HL7 v2.5 ORU^R01^ORU_R01 Message: Incorporation of Laboratory Results	
Test Case ID	LRI_4.1_2.1-NG_FRU
Juror ID	
Juror Name	
HIT System Tested	
Inspection Date/Time	
Inspection Settlement (Pass/Fail)	**Pass** ☐ **Fail** ☐
Reason Failed	
Juror Comments	

This Test Case-specific Juror Document provides a checklist for the Tester to use during testing for assessing the Health IT Module's ability to display and incorporate required data elements from the information received in the LRI message. Additional data from the message or from the Health IT Module are permitted to be displayed and incorporated by the Module. Grayed-out fields in the Juror Document indicate where no data for that data element were included in the LRI message for the given Test Case.

The format of the Display Verification section of this Juror Document is for ease-of-use by the Tester and does not indicate how the Health IT Module display must be designed.

Display Verification

Legend for Display Requirement

Data in **bold red** text: HIT Module must display exact version of stored data

Data in ***bold black italics*** text: HIT Module must display exact version of data received in the LRI message

Data in regular text: HIT Module may display equivalent version of stored data

Patient Information - Display Verification					
Patient Identifier	**Patient Name**	**DOB**	**Sex**	**Race**	**Tester Comment**
PATID1234	***William A Jones***	06/27/1961	M	**White**	
When a given patient has more than one Patient ID Number, the HIT module may display the ID Number that is most appropriate for the context (e.g., inpatient ID Number versus ambulatory ID Number.)					

Lab Results - Display Verification									
Test Performed:	**Stool Culture**								
Test Report Date:	09/26/2015 14:05:51								
Result Report Status	F								
Result Observation Name	**Result Value**	**UOM**	**Reference Range**	**Abnormal Flag**	**Status**	**Date/Time of Observation**	**End Date/Time of Observation**	**Date/Time of Analysis**	**Tester Comment**
Stool Culture	**Shiga toxin producing E. coli O157:H7 isolated**			A	F	09/23/2015 14:00:		09/25/2015 19:30:	
Note	Susceptibility testing for E.coli is not performed, because antibiotics should not be used to treat this infection. There is no evidence that treatment with antibiotics is helpful, and taking antibiotics may increase the risk of hemolytic-uremic syndrome (HUS). Antidiarrheal agents like Imodium may also increase that risk. Non-specific supportive therapy, including hydration, is important.								

Lab Results - Display Verification									
Test Performed:	**Stool Culture**								
Test Report Date:	09/26/2015 14:05:51								
Result Report Status	F								
Result Observation Name	**Result Value**	**UOM**	**Reference Range**	**Abnormal Flag**	**Status**	**Date/Time of Observation**	**End Date/Time of Observation**	**Date/Time of Analysis**	**Tester Comment**
Stool Culture	**Salmonella I, group O:4 isolated**			A	F	09/23/2015 14:00:		09/25/2015 19:30:	
Note	Salmonella gastrointestinal infections usually resolve in 5-7 days and most do not require treatment other than oral fluids. Persons with severe diarrhea may require rehydration with intravenous fluids. Antibiotic therapy can prolong the duration of excretion of non-typhoidal Salmonella and is recommended only for patients with severe illness (e.g., those with severe diarrhea, high fever, bloodstream infection, or who need hospitalization) or those at risk of severe disease or complications, including young infants, older adults (over 65 years old) and immunocompromised persons. Antibiotic resistance is increasing among some Salmonella bacteria; therefore, susceptibility testing can help guide appropriate therapy. Choices for antibiotic therapy for severe infections include fluoroquinolones, third-generation cephalosporins, and ampicillin (for susceptible infections).								
Ampicillin [Susceptibility] by Minimum inhibitory concentration (MIC)	***< 0.06***			S	F	09/23/2015 14:00:		09/26/2015 11:00:	
Gentamicin [Susceptibility] by Minimum inhibitory concentration (MIC)	***0.05***			S	F	09/23/2015 14:00:		09/26/2015 11:00:	
Ciprofloxacin [Susceptibility] by Minimum inhibitory concentration (MIC)	***0.05***			S	F	09/23/2015 14:00:		09/26/2015 11:00:	

Lab Results - Display Verification									
Test Performed:	**Stool Culture**								
Test Report Date:	09/26/2015 14:05:51								
Result Report Status	F								
Result Observation Name	**Result Value**	**UOM**	**Reference Range**	**Abnormal Flag**	**Status**	**Date/Time of Observation**	**End Date/Time of Observation**	**Date/Time of Analysis**	**Tester Comment**
Stool Culture	**Shigella flexneri isolated**			A	F	09/23/2015 14:00:		09/25/2015 19:30:	
Note	Antibiotic treatment is recommended for patients with severe disease, bloody diarrhea, or compromised immune systems. Resistance to traditional first-line drugs like ampicillin and trimethoprim-sulfamethoxazole is common, and resistance to some other antibiotics is increasing. With this in mind, antibiotic susceptibility testing can help guide appropriate therapy. When an ampicillin- or trimethroprim-sulfamethoxazole-resistant strain is isolated, choices for therapy include fluoroquinolones, ceftriaxone, and azithromycin.								
Ampicillin [Susceptibility] by Minimum inhibitory concentration (MIC)	***< 16***			I	F			09/26/2015 11:00:	

