    | Name of Coding System                              | NIP001   |  |
| RXA-10     | Administering Provider                             |  |  |
| RXA-10.1   | ID Number  |  |  |
| RXA-10.2   | Family Name  |  |  |
| RXA-10.2.1 | Surname  | Mason  |  |
| RXA-10.3   | Given Name   | Jessica  |  |
| RXA-10.4   | Second and Further Given Names or Initials Thereof |  |  |
| RXA-10.9   | Assigning Authority                                |  |  |
| RXA-10.10  | Name Type Code                                     |  |  |
| RXA-10.13  | Identifier Type Code                               |  |  |
| RXA-11     | Administered-at Location                           |  |  |
| RXA-11.4   | Facility   |  |  |
| RXA-17     | Substance Manufacturer Name                        |  |  |
| RXA-17.1   | Identifier   | PMC  |  |
| RXA-17.2   | Text   | Sanofi Pasteur   |  |
| RXA-17.3   | Name of Coding System                              | MVX  |  |
| RXA-18     | Substance/Treatment Refusal Reason                 |  |  |
| RXA-18.1   | Identifier   |  |  |
| RXA-18.2   | Text   |  |  |
| RXA-18.3   | Name of Coding System                              |  |  |
| RXA-20     | Completion Status                                  | CP   |  |

#### RXA - 3

| Location | Data Element                      | Data  | Categorization |
|----------|-----------------------------------|---|----------------|
| RXA-1    | Give Sub-ID Counter               | 0   |                |
| RXA-2    | Administration Sub-ID Counter     | 1   |                |
| RXA-3    | Date/Time Start of Administration |   |                |
| RXA-3.1  | Time                              | 20200901  |                |
| RXA-5    | Administered Code                 |   |                |
| RXA-5.1  | Identifier                        | 185   |                |
| RXA-5.2  | Text                              | influenza, recombinant, quadrivalent, injectable, preservative free |                |
| RXA-5.3  | Name of Coding System             | CVX   |                |
| RXA-6    | Administered Amount               | 0.5   |                |

|            |  |                |  |
|------------|--|----------------|--|
| RXA-7      | Administered Units                                 |                |  |
| RXA-7.1    | Identifier   | mL             |  |
| RXA-7.2    | Text   |                |  |
| RXA-7.3    | Name of Coding System                              | UCUM           |  |
| RXA-9      | Administration Notes                               |                |  |
| RXA-9.1    | Identifier   | 00             |  |
| RXA-9.2    | Text   |                |  |
| RXA-9.3    | Name of Coding System                              | NIP001         |  |
| RXA-10     | Administering Provider                             |                |  |
| RXA-10.1   | ID Number  |                |  |
| RXA-10.2   | Family Name  |                |  |
| RXA-10.2.1 | Surname  | Mason          |  |
| RXA-10.3   | Given Name   | Jessica        |  |
| RXA-10.4   | Second and Further Given Names or Initials Thereof |                |  |
| RXA-10.9   | Assigning Authority                                |                |  |
| RXA-10.10  | Name Type Code                                     |                |  |
| RXA-10.13  | Identifier Type Code                               |                |  |
| RXA-11     | Administered-at Location                           |                |  |
| RXA-11.4   | Facility   |                |  |
| RXA-17     | Substance Manufacturer Name                        |                |  |
| RXA-17.1   | Identifier   | PMC            |  |
| RXA-17.2   | Text   | Sanofi Pasteur |  |
| RXA-17.3   | Name of Coding System                              | MVX            |  |
| RXA-18     | Substance/Treatment Refusal Reason                 |                |  |
| RXA-18.1   | Identifier   |                |  |
| RXA-18.2   | Text   |                |  |
| RXA-18.3   | Name of Coding System                              |                |  |
| RXA-20     | Completion Status                                  | CP             |  |

