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Some time after initial Laboratory Test Compendium is delivered electronically from the LIS to the EHR-S, the LIS send up to four eDOS update messages to the EHR-S to revise an orderable test. The EHR-S will integrate these updates into its test directory.

Comments

Updates to a single record.

-PreCondition-

Initial load of compendium data elements are incorporated appropriately into the EHR-S.

PostCondition

Data elements are incorporated appropriately into the EHR-S.

-TestObjectives

• Demonstrate capability to support reactivating a single record in an existing test compendium.

Notes to Testers

Verification of this test case requires comparison to the data that was available after the intial load.

ELECTRONIC DIRECTORY OF SERVICE(eDOS)

Electronic Directory Of Service (eDOS)		
Test Case ID	4-Update_reactivate	
Juror ID		
Juror Name		
HIT System Tested		
Inspection Date/Time		
Inspection Settlement (Pass/Fail)	Pass Fail	
Inspection Settlement (Lass/Pan)		
Reason Failed		
Juror Comments		

INSTRUCTIONS

No Specific Instructions

DISPLAY VERIFICATION: CPOE View

Orderable Atomic Tests and /or Panels		Tester Comment
Laboratary Name	Name of the Test/Panel*	
Century Hospital Clinical Laboratory	Erythrocyte sedimentation rate	
Century Hospital Clinical Laboratory GHP		
* equivalent name accepted		

Panel : GHP		Tester Comment	
Patient Preparation Patient fasting required for 12 hours.			
Panel Components			
CMP			
CBC_diff			
TSH			
Comprehensive Urinalysis			

DISPLAY VERIFICATION : Specimen Collection / AOE View

Atomic Test : Erythro	Atomic Test : Erythrocyte sedimentation rate Tester Comment				
Preferred Specimen Inform	nation				
Specimen	Blood sample				
Specimen Handling Code	Critical refrigerated				
Specimen Handling Code	Metal Free				
Minimum Collection Volume	2.4 milliliters				
Container(s)	Container(s)				
Black Top Tube (Vac-Tec)	Black Top Tube (Vac-Tec)				
Alternate Specimen Inform	nation				
Specimen	Blood sample				
Specimen Handling Code	Critical refrigerated				
specimen nanding Code	Metal Free				
Minimum Collection Volume	2.4 milliliters				
Container(s)					
Lavender Top (EDTA) tube					

Panel : GHP		Tester Comment			
Preferred Specimen Inform	Preferred Specimen Information				
Specimen	Serum specimen				
Specimen Handling Code	Refrigerated temperature				
Minimum Collection Volume	0.5 milliliter				
Container(s)					
Gold Serum Separator tube					
Red, No Additive tube					
Preferred Specimen Inform	nation				
Specimen Specimen 1 moral	Blood sample				
Specimen Handling Code	Critical refrigerated				
Minimum Collection Volume	0.5 milliliters				
Container(s)					
Lavender Top (EDTA) tube					
Pink Top (K2EDTA) tube					
Preferred Specimen Inform	Preferred Specimen Information				
Specimen	Urine specimen				
Specimen Handling Code	Refrigerated temperature				
Minimum Collection Volume	4 milliliter				
Container(s)					
Sterile, plastic, leak proof container					

DISPLAY VERIFICATION : Directory Admin View

Atomic Test : Erythrocyte sedimentation rate			Tester Comment	
Global Information				
Identifier assigned by lab	Text	Code System		
500	Erythrocyte sedimentation rate	99USL		
Alternate Identifier	Text	Code System		
30341-2	Erythrocyte sedimentation rate	LN		
416838001	Erythrocyte sedimentation rate measurement	SCT		
Charge Code Information				
CPT4-code	85652			

Panel : GHP	Panel : GHP		Tester Comment
Global Information			
Identifier assigned by lab	Text	Code System	
800	GHP	99USL	
Charge Code Information			
CPT4-code	84443		
CPT4-code	81003		
CPT4-code	80053		
CPT4-code	85025		
CPT4-code	85007		
CPT4-code	85060		

INCORPORATE VERIFICATION

Incorporate Verification for Erythrocyte sedimentation rate

Data Element Name	Data	Tester Comment
Test Name	Erythrocyte sedimentation rate	
Test Identifier	500	
Test Identifier Code System	99USL	
Status	Active	

General Information			
Location	Data Element Name	Data	Tester Comment
OM1.2	Producer's Service/Test/Observation ID		
OM1.2.1	Identifier	500	
OM1.2.2	Text	Erythrocyte sedimentation rate	