Performing Organization Information - Display Verification		
Data Element Name	**Data**	**Tester Comment**
Organization Name	**Century Hospital**	
Organization Address		
Street address	***2070 Test Park***	
Other designation		
City	***Los Angeles***	
State	***CA***	
Zip code	***90067***	

Performing Organization Medical Director Information - Display Verification		
Data Element Name	**Data**	**Tester Comment**
Medical Director Name		
Family Name		
Surname	Knowsalot	
Given Name	Phil	
Second and Further Given Names or Initials Thereof	J.	
Suffix (e.g., JR or III)		
Prefix (e.g., DR)		

Specimen Information - Display Verification		
Data Element Name	**Data**	**Tester Comment**
Specimen Type(Specimen Source)	**Stool**	
Specimen Collection Date/Time - Start	09/23/2015 14:00:	
Specimen Collection Date/Time - End		
Specimen Reject Reason		
Specimen Condition		

Order Information - Display Verification		
Data Element Name	**Data**	**Tester Comment**
Relevant Clinical Information		
Placer Order Number Entity ID	**ORD723222-4**	
Ordering Provider		
Family Name		
Surname	**Radon**	
Given Name	**Nicholas**	
Second and Further Given Names or Initials Thereof		
Suffix (e.g., JR or III)		
Prefix (e.g., DR)		
Results Copies To		
Family Name		
Surname	Hamlin	
Given Name	Pafford	
Second and Further Given Names or Initials Thereof		
Suffix (e.g., JR or III)		
Prefix (e.g., DR)		

Incorporate Verification

Legend for Store Requirement

S-EX : Store exact

S-TR-R : Translate and store translation (exact value can be re-created from translation any time)

S-EX-A : Store exact by association

S-RC : Process and re-create

S-EQ : Store equivalent

(See **"Instructions to Testers for Verification of Store Requirements"** at the end of this Juror Document for additional details.)

Patient Information Details- Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
PID-3	**Patient Identifier List**			
PID-3.1	ID Number	S-EX-A	PATID1234	
PID-3.4	**Assigning Property**			
PID-3.4.1	Namespace ID	S-EX-A	NIST MPI	
PID-3.4.2	Universal ID	S-EX-A		
PID-3.4.3	Universal ID Type	S-EX-A		
PID-3.5	Identifier Type Code	S-RC	MR	
PID-5	**Patient Name**			
PID-5.1	**Family Name**			
PID-5.1.1	Surname	S-EX-A	Jones	
PID-5.2	Given Name	S-EX-A	William	
PID-5.3	Second and Further Given Names or Initials Thereof	S-EX-A	A	
PID-5.4	Suffix (e.g., JR or III)	S-EX-A		
PID-5.7	Name Type Code	S-RC	L	
PID-7	**Date/Time of Birth**			
PID-7.1	Time	S-EQ	06/27/1961	
PID-8	Administrative Sex	S-TR-R	M	
PID-10	**Race**			
PID-10.1	Identifier	S-RC	2106-3	
PID-10.2	Text	S-RC	White	
PID-10.3	Name of Coding System	S-RC	HL70005	

Order Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
ORC-2/OBR-2	**Placer Order Number**			
ORC-2.1/OBR-2.1	Entity Identifier	S-EX-A	ORD723222-4	
ORC-2.2/OBR-2.2	Namespace ID	S-EX-A	NIST EHR	
ORC-2.3/OBR-2.3	Universal ID	S-EX-A		
ORC-2.4/OBR-2.4	Universal ID Type	S-EX-A		
ORC-3/OBR-3	**Filler Order Number**			
ORC-3.1/OBR-3.1	Entity Identifier	S-EX	R-783274-4	
ORC-3.2/OBR-3.2	Namespace ID	S-EX-A	NIST Lab Filler	
ORC-3.3/OBR-3.3	Universal ID	S-EX-A		
ORC-3.4/OBR-3.4	Universal ID Type	S-EX-A		
ORC-12/OBR-16	**Ordering Provider**			
ORC-12.1/OBR-16.1	ID Number	S-RC	5742200012	
ORC-12.2/OBR-16.2	**Family Name**			
ORC-12.2.1/OBR-16.2.1	Surname	S-RC	Radon	
ORC-12.3/OBR-16.3	Given Name	S-RC	Nicholas	
ORC-12.4/OBR-16.4	Second and Further Given Names or Initials Thereof	S-RC		
ORC-12.5/OBR-16.5	Suffix (e.g., JR or III)	S-RC		
ORC-12.6/OBR-16.6	Prefix (e.g., DR)	S-RC		
ORC-12.9/OBR-16.9	**Assigning Authority**			
ORC-12.9.1/OBR-16.9.1	Namespace ID	S-EX-A	NPI	
ORC-12.9.2/OBR-16.9.2	Universal ID	S-EX-A		
ORC-12.9.3/OBR-16.9.3	Universal ID Type	S-EX-A		
ORC-12.10/OBR-16.10	Name Type Code	S-RC	L	
ORC-12.13/OBR-16.13	Identifier Type Code	S-RC	NPI	