#### RXA - 4

| Location | Data Element                      | Data             | Categorization |
|----------|-----------------------------------|------------------|----------------|
| RXA-1    | Give Sub-ID Counter               | 0                |                |
| RXA-2    | Administration Sub-ID Counter     | 1                |                |
| RXA-3    | Date/Time Start of Administration |                  |                |
| RXA-3.1  | Time                              | 20211031         |                |
| RXA-5    | Administered Code                 |                  |                |
| RXA-5.1  | Identifier                        | 998              |                |
| RXA-5.2  | Text                              | no vaccine admin |                |
| RXA-5.3  | Name of Coding System             | CVX              |                |
| RXA-6    | Administered Amount               | 999              |                |
| RXA-7    | Administered Units                |                  |                |
| RXA-7.1  | Identifier                        |                  |                |
| RXA-7.2  | Text                              |                  |                |
| RXA-7.3  | Name of Coding System             |                  |                |
| RXA-9    | Administration Notes              |                  |                |
| RXA-9.1  | Identifier                        |                  |                |
| RXA-9.2  | Text                              |                  |                |
| RXA-9.3  | Name of Coding System             |                  |                |
| RXA-10   | Administering Provider            |                  |                |
| RXA-10.1 | ID Number                         |                  |                |
| RXA-10.2 | Family Name                       |                  |                |

|            |  |    |  |
|------------|--|----|--|
| RXA-10.2.1 | Surname  |    |  |
| RXA-10.3   | Given Name   |    |  |
| RXA-10.4   | Second and Further Given Names or Initials Thereof |    |  |
| RXA-10.9   | Assigning Authority                                |    |  |
| RXA-10.10  | Name Type Code                                     |    |  |
| RXA-10.13  | Identifier Type Code                               |    |  |
| RXA-11     | Administered-at Location                           |    |  |
| RXA-11.4   | Facility   |    |  |
| RXA-17     | Substance Manufacturer Name                        |    |  |
| RXA-17.1   | Identifier   |    |  |
| RXA-17.2   | Text   |    |  |
| RXA-17.3   | Name of Coding System                              |    |  |
| RXA-18     | Substance/Treatment Refusal Reason                 |    |  |
| RXA-18.1   | Identifier   |    |  |
| RXA-18.2   | Text   |    |  |
| RXA-18.3   | Name of Coding System                              |    |  |
| RXA-20     | Completion Status                                  | NA |  |

**RXA - 5**

| Location   | Data Element                                       | Data             | Categorization |
|------------|--|------------------|----------------|
| RXA-1      | Give Sub-ID Counter                                | 0                |                |
| RXA-2      | Administration Sub-ID Counter                      | 1                |                |
| RXA-3      | Date/Time Start of Administration                  |                  |                |
| RXA-3.1    | Time   | 20211031         |                |
| RXA-5      | Administered Code                                  |                  |                |
| RXA-5.1    | Identifier   | 998              |                |
| RXA-5.2    | Text   | no vaccine admin |                |
| RXA-5.3    | Name of Coding System                              | CVX              |                |
| RXA-6      | Administered Amount                                | 999              |                |
| RXA-7      | Administered Units                                 |                  |                |
| RXA-7.1    | Identifier   |                  |                |
| RXA-7.2    | Text   |                  |                |
| RXA-7.3    | Name of Coding System                              |                  |                |
| RXA-9      | Administration Notes                               |                  |                |
| RXA-9.1    | Identifier   |                  |                |
| RXA-9.2    | Text   |                  |                |
| RXA-9.3    | Name of Coding System                              |                  |                |
| RXA-10     | Administering Provider                             |                  |                |
| RXA-10.1   | ID Number  |                  |                |
| RXA-10.2   | Family Name  |                  |                |
| RXA-10.2.1 | Surname  |                  |                |
| RXA-10.3   | Given Name   |                  |                |
| RXA-10.4   | Second and Further Given Names or Initials Thereof |                  |                |
| RXA-10.9   | Assigning Authority                                |                  |                |
| RXA-10.10  | Name Type Code                                     |                  |                |
| RXA-10.13  | Identifier Type Code                               |                  |                |
| RXA-11     | Administered-at Location                           |                  |                |
| RXA-11.4   | Facility   |                  |                |
| RXA-17     | Substance Manufacturer Name                        |                  |                |
| RXA-17.1   | Identifier   |                  |                |

|          |                                    |    |  |
|----------|------------------------------------|----|--|
| RXA-17.2 | Text                               |    |  |
| RXA-17.3 | Name of Coding System              |    |  |
| RXA-18   | Substance/Treatment Refusal Reason |    |  |
| RXA-18.1 | Identifier                         |    |  |
| RXA-18.2 | Text                               |    |  |
| RXA-18.3 | Name of Coding System              |    |  |
| RXA-20   | Completion Status                  | NA |  |