Logotion	Data Flamont Name	Doto	Tostor Comment
Location	Data Element Name		Tester Comment
OM1.2.3	Name of Coding System	99USL	
OM1.5	Producer ID		
OM1.5.1	Identifier	05D0669071	
OM1.5.2	Text	Century Hospital Clinical Laboratory	
OM1.7[1]	Other Service/Test/Observation IDs for the Observation		
OM1.7.1[1]	Identifier	30341-2	
OM1.7.2[1]	Text	Erythrocyte sedimentation rate	
OM1.7.3[1]	Name of Coding System	LN	
OM1.7[2]	Other Service/Test/Observation IDs for the Observation		
OM1.7.1[2]	Identifier	416838001	
OM1.7.2[2]	Text	Erythrocyte sedimentation rate measurement	
OM1.7.3[2]	Name of Coding System	SCT	
OM1.9	Preferred Report Name for the Observation	Erythrocyte sedimentation rate	
OM1.32	Interpretation of Observations	The erythrocyte sedimentation rate is a nonspecific measure of inflammatory disease.	
OM1.39	Factors that may Affect the Observation	Insufficient blood, Clotting, Hemolysis, Blood specimen received > 12 hours after collection.	
OM1.40[1]	Service/Test/Observation Performance Schedule	Daily	
OM1.40[2]	Service/Test/Observation Performance Schedule	Continuously	
OM1.48	Exclusive Test	N	
OM1.49	Diagnostic Service Sector ID	LAB	
OM1.54[1]	Special Instructions	Please include tentative diagnosis/treatment on the request form	
OM1.54[2]	Special Instructions	Please direct any questions regarding this test to the hematology division.	
OM1.55[1]	Test Relationship Category	Clinical Pathology	
OM1.55[2]	Test Relationship Category	Hematology	
OM1.56	Observation Identifier associated with Producer's Service/Test/Observation ID		
OM1.56.1	Identifier	30341-2	
OM1.56.2	Text	Erythrocyte sedimentation rate	
OM1.56.3	Name of Coding System	LN	
OM1.56.4	Alternate Identifier	500	
OM1.56.5	Alternate Text	Erythrocyte sedimentation rate	
OM1.56.6	Name of Alternate Coding System	99USL	
OM1.56.9	Original Text	Erythrocyte sedimentation rate	
OM1.57	Expected Turn-Around Time		
OM1.57.1	Quantity	1	
OM1.57.2	Units		
OM1.57.2.1	Identifier	d	

General Information				
Location	Data Element Name	Data	Tester Comment	
OM1.57.2.2	Text	day		

Location	Data Element Name	Data	Tester Comment
OM2.2	Units of Measure		
OM2.2.2	Text	millimeter per hour	
OM2.2.3	Name of Coding System	UCUM	
OM2.2.4	Alternate Identifier	mm/hour	
OM2.2.5	Alternate Text	mm/hour	
OM2.2.6	Name of Alternate Coding System	99USL	
OM2.2.9	Original Text	mm/hour	
OM2.6[1]	Reference (Normal) Range for Ordinal and Continuous Observations		
OM2.6.1[1]	Numeric Range		
OM2.6.1.1[1]	Low Value	0	
OM2.6.1.2[1]	High Value	15	
OM2.6.2[1]	Administrative Sex		
OM2.6.2.1[1]	Identifier	M	
OM2.6.2.2[1]	Text	Male	
OM2.6.2.3[1]	Name of Coding System	HL70001	
OM2.6[2]	Reference (Normal) Range for Ordinal and Continuous Observations		
OM2.6.1[2]	Numeric Range		
OM2.6.1.1[2]	Low Value	0	
OM2.6.1.2[2]	High Value	25	
OM2.6.2[2]	Administrative Sex		
OM2.6.2.1[2]	Identifier	F	
OM2.6.2.2[2]	Text	Female	
OM2.6.2.3[2]	Name of Coding System	HL70001	

Specimen I	Specimen Information			
Location	Data Element Name	Data	Tester Comment	
OM4.3	Container Description	Black Top Tube (Vac-Tec)		
OM4.4	Container Volume	3.0		
OM4.5	Container Units			
OM4.5.2	Text	milliliters		
OM4.6	Specimen			
OM4.6.1	Identifier	119297000		
OM4.6.2	Text	Blood sample		
OM4.6.3	Name of Coding System	SCT		
OM4.6.4	Alternate Identifer	WBLD		
OM4.6.5	Alternate Text	Whole blood		
OM4.6.6	Name of Alternate Coding System	99USL		
OM4.6.9	Original Text	Whole blood		
OM4.7	Additive			
OM4.7.2	Text	Buffered Citrate (Westergren Sedimentation Rate)		
OM4.10	Normal Collection Volume			
OM4.10.1	Quantity	2.4		
OM4.10.2	Units			
OM4.10.2.2	Text	milliliters		