Performing Organization Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBX-23	**Performing Organization Name**			
OBX-23.1	Organization Name (Note 1)	S-TR-R	Century Hospital	
OBX-23.6	**Assigning Authority (Note 2)**			
OBX-23.6.1	Namespace ID	S-EX-A	CLIA	
OBX-23.6.2	Universal ID	S-EX-A		
OBX-23.6.3	Universal ID Type	S-EX-A		
OBX-23.7	Identifier Type Code	S-RC	XX	
OBX-23.10	Organization Identifier	S-TR-R	24D9871327	
OBX-24	**Performing Organization Address**			
OBX-24.1	**Street Address**			
OBX-24.1.1	Street or Mailing Address	S-EX-A	2070 Test Park	
OBX-24.2	Other Designation	S-EX-A		
OBX.24.3	City	S-EX-A	Los Angeles	
OBX-24.4	State or Province	S-EX-A	CA	
OBX-24.5	Zip or Postal Code	S-EX-A	90067	
OBX-24.6	Country	S-TR-R		
OBX-25	**Performing Organization Medical Director**			
OBX-25.1	ID Number	S-RC	5432178916	
OBX-25.2	**Family Name**			
OBX-25.2.1	Surname	S-TR-R	Knowsalot	
OBX-25.3	Given Name	S-TR-R	Phil	
OBX-25.4	Second and Further Given Names or Initials Thereof	S-TR-R	J.	
OBX-25.5	Suffix (e.g., JR or III)	S-TR-R		
OBX-25.6	Prefix (e.g., DR)	S-TR-R		
OBX-25.9	**Assigning Authority (Note 2)**			
OBX-25.9.1	Namespace ID	S-EX-A	NPI	
OBX-25.9.2	Universal ID	S-EX-A		
OBX-25.9.3	Universal ID Type	S-EX-A		
OBX-25.10	Name Type Code	S-RC	L	
OBX-25.13	Identifier Type Code	S-RC	NPI	
Note 1 - The HIT Module must store the Organization Name or be able to recreate it. If the HIT Module is able to demonstrate Organization Name: ID is always 1:1, then the HIT Module is permitted to store and recreate (S-TR-R).				
Note 2 - Determine requirement for support of 2nd component or 3rd and 4th component based on the EI or HD Profile				

Order Information (cont'd) Parent Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBR-4	**Universal Service Identifier (Note 1)**			
OBR-4.1	Identifier	S-TR-R	625-4	
OBR-4.2	Text	S-EX-A	Bacteria identified in Stool by Culture	
OBR-4.3	Name of the Coding System	S-RC	LN	
OBR-4.4	Alternate Identifier	S-TR-R	3456543	
OBR-4.5	Alternate Text	S-EX-A	CULTURE STOOL	
OBR-4.6	Name of Alternate Coding System	S-RC	99USL	
OBR-4.9	Original Text	S-EX	Stool Culture	
OBR-7/SPM-17.1	**Observation Date/Time**			
OBR-7.1/SPM-17.1.1	Time	S-EQ	09/23/2015 14:00:	
OBR-8/SPM-17.2	**Observation End Date/Time**			
OBR-8.1/SPM-17.2.1	Time	S-EQ		
OBR-13	**Relevant Clinical Information**			
OBR-13.1	Identifier	S-TR-R		
OBR-13.2	Text	S-EX-A		
OBR-13.3	Name of the Coding System	S-RC		
OBR-13.9	Original Text	S-EX		
OBR-22	**Results Rpt/Status Chng - Date/Time**			
OBR-22.1	Time	S-EQ	09/26/2015 14:05:51	
OBR-25	Result Status	S-TR-R	F	
OBR-28	**Result Copies To**			
OBR-28.1	ID Number	S-RC	10092000194	
OBR-28.2	**Family Name**			
OBR-28.2.1	Surname	S-EX-A	Hamlin	
OBR-28.3	Given Name	S-EX-A	Pafford	
OBR-28.4	Second and Further Given Names or Initials Thereof	S-EX-A		
OBR-28.5	Suffix (e.g., JR or III)	S-EX-A		
OBR-28.6	Prefix (e.g., DR)	S-EX-A		
OBR-28.9	**Assigning Authority**			
OBR-28.9.1	Namespace ID	S-EX-A	NPI	
OBR-28.9.2	Universal ID	S-EX-A		
OBR-28.9.3	Universal ID Type	S-EX-A		
OBR-28.10	Name Type Code	S-TR-R	L	
OBR-28.13	Identifier Type Code	S-RC	NPI	
Note 1 -Store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.				