#### RXR - 1

| Location | Data Element          | Data          | Categorization |
|----------|-----------------------|---------------|----------------|
| RXR-1    | Route                 |               |                |
| RXR-1.1  | Identifier            | C28161        |                |
| RXR-1.2  | Text                  | Intramuscular |                |
| RXR-1.3  | Name of Coding System | NCIT          |                |
| RXR-2    | Administration Site   |               |                |
| RXR-2.1  | Identifier            | LD            |                |
| RXR-2.2  | Text                  | Left Deltoid  |                |
| RXR-2.3  | Name of Coding System | HL70163       |                |

#### RXR - 2

| Location | Data Element          | Data          | Categorization |
|----------|-----------------------|---------------|----------------|
| RXR-1    | Route                 |               |                |
| RXR-1.1  | Identifier            | C28161        |                |
| RXR-1.2  | Text                  | Intramuscular |                |
| RXR-1.3  | Name of Coding System | NCIT          |                |
| RXR-2    | Administration Site   |               |                |
| RXR-2.1  | Identifier            | LD            |                |
| RXR-2.2  | Text                  | Left Deltoid  |                |
| RXR-2.3  | Name of Coding System | HL70163       |                |

#### RXR - 3

| Location | Data Element          | Data          | Categorization |
|----------|-----------------------|---------------|----------------|
| RXR-1    | Route                 |               |                |
| RXR-1.1  | Identifier            | C28161        |                |
| RXR-1.2  | Text                  | Intramuscular |                |
| RXR-1.3  | Name of Coding System | NCIT          |                |
| RXR-2    | Administration Site   |               |                |
| RXR-2.1  | Identifier            | LD            |                |
| RXR-2.2  | Text                  | Left Deltoid  |                |
| RXR-2.3  | Name of Coding System | HL70163       |                |

#### OBX - 1

| Location | Data Element           | Data         | Categorization |
|----------|------------------------|--------------|----------------|
| OBX-1    | Set ID - OBX           | 1            |                |
| OBX-2    | Value Type             | CE           |                |
| OBX-3    | Observation Identifier |              |                |
| OBX-3.1  | Identifier             | 30956-7      |                |
| OBX-3.2  | Text                   | vaccine type |                |
| OBX-3.3  | Name of Coding System  | LN           |                |
| OBX-4    | Observation Sub-ID     | 1            |                |
| OBX-5    | Observation Value      |              |                |
| OBX-5.1  | Identifier             | 94           |                |



|          |                                 |   |  |
|----------|---------------------------------|---|--|
| OBX-5.2  | Text                            | measles, mumps, rubella,<br>and varicella virus vaccine |  |
| OBX-5.3  | Name of Coding System           | CVX   |  |
| OBX-6    | Units                           |   |  |
| OBX-6.1  | Identifier                      |   |  |
| OBX-6.2  | Text                            |   |  |
| OBX-6.3  | Name of Coding System           |   |  |
| OBX-11   | Observation Result Status       | F   |  |
| OBX-14   | Date/Time of the<br>Observation |   |  |
| OBX-14.1 | Time                            |   |  |