Specimen Information			
Location	Data Element Name	Data	Tester Comment
OM4.3	Container Description	Lavender Top (EDTA) tube	
OM4.4	Container Volume	3.0	
OM4.5	Container Units		
OM4.5.2	Text	milliliters	
OM4.6	Specimen		
OM4.6.1	Identifier	119297000	
OM4.6.2	Text	Blood sample	
OM4.6.3	Name of Coding System	SCT	
OM4.6.4	Alternate Identifer	WBLD	
OM4.6.5	Alternate Text	Whole blood	
OM4.6.6	Name of Alternate Coding System	99USL	
OM4.6.9	Original Text	Whole blood	
OM4.7	Additive		
OM4.7.2	Text	Potassium/K EDTA	
OM4.10	Normal Collection Volume		
OM4.10.1	Quantity	2.4	
OM4.10.2	Units		
OM4.10.2.2	Text	milliliters	

Charge Description				
Location	Data Element Name	Data	Tester Comment	
CDM.3	Identifier	N/A		
CDM.7	Procedure Code			
CDM.7.1	Identifier	85652		
CDM.7.2	Text	Sedimentation rate, erythrocyte; automated		

Payer Info	Payer Information			
Location	Data Element Name	Data	Tester Comment	
PM1.1	Health Plan ID			
PM1.1.2	Text	Healthplan2		
PM1.2	Insurance Company ID			
PM1.2.1	ID Number	SMCA2		
PM1.2.4	Assiging Authority			
PM1.2.4.2	Universal ID	2.16.840.1.113883.3.72.5.22		
PM1.2.4.3	Universal ID Type	ISO		

Coverage 1	Coverage Policy			
Location	Data Element Name	Data	Tester Comment	
МСР.3	Universal Service Price Range – Low Value			
MCP.3.1	Quantity	25		
MCP.3.2	Denomination	USD		
MCP.4	Universal Service Price Range – High Value			
MCP.4.1	Quantity	30		
MCP.4.2	Denomination	USD		
MCP.5	Reason for Universal Service Cost Range	Some reason		

Incorporate Verification for GHP

Data Element Name	Data	Tester Comment
Test Name	GHP	
Test Identifier	800	
Test Identifier Code System	99USL	
Status	Active	

General Info	General Information			
Location	Data Element Name	Data	Tester Comment	
OM1.2	Producer's Service/Test/Observation ID			
OM1.2.1	Identifier	800		
OM1.2.2	Text	GHP		
OM1.2.3	Name of Coding System	99USL		
OM1.5	Producer ID			
OM1.5.1	Identifier	05D0669071		
OM1.5.2	Text	Century Hospital Clinical Laboratory		
OM1.9	Preferred Report Name for the Observation	General Health Profile		
OM1.32	Interpretation of Observations	This blood test is used to determine general health status and to screen for and monitor a variety of disorders. This profile includes a complete metabolic profile, comprehensive CBC, Urinalysis and total Thyrotropin (T4).		
OM1.37	Patient Preparation	Patient fasting required for 12 hours.		
OM1.39	Factors that may Affect the Observation	Insufficient specimen, Gross hemolysis, Improper labeling		
OM1.40	Service/Test/Observation Performance Schedule	Daily		
OM1.48	Exclusive Test	N		
OM1.49	Diagnostic Service Sector ID	LAB		
OM1.57	Expected Turn-Around Time			
OM1.57.1	Quantity	1		
OM1.57.2	Units			
OM1.57.2.1	Identifier	d		
OM1.57.2.2	Text	day		

Observation	Observation Batteries(sets)		
Location	Data Element Name	Data	Tester Comment
OM5.2[1]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[1]	Identifier	100	
OM5.2.2[1]	Text	CMP	
OM5.2.3[1]	Name of Coding System	99USL	
OM5.2[2]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[2]	Identifier	200	
OM5.2.2[2]	Text	CBC_diff	
OM5.2.3[2]	Name of Coding System	99USL	
OM5.2[3]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[3]	Identifier	700	
OM5.2.2[3]	Text	TSH	
OM5.2.3[3]	Name of Coding System	99USL	
OM5.2[4]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[4]	Identifier	300	
OM5.2.2[4]	Text	Comprehensive Urinalysis	
OM5.2.3[4]	Name of Coding System	99USL	