Result Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBX-3	**Observation Identifier (Note 1)**			
OBX-3.1	Identifier	S-TR-R	625-4	
OBX-3.2	Text	S-EX-A	Bacteria identified in Stool by Culture	
OBX-3.3	Name of the Coding System	S-RC	LN	
OBX-3.4	Alternate Identifier	S-TR-R		
OBX-3.5	Alternate Text	S-EX-A		
OBX-3.6	Name of Alternate Coding System	S-RC		
OBX-3.9	Original Text	S-EX	Stool Culture	
OBX-5	**Observation Value**			
OBX-5.1	Identifier	S-TR-R	103429008	
OBX-5.2	Text	S-EX-A	Enterohemorrhagic Escherichia coli, serotype O157:H7	
OBX-5.3	Name of the Coding System	S-RC	SCT	
OBX-5.4	Alternate Identifier	S-TR-R		
OBX-5.5	Alternate Text	S-EX-A		
OBX-5.6	Name of Alternate Coding System	S-RC		
OBX-5.9	Original Text	S-EX	Shiga toxin producing E. coli O157:H7 isolated	
OBX-6	**Units (Note 2)**			
OBX-6.1	Identifier	S-TR-R		
OBX-6.2	Text	S-TR-R		
OBX-6.3	Name of the Coding System	S-RC		
OBX-6.4	Alternate Identifier	S-TR-R		
OBX-6.5	Alternate Text	S-TR-R		
OBX-6.6	Name of Alternate Coding System	S-RC		
OBX-6.9	Original Text	S-EX		
OBX-7	**Reference Range**	S-EX		
OBX-8	**Abnormal Flags**	S-TR-R	A	
OBX-11	**Observation Result Status**	S-TR-R	F	
OBX-14	**Date/Time of the Observation**			
OBX-14.1	Time	S-EQ	09/23/2015 14:00:	
OBX-19	**Date/Time of the Analysis**			
OBX-19.1	Time	S-EQ	09/25/2015 19:30:	

Note 1 - Store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.

Note 2 - If both UOM triplets are populated, receiver may choose to store the data received in either triplet; translations must result in equivalent UOM that do not require a change in the numeric result.

Note - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
NTE-3	Note	S-EX	Susceptibility testing for E.coli is not performed, because antibiotics should not be used to treat this infection. There is no evidence that treatment with antibiotics is helpful, and taking antibiotics may increase the risk of hemolytic-uremic syndrome (HUS). Antidiarrheal agents like Imodium may also increase that risk. Non-specific supportive therapy, including hydration, is important.	

PARENT - 2

Result Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBX-3	**Observation Identifier (Note 1)**			
OBX-3.1	Identifier	S-TR-R	625-4	
OBX-3.2	Text	S-EX-A	Bacteria identified in Stool by Culture	
OBX-3.3	Name of the Coding System	S-RC	LN	
OBX-3.4	Alternate Identifier	S-TR-R		
OBX-3.5	Alternate Text	S-EX-A		
OBX-3.6	Name of Alternate Coding System	S-RC		
OBX-3.9	Original Text	S-EX	Stool Culture	
OBX-5	**Observation Value**			
OBX-5.1	Identifier	S-TR-R	398567006	
OBX-5.2	Text	S-EX-A	Salmonella I, group O:4	
OBX-5.3	Name of the Coding System	S-RC	SCT	
OBX-5.4	Alternate Identifier	S-TR-R		
OBX-5.5	Alternate Text	S-EX-A		
OBX-5.6	Name of Alternate Coding System	S-RC		
OBX-5.9	Original Text	S-EX	Salmonella I, group O:4 isolated	
OBX-6	**Units (Note 2)**			
OBX-6.1	Identifier	S-TR-R		
OBX-6.2	Text	S-TR-R		
OBX-6.3	Name of the Coding System	S-RC		
OBX-6.4	Alternate Identifier	S-TR-R		
OBX-6.5	Alternate Text	S-TR-R		
OBX-6.6	Name of Alternate Coding System	S-RC		
OBX-6.9	Original Text	S-EX		
OBX-7	**Reference Range**	S-EX		
OBX-8	**Abnormal Flags**	S-TR-R	A	
OBX-11	**Observation Result Status**	S-TR-R	F	
OBX-14	**Date/Time of the Observation**			
OBX-14.1	Time	S-EQ	09/23/2015 14:00:	
OBX-19	**Date/Time of the Analysis**			
OBX-19.1	Time	S-EQ	09/25/2015 19:30:	

Note 1 - Store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.

Note 2 - If both UOM triplets are populated, receiver may choose to store the data received in either triplet; translations must result in equivalent UOM that do not require a change in the numeric result.

