### Patient Information

Element	Data
Name	Coded Pseudo-Name to ensure anonymity
Sex	Male
Race1	White
Race2	Asian
Race3	Native Hawaiian or Other Pacific Islander
Ethnic Group	Not Hispanic or Latino
City	Jamaica Plain
State	Massachusetts
Zip Code	02130
Country	UNITED STATES
County/Parish Code	25025
Patient Death Date and Time	
Patient Death Indicator	

# -Visit Information-

Element	Data
Admit or Encounter Reason	Fever, cough
Admit Date and Time	02/20/2010 8:30 AM
Patient Class	Outpatient
Discharge Disposition	Discharged to home or self care (routine discharge)
Discharge Date/Time	02/20/2010 5:00 PM
Diagnosis Type	Final
Diagnosis	Influenza with pneumonia

### Observations[\*]

# **Observation Results Information - 1**

Element	Data
Observation Identifier	Facility / Visit Type
Observation Value	Urgent Care
Units	
Observation Results Status	Final results; Can only be changed with a corrected result.

Element	Data
Observation Identifier	Age Time Patient Reported
Observation Value	6
Units	age
Observation Results Status	Final results; Can only be changed with a corrected result.

### **Observation Results Information - 3**

Element	Data	
Observation Identifier	Chief complaint:Find:Pt:Patient:Nom:Reporte	ed
Observation Value	Fever,cough	
Units		
Observation Results Status	Final results; Can only be changed with a corrected result.	

### **Observation Results Information - 4**

Element	Data
Observation Identifier	Height
Observation Value	27
Units	inch
Observation Results Status	Final results; Can only be changed with a corrected result.

# **Observation Results Information - 5**

Element	Data
Observation Identifier	Weight
Observation Value	17
Units	pound
Observation Results Status	Final results; Can only be changed with a corrected result.

Element	Data
Observation Identifier	Tobacco Smoking Status
Observation Value	Never smoker
Units	
Observation Results Status	Final results; Can only be changed with a corrected result.

Element	Data
Name	Coded Pseudo-Name to ensure anonymity

Sex	Male
Race1	White
Race2	Asian
Race3	Native Hawaiian or Other Pacific Islander
Ethnic Group	Not Hispanic or Latino
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State	Massachusetts
Zip Code	02130
Country	UNITED STATES
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Patient Death Date and Time	
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Element	Data
Admit or Encounter Reason	Fever, cough
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Discharge Date/Time	02/20/2010 5:00 PM
Diagnosis Type	Final
Diagnosis	Influenza with pneumonia

#### **Observation Results Information - 1**

Element	Data
Observation Identifier	Facility / Visit Type
Observation Value	Urgent Care
Units	
Observation Results Status	Final results; Can only be changed with a corrected result.

#### **Observation Results Information - 2**

Element	Data
Observation Identifier	Age Time Patient Reported
Observation Value	6
Units	age
Observation Results Status	Final results; Can only be changed with a corrected result.

Element	Data	

Observation Identifier	Chief complaint:Find:Pt:Patient:Nom:Reported
Observation Value	Fever,cough
Units	
Observation Results Status	Final results; Can only be changed with a corrected result.

#### **Observation Results Information - 4**

Element	Data
Observation Identifier	Height
Observation Value	27
Units	inch
Observation Results Status	Final results; Can only be changed with a corrected result.

#### **Observation Results Information - 5**

Element	Data
Observation Identifier	Weight
Observation Value	17
Units	pound
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