**OBX - 2**

| Location | Data Element                    | Data                       | Categorization |
|----------|---------------------------------|----------------------------|----------------|
| OBX-1    | Set ID - OBX                    | 2                          |                |
| OBX-2    | Value Type                      | CE                         |                |
| OBX-3    | Observation Identifier          |                            |                |
| OBX-3.1  | Identifier                      | 59779-9                    |                |
| OBX-3.2  | Text                            | Immunization Schedule used |                |
| OBX-3.3  | Name of Coding System           | LN                         |                |
| OBX-4    | Observation Sub-ID              | 1                          |                |
| OBX-5    | Observation Value               |                            |                |
| OBX-5.1  | Identifier                      | VXC16                      |                |
| OBX-5.2  | Text                            | ACIP                       |                |
| OBX-5.3  | Name of Coding System           | CDCPHINVS                  |                |
| OBX-6    | Units                           |                            |                |
| OBX-6.1  | Identifier                      |                            |                |
| OBX-6.2  | Text                            |                            |                |
| OBX-6.3  | Name of Coding System           |                            |                |
| OBX-11   | Observation Result Status       | F                          |                |
| OBX-14   | Date/Time of the<br>Observation |                            |                |
| OBX-14.1 | Time                            | 20210901                   |                |

**OBX - 3**

| Location | Data Element                    | Data          | Categorization |
|----------|---------------------------------|---------------|----------------|
| OBX-1    | Set ID - OBX                    | 3             |                |
| OBX-2    | Value Type                      | ID            |                |
| OBX-3    | Observation Identifier          |               |                |
| OBX-3.1  | Identifier                      | 59781-5       |                |
| OBX-3.2  | Text                            | Dose validity |                |
| OBX-3.3  | Name of Coding System           | LN            |                |
| OBX-4    | Observation Sub-ID              | 1             |                |
| OBX-5    | Observation Value               | Y             |                |
| OBX-6    | Units                           |               |                |
| OBX-6.1  | Identifier                      |               |                |
| OBX-6.2  | Text                            |               |                |
| OBX-6.3  | Name of Coding System           |               |                |
| OBX-11   | Observation Result Status       | F             |                |
| OBX-14   | Date/Time of the<br>Observation |               |                |
| OBX-14.1 | Time                            |               |                |

**OBX - 4**

| Location | Data Element | Data | Categorization |
|----------|--------------|------|----------------|
|----------|--------------|------|----------------|

|          |                              |  |  |
|----------|------------------------------|--|--|
| OBX-1    | Set ID - OBX                 | 1  |  |
| OBX-2    | Value Type                   | CE   |  |
| OBX-3    | Observation Identifier       |  |  |
| OBX-3.1  | Identifier                   | 30956-7  |  |
| OBX-3.2  | Text                         | vaccine type   |  |
| OBX-3.3  | Name of Coding System        | LN   |  |
| OBX-4    | Observation Sub-ID           | 1  |  |
| OBX-5    | Observation Value            |  |  |
| OBX-5.1  | Identifier                   | 94   |  |
| OBX-5.2  | Text                         | tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine, adsorbed |  |
| OBX-5.3  | Name of Coding System        | CVX  |  |
| OBX-6    | Units                        |  |  |
| OBX-6.1  | Identifier                   |  |  |
| OBX-6.2  | Text                         |  |  |
| OBX-6.3  | Name of Coding System        |  |  |
| OBX-11   | Observation Result Status    | F  |  |
| OBX-14   | Date/Time of the Observation |  |  |
| OBX-14.1 | Time                         |  |  |

#### OBX - 5

| Location | Data Element                 | Data                       | Categorization |
|----------|------------------------------|----------------------------|----------------|
| OBX-1    | Set ID - OBX                 | 2                          |                |
| OBX-2    | Value Type                   | CE                         |                |
| OBX-3    | Observation Identifier       |                            |                |
| OBX-3.1  | Identifier                   | 59779-9                    |                |
| OBX-3.2  | Text                         | Immunization Schedule used |                |
| OBX-3.3  | Name of Coding System        | LN                         |                |
| OBX-4    | Observation Sub-ID           | 1                          |                |
| OBX-5    | Observation Value            |                            |                |
| OBX-5.1  | Identifier                   | VXC16                      |                |
| OBX-5.2  | Text                         | ACIP                       |                |
| OBX-5.3  | Name of Coding System        | CDCPHINVS                  |                |
| OBX-6    | Units                        |                            |                |
| OBX-6.1  | Identifier                   |                            |                |
| OBX-6.2  | Text                         |                            |                |
| OBX-6.3  | Name of Coding System        |                            |                |
| OBX-11   | Observation Result Status    | F                          |                |
| OBX-14   | Date/Time of the Observation |                            |                |
| OBX-14.1 | Time                         | 20210901                   |                |