Note - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
NTE-3	Note	S-EX	Salmonella gastrointestinal infections usually resolve in 5-7 days and most do not require treatment other than oral fluids. Persons with severe diarrhea may require rehydration with intravenous fluids. Antibiotic therapy can prolong the duration of excretion of non-typhoidal Salmonella and is recommended only for patients with severe illness (e.g., those with severe diarrhea, high fever, bloodstream infection, or who need hospitalization) or those at risk of severe disease or complications, including young infants, older adults (over 65 years old) and immunocompromised persons. Antibiotic resistance is increasing among some Salmonella bacteria; therefore, susceptibility testing can help guide appropriate therapy. Choices for antibiotic therapy for severe infections include fluoroquinolones, third-generation cephalosporins, and ampicillin (for susceptible infections).	

Order Information (cont'd) Child Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
ORC-3/OBR-3	**Filler Order Number**			
ORC-3.1/OBR-3.1	Entity Identifier	S-EX	R-783274-6	
ORC-3.2/OBR-3.2	Namespace ID	S-EX-A	NIST Lab Filler	
ORC-3.3/OBR-3.3	Universal ID	S-EX-A		
ORC-3.4/OBR-3.4	Universal ID Type	S-EX-A		
OBR-4	**Universal Service Identifier (Note 1)**			
OBR-4.1	Identifier	S-TR-R	50545-3	
OBR-4.2	Text	S-EX-A	Bacterial susceptibility panel in Isolate by Minimum inhibitory concentration (MIC)	
OBR-4.3	Name of the Coding System	S-RC	LN	
OBR-4.4	Alternate Identifier	S-TR-R		
OBR-4.5	Alternate Text	S-EX-A		
OBR-4.6	Name of Alternate Coding System	S-RC		

Order Information (cont'd) Child Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBR-4.9	Original Text	S-EX	Bacteria susceptibility	
OBR-26	**Parent Result**			
OBR-26.1	**Parent Observation Identifier (Note 2)**			
OBR-26.1.1	Identifier	S-EX-A	625-4	
OBR-26.1.2	Text	S-EX-A	Bacteria identified in Stool by Culture	
OBR-26.1.3	Name of the Coding System	S-EX-A	LN	
OBR-26.1.4	Alternate Identifier	S-EX-A		
OBR-26.1.5	Alternate Text	S-EX-A		
OBR-26.1.6	Name of Alternate Coding System	S-EX-A		
OBR-26.2	**Parent Observation Sub-Identifier**			
OBR-26.2.2	Group	S-EX-A	2	
OBR-26.2.3	Sequence	S-EX-A	1	
OBR-26.2.4	Identifier	S-EX-A	Islt-2	
OBR-29	**Parent (Note 2)**			
OBR-29.1	**Placer Assigned Identifier**			
OBR-29.1.1	Entity Identifier	S-EX-A	ORD723222-4	
OBR-29.1.2	Namespace ID	S-EX-A	NIST EHR	
OBR-29.1.3	Universal ID	S-EX-A		
OBR-29.1.4	Universal ID Type	S-EX-A		
OBR-29.2	**Filler Assigned Identifier**			
OBR-29.2.1	Entity Identifier	S-EX-A	R-783274-4	
OBR-29.2.2	Namespace ID	S-EX-A	NIST Lab Filler	
OBR-29.2.3	Universal ID	S-EX-A		
OBR-29.2.4	Universal ID Type	S-EX-A		
Note 1 -Store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.				
Note 2 - The HIT Module must display the relationship to the parent, but is not required to store the actual received data when the association to a specific result is achieved, otherwise use S-EX to save the information.				

CHILD - 1

Result Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBX-3	**Observation Identifier (Note 1)**			
OBX-3.1	Identifier	S-TR-R	28-1	
OBX-3.2	Text	S-EX-A	Ampicillin [Susceptibility] by Minimum inhibitory concentration (MIC)	
OBX-3.3	Name of the Coding System	S-RC	LN	
OBX-3.4	Alternate Identifier	S-TR-R		
OBX-3.5	Alternate Text	S-EX-A		
OBX-3.6	Name of Alternate Coding System	S-RC		
OBX-3.9	Original Text	S-EX		
OBX-5	**Observation Value**			
OBX-5.1	Comparator	S-EX	<	
OBX-5.2	Num1	S-EQ	0.06	
OBX-5.3	Separator/Suffix	S-EX		
OBX-5.4	Num2	S-EQ		
OBX-6	**Units (Note 2)**			
OBX-6.1	Identifier	S-TR-R	ug/mL	
OBX-6.2	Text	S-TR-R		
OBX-6.3	Name of the Coding System	S-RC	UCUM	
OBX-6.4	Alternate Identifier	S-TR-R		
OBX-6.5	Alternate Text	S-TR-R		
OBX-6.6	Name of Alternate Coding System	S-RC		
OBX-6.9	Original Text	S-EX		
OBX-7	**Reference Range**	S-EX		
OBX-8	**Abnormal Flags**	S-TR-R	S	
OBX-11	**Observation Result Status**	S-TR-R	F	
OBX-14	**Date/Time of the Observation**			
OBX-14.1	Time	S-EQ	09/23/2015 14:00:	
OBX-19	**Date/Time of the Analysis**			
OBX-19.1	Time	S-EQ	09/26/2015 11:00:	
Note 1 - Store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.				
Note 2 - If both UOM triplets are populated, receiver may choose to store the data received in either triplet; translations must result in equivalent UOM that do not require a change in the numeric result.				