Specimen I	Specimen Information			
Location	Data Element Name	Data	Tester Comment	
OM4.3[1]	Container Description	Gold Serum Separator tube		
OM4.4[1]	Container Volume	5.0		
OM4.5[1]	Container Units			
OM4.5.2[1]	Text	milliliter		
OM4.3[2]	Container Description	Red, No Additive tube		
OM4.4[2]	Container Volume	5.0		
OM4.5[2]	Container Units			
OM4.5.2[2]	Text	milliliter		
OM4.6	Specimen			
OM4.6.1	Identifier	119364003		
OM4.6.2	Text	Serum specimen		
OM4.6.3	Name of Coding System	SCT		
OM4.10	Normal Collection Volume			
OM4.10.1	Quantity	1		
OM4.10.2	Units			
OM4.10.2.2	Text	milliliter		

Specimen Information			
Location	Data Element Name	Data	Tester Comment
OM4.3[1]	Container Description	Lavender Top (EDTA) tube	
OM4.4[1]	Container Volume	3.0	
OM4.5[1]	Container Units		
OM4.5.2[1]	Text	milliliters	
OM4.3[2]	Container Description	Pink Top (K2EDTA) tube	
OM4.4[2]	Container Volume	3.0	
OM4.5[2]	Container Units		
OM4.5.2[2]	Text	milliliters	
OM4.6	Specimen		
OM4.6.1	Identifier	119297000	
OM4.6.2	Text	Blood sample	
OM4.6.3	Name of Coding System	SCT	
OM4.6.4	Alternate Identifer	WBLD	
OM4.6.5	Alternate Text	Whole blood	
OM4.6.6	Name of Alternate Coding System	99USL	
OM4.6.9	Original Text	Whole blood	
OM4.7	Additive		
OM4.7.2	Text	Potassium/K EDTA	
OM4.10	Normal Collection Volume		
OM4.10.1	Quantity	3	
OM4.10.2	Units		
OM4.10.2.2	2 Text	milliliters	

Specimen Ir	Specimen Information			
Location	Data Element Name	Data	Tester Comment	
OM4.3	Container Description	Sterile, plastic, leak proof container		
OM4.4	Container Volume	4		
OM4.5	Container Units			
OM4.5.2	Text	fluid ounce (US)		
OM4.6	Specimen			
OM4.6.1	Identifier	122575003		
OM4.6.2	Text	Urine specimen		
OM4.6.3	Name of Coding System	SCT		
OM4.6.4	Alternate Identifer	UR		
OM4.6.5	Alternate Text	Random urine		
OM4.6.6	Name of Alternate Coding System	99USL		
OM4.6.9	Original Text	Random urine		
OM4.10	Normal Collection Volume			
OM4.10.1	Quantity	20		
OM4.10.2	Units			
OM4.10.2.2	Text	milliliter		

Charge Description			
Location	Data Element Name	Data	Tester Comment
CDM.3	Identifier	N/A	
CDM.7[1]	Procedure Code		
CDM.7.1[1]	Identifier	84443	
CDM.7.2[1]	Text	Thyroid Stimulating Hormone (TSH)	
CDM.7[2]	Procedure Code		
CDM.7.1[2]	Identifier	81003	
CDM.7.2[2]	Text	URNLYSS, DP STCK OR TBLT RGNT FR BLRBN, GLCS, HMGLBN, KTNS, LKCYTS, NTRT, PH, PRTN, SPCFC GRVTY, URBLNGN, ANY NMBR OF THS CNSTTNTS ATMTD, WTHT MCRSCPY	
CDM.7[3]	Procedure Code		
CDM.7.1[3]	Identifier	80053	
CDM.7.2[3]	Text	Comprehensive metabolic panel This panel must include the following: Albumin (82040) Bilirubin, total (82247) Calcium, total (82310) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Phosphatase, alkaline (84075) Potassium (84132) Protein, total (84155) Sodium (84295) Transferase, alanine amino (ALT) (SGPT) (84460) Transferase, aspartate amino (AST) (SGOT) (84450) Urea nitrogen (BUN) (84520)	
CDM.7[4]	Procedure Code		
CDM.7.1[4]	Identifier	85025	
CDM.7.2[4]	Text	blood count; complete (cbc), automated (hgb, hct, rbc, wbc and platelet count) and automated differential wbc count	
CDM.7[5]	Procedure Code		
CDM.7.1[5]	Identifier	85007	
CDM.7.2[5]	Text	BLOOD COUNT; BLOOD SMEAR, MICROSCOPIC EXAMINATION WITH MANUAL DIFFERENTIAL WBC COUNT	
CDM.7[6]	Procedure Code		
CDM.7.1[6]	Identifier	85060	
CDM.7.2[6]	Text	BLOOD SMEAR, PERIPHERAL, INTERPRETATION BY PHYSICIAN WITH WRITTEN REPORT	