#### OBX - 6

| Location | Data Element           | Data          | Categorization |
|----------|------------------------|---------------|----------------|
| OBX-1    | Set ID - OBX           | 3             |                |
| OBX-2    | Value Type             | ID            |                |
| OBX-3    | Observation Identifier |               |                |
| OBX-3.1  | Identifier             | 59781-5       |                |
| OBX-3.2  | Text                   | Dose validity |                |
| OBX-3.3  | Name of Coding System  | LN            |                |
| OBX-4    | Observation Sub-ID     | 1             |                |
| OBX-5    | Observation Value      | Y             |                |
| OBX-6    | Units                  |               |                |
| OBX-6.1  | Identifier             |               |                |

|          |                              |   |  |
|----------|------------------------------|---|--|
| OBX-6.2  | Text                         |   |  |
| OBX-6.3  | Name of Coding System        |   |  |
| OBX-11   | Observation Result Status    | F |  |
| OBX-14   | Date/Time of the Observation |   |  |
| OBX-14.1 | Time                         |   |  |

#### OBX - 7

| Location | Data Element                 | Data  | Categorization |
|----------|------------------------------|---|----------------|
| OBX-1    | Set ID - OBX                 | 1   |                |
| OBX-2    | Value Type                   | CE  |                |
| OBX-3    | Observation Identifier       |   |                |
| OBX-3.1  | Identifier                   | 30956-7   |                |
| OBX-3.2  | Text                         | vaccine type  |                |
| OBX-3.3  | Name of Coding System        | LN  |                |
| OBX-4    | Observation Sub-ID           | 1   |                |
| OBX-5    | Observation Value            |   |                |
| OBX-5.1  | Identifier                   | 185   |                |
| OBX-5.2  | Text                         | influenza, recombinant, quadrivalent, injectable, preservative free |                |
| OBX-5.3  | Name of Coding System        | CVX   |                |
| OBX-6    | Units                        |   |                |
| OBX-6.1  | Identifier                   |   |                |
| OBX-6.2  | Text                         |   |                |
| OBX-6.3  | Name of Coding System        |   |                |
| OBX-11   | Observation Result Status    | F   |                |
| OBX-14   | Date/Time of the Observation |   |                |
| OBX-14.1 | Time                         |   |                |

#### OBX - 8

| Location | Data Element                 | Data                       | Categorization |
|----------|------------------------------|----------------------------|----------------|
| OBX-1    | Set ID - OBX                 | 2                          |                |
| OBX-2    | Value Type                   | CE                         |                |
| OBX-3    | Observation Identifier       |                            |                |
| OBX-3.1  | Identifier                   | 59779-9                    |                |
| OBX-3.2  | Text                         | Immunization Schedule used |                |
| OBX-3.3  | Name of Coding System        | LN                         |                |
| OBX-4    | Observation Sub-ID           | 1                          |                |
| OBX-5    | Observation Value            |                            |                |
| OBX-5.1  | Identifier                   | VXC16                      |                |
| OBX-5.2  | Text                         | ACIP                       |                |
| OBX-5.3  | Name of Coding System        | CDCPHINVS                  |                |
| OBX-6    | Units                        |                            |                |
| OBX-6.1  | Identifier                   |                            |                |
| OBX-6.2  | Text                         |                            |                |
| OBX-6.3  | Name of Coding System        |                            |                |
| OBX-11   | Observation Result Status    | F                          |                |
| OBX-14   | Date/Time of the Observation |                            |                |
| OBX-14.1 | Time                         | 20210901                   |                |