CHILD - 2

Result Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBX-3	**Observation Identifier (Note 1)**			
OBX-3.1	Identifier	S-TR-R	267-5	
OBX-3.2	Text	S-EX-A	Gentamicin [Susceptibility] by Minimum inhibitory concentration (MIC)	
OBX-3.3	Name of the Coding System	S-RC	LN	
OBX-3.4	Alternate Identifier	S-TR-R		
OBX-3.5	Alternate Text	S-EX-A		
OBX-3.6	Name of Alternate Coding System	S-RC		
OBX-3.9	Original Text	S-EX		
OBX-5	**Observation Value**			
OBX-5.1	Comparator	S-EX		
OBX-5.2	Num1	S-EQ	0.05	
OBX-5.3	Separator/Suffix	S-EX		
OBX-5.4	Num2	S-EQ		
OBX-6	**Units (Note 2)**			
OBX-6.1	Identifier	S-TR-R	ug/mL	
OBX-6.2	Text	S-TR-R		
OBX-6.3	Name of the Coding System	S-RC	UCUM	
OBX-6.4	Alternate Identifier	S-TR-R		
OBX-6.5	Alternate Text	S-TR-R		
OBX-6.6	Name of Alternate Coding System	S-RC		
OBX-6.9	Original Text	S-EX		
OBX-7	**Reference Range**	S-EX		
OBX-8	**Abnormal Flags**	S-TR-R	S	
OBX-11	**Observation Result Status**	S-TR-R	F	
OBX-14	**Date/Time of the Observation**			
OBX-14.1	Time	S-EQ	09/23/2015 14:00:	
OBX-19	**Date/Time of the Analysis**			
OBX-19.1	Time	S-EQ	09/26/2015 11:00:	
Note 1 - Store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.				
Note 2 - If both UOM triplets are populated, receiver may choose to store the data received in either triplet; translations must result in equivalent UOM that do not require a change in the numeric result.				

Result Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBX-3	**Observation Identifier (Note 1)**			
OBX-3.1	Identifier	S-TR-R	185-9	
OBX-3.2	Text	S-EX-A	Ciprofloxacin [Susceptibility] by Minimum inhibitory concentration (MIC)	
OBX-3.3	Name of the Coding System	S-RC	LN	
OBX-3.4	Alternate Identifier	S-TR-R		
OBX-3.5	Alternate Text	S-EX-A		
OBX-3.6	Name of Alternate Coding System	S-RC		
OBX-3.9	Original Text	S-EX		
OBX-5	**Observation Value**			
OBX-5.1	Comparator	S-EX		
OBX-5.2	Num1	S-EQ	0.05	
OBX-5.3	Separator/Suffix	S-EX		
OBX-5.4	Num2	S-EQ		
OBX-6	**Units (Note 2)**			
OBX-6.1	Identifier	S-TR-R	ug/mL	
OBX-6.2	Text	S-TR-R		
OBX-6.3	Name of the Coding System	S-RC	UCUM	
OBX-6.4	Alternate Identifier	S-TR-R		
OBX-6.5	Alternate Text	S-TR-R		
OBX-6.6	Name of Alternate Coding System	S-RC		
OBX-6.9	Original Text	S-EX		
OBX-7	**Reference Range**	S-EX		
OBX-8	**Abnormal Flags**	S-TR-R	S	
OBX-11	**Observation Result Status**	S-TR-R	F	
OBX-14	**Date/Time of the Observation**			
OBX-14.1	Time	S-EQ	09/23/2015 14:00:	
OBX-19	**Date/Time of the Analysis**			
OBX-19.1	Time	S-EQ	09/26/2015 11:00:	
Note 1 - Store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.				
Note 2 - If both UOM triplets are populated, receiver may choose to store the data received in either triplet; translations must result in equivalent UOM that do not require a change in the numeric result.				

