

ELECTRONIC DIRECTORY OF SERVICE(eDOS)

Electronic Directory Of Service (eDOS)					
Test Case ID	3-Update_revise				
Juror ID					
Juror Name					
HIT System Tested					
Inspection Date/Time					
Inspection Settlement (Pass/Fail)	<table><thead><tr><th>Pass</th><th>Fail</th></tr></thead><tbody><tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></tbody></table>	Pass	Fail	<input type="checkbox"/>	<input type="checkbox"/>
Pass	Fail				
<input type="checkbox"/>	<input type="checkbox"/>				
Reason Failed					
Juror Comments					

INSTRUCTIONS

No Specific Instructions

DISPLAY VERIFICATION : CPOE View

Orderable Atomic Tests and /or Panels		Tester Comment
Laboratory Name	Name of the Test/Panel*	
Century Hospital Clinical Laboratory	Penicillin	
Century Hospital Clinical Laboratory	CMP	
* equivalent name accepted		

Panel : CMP		Tester Comment
Patient Preparation	Patient fasting required for 12 hours.	
Panel Components		
Serum Glucose		
Blood Urea Nitrogen (BUN)		
Creatinine		
BUN/Creatinine Ratio		
GFR, calculated		
Calcium		
Total protein, serum		
Albumin		
Globulin		
Albumin/globulin ratio		
Total bilirubin, serum		
Alkaline phosphatase (ALP)		
Alanine aminotransferase (ALT)		
Aspartate aminotransferase (ASP)		
Sodium, serum		
Potassium, serum		
Chloride, serum		
Carbon dioxide, serum		
Anion gap		

DISPLAY VERIFICATION : Specimen Collection / AOE View

Atomic Test : Penicillin		Tester Comment
Specimen Information		
Specimen	Bacterial isolate specimen	
Specimen Handling Code	Critical ambient temperature	

Panel : CMP		Tester Comment
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		
Specimen Information		
Specimen	Plasma specimen	
Specimen Handling Code	Refrigerated temperature	
Minimum Collection Volume	0.7 milliliter	
Container(s)		
Green Lithium Heparin tube		

DISPLAY VERIFICATION : Directory Admin View

Atomic Test : Penicillin			Tester Comment
Global Information			
Identifier assigned by lab	Text	Code System	
1506	Penicillin	99USL	
Alternate Identifier	Text	Code System	
6932-8	Penicillin [Susceptibility] by Minimum inhibitory concentration (MIC)	LN	

Panel : CMP			Tester Comment
Global Information			
Identifier assigned by lab	Text	Code System	
100	CMP	99USL	
Alternate Identifier	Text	Code System	
24323-8	Comprehensive metabolic 2000 panel - Serum or Plasma	LN	

INCORPORATE VERIFICATION

Incorporate Verification for Penicillin

Data Element Name	Data	Tester Comment
Test Name	Penicillin	
Test Identifier	1506	
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	1506	
OM1.2.2	Text	Penicillin	
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	Other Service/Test/Observation IDs for the Observation		
OM1.7.1	Identifier	6932-8	
OM1.7.2	Text	Penicillin [Susceptibility] by Minimum inhibitory concentration (MIC)	
OM1.7.3	Name of Coding System	LN	
OM1.9	Preferred Report Name for the Observation	Penicillin MIC	
OM1.39	Factors that may Affect the Observation	Insufficient specimen, Improper labeling.	
OM1.40	Service/Test/Observation Performance Schedule	Monday through Friday	
OM1.48	Exclusive Test	N	
OM1.49	Diagnostic Service Sector ID	LAB	
OM1.56	Observation Identifier associated with Producer's Service/Test/Observation ID		
OM1.56.1	Identifier	6932-8	
OM1.56.2	Text	Penicillin [Susceptibility] by Minimum inhibitory concentration (MIC)	
OM1.56.3	Name of Coding System	LN	
OM1.56.4	Alternate Identifier	1506	
OM1.56.5	Alternate Text	Penicillin	
OM1.56.6	Name of Alternate Coding System	99USL	
OM1.57	Expected Turn-Around Time		
OM1.57.1	Quantity	3	
OM1.57.2	Units		
OM1.57.2.2	Text	day	

Specimen Information			
Location	Data Element Name	Data	Tester Comment
OM4.6	Specimen		
OM4.6.1	Identifier	429951000124103	
OM4.6.2	Text	Bacterial isolate specimen	
OM4.6.3	Name of Coding System	SCT	

Incorporate Verification for CMP

Data Element Name	Data	Tester Comment
Test Name	CMP	
Test Identifier	100	
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	100	
OM1.2.2	Text	CMP	
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	Other Service/Test/Observation IDs for the Observation		
OM1.7.1	Identifier	24323-8	
OM1.7.2	Text	Comprehensive metabolic 2000 panel - Serum or Plasma	
OM1.7.3	Name of Coding System	LN	
OM1.10	Preferred Short Name on Mnemonic for Observation	CMP	
OM1.32	Interpretation of Observations	Test used to measure blood sugar, electrolytes and fluid balance, kidney and liver function.	
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 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	104	
OM5.2.2[1]	Text	Serum Glucose	
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	106	
OM5.2.2[2]	Text	Blood Urea Nitrogen (BUN)	
OM5.2.3[2]	Name of Coding System	99USL	
OM5.2[3]	Test/Observations Included Within an Ordered Test Battery		