#### OBX - 9

| Location | Data Element | Data | Categorization |
|----------|--------------|------|----------------|
|----------|--------------|------|----------------|

|          |                              |               |  |
|----------|------------------------------|---------------|--|
| OBX-1    | Set ID - OBX                 | 3             |  |
| OBX-2    | Value Type                   | ID            |  |
| OBX-3    | Observation Identifier       |               |  |
| OBX-3.1  | Identifier                   | 59781-5       |  |
| OBX-3.2  | Text                         | Dose validity |  |
| OBX-3.3  | Name of Coding System        | LN            |  |
| OBX-4    | Observation Sub-ID           | 1             |  |
| OBX-5    | Observation Value            | Y             |  |
| OBX-6    | Units                        |               |  |
| OBX-6.1  | Identifier                   |               |  |
| OBX-6.2  | Text                         |               |  |
| OBX-6.3  | Name of Coding System        |               |  |
| OBX-11   | Observation Result Status    | F             |  |
| OBX-14   | Date/Time of the Observation |               |  |
| OBX-14.1 | Time                         |               |  |

#### OBX - 10

| Location | Data Element                 | Data                               | Categorization |
|----------|------------------------------|------------------------------------|----------------|
| OBX-1    | Set ID - OBX                 | 1                                  |                |
| OBX-2    | Value Type                   | CE                                 |                |
| OBX-3    | Observation Identifier       |                                    |                |
| OBX-3.1  | Identifier                   | 30956-7                            |                |
| OBX-3.2  | Text                         | vaccine type                       |                |
| OBX-3.3  | Name of Coding System        | LN                                 |                |
| OBX-4    | Observation Sub-ID           | 1                                  |                |
| OBX-5    | Observation Value            |                                    |                |
| OBX-5.1  | Identifier                   | 88                                 |                |
| OBX-5.2  | Text                         | influenza, unspecified formulation |                |
| OBX-5.3  | Name of Coding System        | CVX                                |                |
| OBX-6    | Units                        |                                    |                |
| OBX-6.1  | Identifier                   |                                    |                |
| OBX-6.2  | Text                         |                                    |                |
| OBX-6.3  | Name of Coding System        |                                    |                |
| OBX-11   | Observation Result Status    | F                                  |                |
| OBX-14   | Date/Time of the Observation |                                    |                |
| OBX-14.1 | Time                         |                                    |                |

#### OBX - 11

| Location | Data Element           | Data                       | Categorization |
|----------|------------------------|----------------------------|----------------|
| OBX-1    | Set ID - OBX           | 2                          |                |
| OBX-2    | Value Type             | CE                         |                |
| OBX-3    | Observation Identifier |                            |                |
| OBX-3.1  | Identifier             | 59779-9                    |                |
| OBX-3.2  | Text                   | Immunization Schedule used |                |
| OBX-3.3  | Name of Coding System  | LN                         |                |
| OBX-4    | Observation Sub-ID     | 1                          |                |
| OBX-5    | Observation Value      |                            |                |
| OBX-5.1  | Identifier             | VXC16                      |                |
| OBX-5.2  | Text                   | ACIP                       |                |
| OBX-5.3  | Name of Coding System  | CDCPHINVS                  |                |
| OBX-6    | Units                  |                            |                |
| OBX-6.1  | Identifier             |                            |                |
| OBX-6.2  | Text                   |                            |                |

|          |                              |          |  |
|----------|------------------------------|----------|--|
| OBX-6.3  | Name of Coding System        |          |  |
| OBX-11   | Observation Result Status    | F        |  |
| OBX-14   | Date/Time of the Observation |          |  |
| OBX-14.1 | Time                         | 20211031 |  |

#### OBX - 12

| Location | Data Element                 | Data                 | Categorization |
|----------|------------------------------|----------------------|----------------|
| OBX-1    | Set ID - OBX                 | 3                    |                |
| OBX-2    | Value Type                   | DT                   |                |
| OBX-3    | Observation Identifier       |                      |                |
| OBX-3.1  | Identifier                   | 30980-7              |                |
| OBX-3.2  | Text                         | Date vaccination due |                |
| OBX-3.3  | Name of Coding System        | LN                   |                |
| OBX-4    | Observation Sub-ID           | 1                    |                |
| OBX-5    | Observation Value            | 20210901             |                |
| OBX-6    | Units                        |                      |                |
| OBX-6.1  | Identifier                   |                      |                |
| OBX-6.2  | Text                         |                      |                |
| OBX-6.3  | Name of Coding System        |                      |                |
| OBX-11   | Observation Result Status    | F                    |                |
| OBX-14   | Date/Time of the Observation |                      |                |
| OBX-14.1 | Time                         |                      |                |