PARENT - 3

Result Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBX-3	**Observation Identifier (Note 1)**			
OBX-3.1	Identifier	S-TR-R	625-4	
OBX-3.2	Text	S-EX-A	Bacteria identified in Stool by Culture	
OBX-3.3	Name of the Coding System	S-RC	LN	
OBX-3.4	Alternate Identifier	S-TR-R		
OBX-3.5	Alternate Text	S-EX-A		
OBX-3.6	Name of Alternate Coding System	S-RC		
OBX-3.9	Original Text	S-EX	Stool Culture	
OBX-5	**Observation Value**			
OBX-5.1	Identifier	S-TR-R	85729005	
OBX-5.2	Text	S-EX-A	Shigella flexneri	
OBX-5.3	Name of the Coding System	S-RC	SCT	
OBX-5.4	Alternate Identifier	S-TR-R		
OBX-5.5	Alternate Text	S-EX-A		
OBX-5.6	Name of Alternate Coding System	S-RC		
OBX-5.9	Original Text	S-EX	Shigella flexneri isolated	
OBX-6	**Units (Note 2)**			
OBX-6.1	Identifier	S-TR-R		
OBX-6.2	Text	S-TR-R		
OBX-6.3	Name of the Coding System	S-RC		
OBX-6.4	Alternate Identifier	S-TR-R		
OBX-6.5	Alternate Text	S-TR-R		
OBX-6.6	Name of Alternate Coding System	S-RC		
OBX-6.9	Original Text	S-EX		
OBX-7	**Reference Range**	S-EX		
OBX-8	**Abnormal Flags**	S-TR-R	A	
OBX-11	**Observation Result Status**	S-TR-R	F	
OBX-14	**Date/Time of the Observation**			
OBX-14.1	Time	S-EQ	09/23/2015 14:00:	
OBX-19	**Date/Time of the Analysis**			
OBX-19.1	Time	S-EQ	09/25/2015 19:30:	

Note 1 - Store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.

Note 2 - If both UOM triplets are populated, receiver may choose to store the data received in either triplet; translations must result in equivalent UOM that do not require a change in the numeric result.

Note - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
NTE-3	Note	S-EX	Antibiotic treatment is recommended for patients with severe disease, bloody diarrhea, or compromised immune systems. Resistance to traditional first-line drugs like ampicillin and trimethoprim-sulfamethoxazole is common, and resistance to some other antibiotics is increasing. With this in mind, antibiotic susceptibility testing can help guide appropriate therapy. When an ampicillin- or trimethroprim-sulfamethoxazole-resistant strain is isolated, choices for therapy include fluoroquinolones, ceftriaxone, and azithromycin.	

Order Information (cont'd) Child Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
ORC-3/OBR-3	**Filler Order Number**			
ORC-3.1/OBR-3.1	Entity Identifier	S-EX	R-783274-7	
ORC-3.2/OBR-3.2	Namespace ID	S-EX-A	NIST Lab Filler	
ORC-3.3/OBR-3.3	Universal ID	S-EX-A		
ORC-3.4/OBR-3.4	Universal ID Type	S-EX-A		
OBR-4	**Universal Service Identifier (Note 1)**			
OBR-4.1	Identifier	S-TR-R	50545-3	
OBR-4.2	Text	S-EX-A	Bacterial susceptibility panel in Isolate by Minimum inhibitory concentration (MIC)	
OBR-4.3	Name of the Coding System	S-RC	LN	
OBR-4.4	Alternate Identifier	S-TR-R		
OBR-4.5	Alternate Text	S-EX-A		
OBR-4.6	Name of Alternate Coding System	S-RC		
OBR-4.9	Original Text	S-EX	Bacteria susceptibility	
OBR-26	**Parent Result**			
OBR-26.1	**Parent Observation Identifier (Note 2)**			
OBR-26.1.1	Identifier	S-EX-A	625-4	
OBR-26.1.2	Text	S-EX-A	Bacteria identified in Stool by Culture	
OBR-26.1.3	Name of the Coding System	S-EX-A	LN	
OBR-26.1.4	Alternate Identifier	S-EX-A		

Order Information (cont'd) Child Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBR-26.1.5	Alternate Text	S-EX-A		
OBR-26.1.6	Name of Alternate Coding System	S-EX-A		
OBR-26.2	**Parent Observation Sub-Identifier**			
OBR-26.2.2	Group	S-EX-A	3	
OBR-26.2.3	Sequence	S-EX-A	1	
OBR-26.2.4	Identifier	S-EX-A	Islt-3	
OBR-29	**Parent (Note 2)**			
OBR-29.1	**Placer Assigned Identifier**			
OBR-29.1.1	Entity Identifier	S-EX-A	ORD723222-4	
OBR-29.1.2	Namespace ID	S-EX-A	NIST EHR	
OBR-29.1.3	Universal ID	S-EX-A		
OBR-29.1.4	Universal ID Type	S-EX-A		
OBR-29.2	**Filler Assigned Identifier**			
OBR-29.2.1	Entity Identifier	S-EX-A	R-783274-4	
OBR-29.2.2	Namespace ID	S-EX-A	NIST Lab Filler	
OBR-29.2.3	Universal ID	S-EX-A		
OBR-29.2.4	Universal ID Type	S-EX-A		
Note 1 -Store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.				
Note 2 - The HIT Module must display the relationship to the parent, but is not required to store the actual received data when the association to a specific result is achieved, otherwise use S-EX to save the information.				