Observation Batteries(sets)			
Location	Data Element Name	Data	Tester Comment
OM5.2.1[3]	Identifier	102	
OM5.2.2[3]	Text	Creatinine	
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	108	
OM5.2.2[4]	Text	BUN/Creatinine Ratio	
OM5.2.3[4]	Name of Coding System	99USL	
OM5.2[5]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[5]	Identifier	110	
OM5.2.2[5]	Text	GFR, calculated	
OM5.2.3[5]	Name of Coding System	99USL	
OM5.2[6]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[6]	Identifier	112	
OM5.2.2[6]	Text	Calcium	
OM5.2.3[6]	Name of Coding System	99USL	
OM5.2[7]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[7]	Identifier	114	
OM5.2.2[7]	Text	Total protein, serum	
OM5.2.3[7]	Name of Coding System	99USL	
OM5.2[8]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[8]	Identifier	116	
OM5.2.2[8]	Text	Albumin	
OM5.2.3[8]	Name of Coding System	99USL	
OM5.2[9]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[9]	Identifier	118	
OM5.2.2[9]	Text	Globulin	
OM5.2.3[9]	Name of Coding System	99USL	
OM5.2[10]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[10]	Identifier	120	
OM5.2.2[10]	Text	Albumin/globulin ratio	
OM5.2.3[10]	Name of Coding System	99USL	
OM5.2[11]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[11]	Identifier	122	
OM5.2.2[11]	Text	Total bilirubin, serum	
OM5.2.3[11]	Name of Coding System	99USL	

Observation Batteries(sets)			
Location	Data Element Name	Data	Tester Comment
OM5.2[12]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[12]	Identifier	124	
OM5.2.2[12]	Text	Alkaline phosphatase (ALP)	
OM5.2.3[12]	Name of Coding System	99USL	
OM5.2[13]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[13]	Identifier	126	
OM5.2.2[13]	Text	Alanine aminotransferase (ALT)	
OM5.2.3[13]	Name of Coding System	99USL	
OM5.2[14]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[14]	Identifier	128	
OM5.2.2[14]	Text	Aspartate aminotransferase (ASP)	
OM5.2.3[14]	Name of Coding System	99USL	
OM5.2[15]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[15]	Identifier	130	
OM5.2.2[15]	Text	Sodium, serum	
OM5.2.3[15]	Name of Coding System	99USL	
OM5.2[16]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[16]	Identifier	132	
OM5.2.2[16]	Text	Potassium, serum	
OM5.2.3[16]	Name of Coding System	99USL	
OM5.2[17]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[17]	Identifier	134	
OM5.2.2[17]	Text	Chloride, serum	
OM5.2.3[17]	Name of Coding System	99USL	
OM5.2[18]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[18]	Identifier	136	
OM5.2.2[18]	Text	Carbon dioxide, serum	
OM5.2.3[18]	Name of Coding System	99USL	
OM5.2[19]	Test/Observations Included Within an Ordered Test Battery		
OM5.2.1[19]	Identifier	138	
OM5.2.2[19]	Text	Anion gap	
OM5.2.3[19]	Name of Coding System	99USL	

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	Container Description	Green Lithium Heparin tube	
OM4.4	Container Volume	3.0	
OM4.5	Container Units		
OM4.5.2	Text	milliliter	
OM4.6	Specimen		
OM4.6.1	Identifier	119361006	
OM4.6.2	Text	Plasma specimen	
OM4.6.3	Name of Coding System	SCT	
OM4.7	Additive		
OM4.7.2	Text	Lithium/Li Heparin	
OM4.10	Normal Collection Volume		
OM4.10.1	Quantity	2	
OM4.10.2	Units		
OM4.10.2.2	Text	milliliter	

Incorporate Verification for CBC_diff

Data Element Name	Data	Tester Comment
Test Name	CBC_diff	
Test Identifier	200	
Test Identifier Code System	99USL	
Status	Active	

Charge Description			
Location	Data Element Name	Data	Tester Comment
CDM.3	Identifier	N/A	
CDM7[1]	Procedure Code		
CDM.7.1[1]	Identifier	85060	
CDM.7.2[1]	Text	BLOOD SMEAR, PERIPHERAL, INTERPRETATION BY PHYSICIAN WITH WRITTEN REPORT	
CDM7[2]	Procedure Code		
CDM.7.1[2]	Identifier	85060	
CDM.7.2[2]	Text	BLOOD SMEAR, PERIPHERAL, INTERPRETATION BY PHYSICIAN WITH WRITTEN REPORT	

Incorporate Verification for Prostate Biopsy Pathology Report

Data Element Name	Data	Tester Comment
Test Name	Prostate Biopsy Pathology Report	
Test Identifier	600	
Test Identifier Code System	99USL	
Status	Active	

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

Coverage Policy			
Location	Data Element Name	Data	Tester Comment
MCP.3	Universal Service Price Range – Low Value		
MCP.3.1	Quantity	30	
MCP.3.2	Denomination	USD	
MCP.4	Universal Service Price Range – High Value		
MCP.4.1	Quantity	120	
MCP.4.2	Denomination	USD	
MCP.5	Reason for Universal Service Cost Range	Depending on the number of biopsies submitted - max covered are 20	