#### OBX - 13

| Location | Data Element                 | Data   | Categorization |
|----------|------------------------------|--|----------------|
| OBX-1    | Set ID - OBX                 | 1  |                |
| OBX-2    | Value Type                   | CE   |                |
| OBX-3    | Observation Identifier       |  |                |
| OBX-3.1  | Identifier                   | 30956-7  |                |
| OBX-3.2  | Text                         | vaccine type   |                |
| OBX-3.3  | Name of Coding System        | LN   |                |
| OBX-4    | Observation Sub-ID           | 1  |                |
| OBX-5    | Observation Value            |  |                |
| OBX-5.1  | Identifier                   | 115  |                |
| OBX-5.2  | Text                         | tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine, adsorbed |                |
| OBX-5.3  | Name of Coding System        | CVX  |                |
| OBX-6    | Units                        |  |                |
| OBX-6.1  | Identifier                   |  |                |
| OBX-6.2  | Text                         |  |                |
| OBX-6.3  | Name of Coding System        |  |                |
| OBX-11   | Observation Result Status    | F  |                |
| OBX-14   | Date/Time of the Observation |  |                |
| OBX-14.1 | Time                         |  |                |

#### OBX - 14

| Location | Data Element           | Data | Categorization |
|----------|------------------------|------|----------------|
| OBX-1    | Set ID - OBX           | 2    |                |
| OBX-2    | Value Type             | CE   |                |
| OBX-3    | Observation Identifier |      |                |

|          |                              |                            |  |
|----------|------------------------------|----------------------------|--|
| OBX-3.1  | Identifier                   | 59779-9                    |  |
| OBX-3.2  | Text                         | Immunization Schedule used |  |
| OBX-3.3  | Name of Coding System        | LN                         |  |
| OBX-4    | Observation Sub-ID           | 1                          |  |
| OBX-5    | Observation Value            |                            |  |
| OBX-5.1  | Identifier                   | VXC16                      |  |
| OBX-5.2  | Text                         | ACIP                       |  |
| OBX-5.3  | Name of Coding System        | CDCPHINVS                  |  |
| OBX-6    | Units                        |                            |  |
| OBX-6.1  | Identifier                   |                            |  |
| OBX-6.2  | Text                         |                            |  |
| OBX-6.3  | Name of Coding System        |                            |  |
| OBX-11   | Observation Result Status    | F                          |  |
| OBX-14   | Date/Time of the Observation |                            |  |
| OBX-14.1 | Time                         | 20210601                   |  |

**OBX - 15**

| Location | Data Element                 | Data                 | Categorization |
|----------|------------------------------|----------------------|----------------|
| OBX-1    | Set ID - OBX                 | 3                    |                |
| OBX-2    | Value Type                   | DT                   |                |
| OBX-3    | Observation Identifier       |                      |                |
| OBX-3.1  | Identifier                   | 30980-7              |                |
| OBX-3.2  | Text                         | Date vaccination due |                |
| OBX-3.3  | Name of Coding System        | LN                   |                |
| OBX-4    | Observation Sub-ID           | 1                    |                |
| OBX-5    | Observation Value            | 20220601             |                |
| OBX-6    | Units                        |                      |                |
| OBX-6.1  | Identifier                   |                      |                |
| OBX-6.2  | Text                         |                      |                |
| OBX-6.3  | Name of Coding System        |                      |                |
| OBX-11   | Observation Result Status    | F                    |                |
| OBX-14   | Date/Time of the Observation |                      |                |
| OBX-14.1 | Time                         |                      |                |