CHILD - 1

Result Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
OBX-3	**Observation Identifier (Note 1)**			
OBX-3.1	Identifier	S-TR-R	28-1	
OBX-3.2	Text	S-EX-A	Ampicillin [Susceptibility] by Minimum inhibitory concentration (MIC)	
OBX-3.3	Name of the Coding System	S-RC	LN	
OBX-3.4	Alternate Identifier	S-TR-R		
OBX-3.5	Alternate Text	S-EX-A		
OBX-3.6	Name of Alternate Coding System	S-RC		
OBX-3.9	Original Text	S-EX		
OBX-5	**Observation Value**			
OBX-5.1	Comparator	S-EX	<	
OBX-5.2	Num1	S-EQ	16	
OBX-5.3	Separator/Suffix	S-EX		
OBX-5.4	Num2	S-EQ		
OBX-6	**Units (Note 2)**			
OBX-6.1	Identifier	S-TR-R	ug/mL	
OBX-6.2	Text	S-TR-R		
OBX-6.3	Name of the Coding System	S-RC	UCUM	
OBX-6.4	Alternate Identifier	S-TR-R		
OBX-6.5	Alternate Text	S-TR-R		
OBX-6.6	Name of Alternate Coding System	S-RC		
OBX-6.9	Original Text	S-EX		
OBX-7	**Reference Range**	S-EX		
OBX-8	**Abnormal Flags**	S-TR-R	I	
OBX-11	**Observation Result Status**	S-TR-R	F	
OBX-14	**Date/Time of the Observation**			
OBX-14.1	Time	S-EQ	09/23/2015 14:00:	
OBX-19	**Date/Time of the Analysis**			
OBX-19.1	Time	S-EQ	09/26/2015 11:00:	
Note 1 - Store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.				
Note 2 - If both UOM triplets are populated, receiver may choose to store the data received in either triplet; translations must result in equivalent UOM that do not require a change in the numeric result.				

Specimen Information - Incorporate Verification				
Location	**Data Element Name**	**Store Requirement**	**Data**	**Tester Comment**
SPM-4	**Specimen Type (Note 1)**			
SPM-4.1	Identifier	S-TR-R	119339001	
SPM-4.2	Text	S-EX-A	Stool specimen	
SPM-4.3	Name of the Coding System	S-RC	SCT	
SPM-4.4	Alternate Identifier	S-TR-R		
SPM-4.5	Alternate Text	S-EX-A		
SPM-4.6	Name of Alternate Coding System	S-RC		
SPM-4.9	Original Text	S-EX	Stool	

Note 1 - The HIT must store the Identifier and the Text for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If Original Text field is populated, MUST store the exact data received.

Instructions to Testers for Verification of Store Requirements

Note: The HIT Module being tested is always allowed to incorporate/store the exact data received in the LRI message even if a given Store Requirement does not explicitly state that the HIT Module is permitted to do so.

Store Requirement	Definition	Instructions for Verification of Requirement During Conformance Testing
S-EX	Store Exact	The HIT Module being tested must be designed to incorporate/store only the exact data received in the LRI message. • Tester must verify that the HIT Module being tested incorporates/stores **in the patient's laboratory result record only the exact data received** in the LRI message, and that the HIT Module does not just store an equivalent of that exact data or just a pointer to the exact data.
S-EX-A	Store exact by association	The HIT Module being tested must be designed (1) to incorporate/store the exact data received in the LRI message OR (2) to use a pointer to a location (e.g., file/table in or accessible to the HIT Module) where the exact data can be obtained. • Tester must verify that the HIT Module being tested incorporates/stores **in the patient's laboratory result record the exact data received** in the LRI message OR that the HIT Module incorporates/stores **in the patient's laboratory result record a pointer to the exact data received** in the LRI message. Example: Placer Number; the HIT-originated Placer Number received in the LRI message may be incorporated/stored using a pointer rather than being stored redundantly in the patient's lab result record.
S-EQ	Store equivalent	The HIT Module being tested must be designed to transform the exact data received in the LRI message to an equivalent format and then incorporate/store the equivalent format. • Tester must verify that the HIT Module being tested transforms the exact data received in the LRI message to an equivalent format and incorporates/stores **the equivalent format in the patient's laboratory result record.**
S-TR-R	Translate and store translation (exact value can be re-created from translation any time)	The HIT Module being tested must be designed to transform the exact data received in the LRI message to an equivalent value and then incorporate/store the equivalent value. • Tester must verify that the HIT Module being tested incorporates/stores **in the patient's laboratory result record the equivalent value.** • Tester must also verify that the HIT Module is able to re-create from this equivalent value the exact data received in the LRI message.
S-RC	Process and re-create	The HIT Module being tested must be designed to process and incorporate/store in an "abstract-able manner" (e.g., using the HIT Module's data model) the exact data received in the LRI message and to re-create the exact data (e.g., from the HIT Module's data model). • Tester must verify that the HIT Module being tested processes and abstractly incorporates/stores **in the patient's laboratory result record the exact data received** in the LRI message. • Tester also must verify that the HIT Module is able to re-create the exact data received in the LRI message by abstracting the data (e.g., from the HIT Module's data model). Example: Identifier Type Code; the HIT Module uses a separate file/table to store Social Security Numbers versus internal Medical Record Numbers, and does not need to retain the Identifier Type Code