| HL7 v2.5 ORU^R01^ORU_R01 Message: Incorporation of Laboratory Results | |
|---|---|
| **Test Case ID** | LRI_1.0_2.1-NG |
| **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*** | 06/15/1961 | M | **White; American Indian or Alaska Native** | |
| 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:** | **Erythrocyte sedimentation rate** |
| **Test Report Date:** | 09/26/2015 14:05:51 |
| **Result Report Status** | C |
| **Note:** | Patient is extremely anxious about needles used for drawing blood.<br>If patient is overly frightened, nervous, or anxious please reschedule blood draw. |
| **Note:** | Patient is allergic to latex |

| 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 |
|---|---|---|---|---|---|---|---|---|---|
| **Erythrocyte sedimentation rate** | ***20*** | ***millimeter per hour*** | **0 to 17** | H | C | 09/25/2015 14:00: | | 09/26/2015 13:05:50 | |
| Note | Specimen re-analyzed per request of ordering provider. | | | | | | | | |

| 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)** | III | |
| **Prefix (e.g., DR)** | Dr. | |

| Specimen Information - Display Verification | | |
|---|---|---|
| **Data Element Name** | **Data** | **Tester Comment** |
| **Specimen Type(Specimen Source)** | **Blood Specimen** | |
| **Specimen Collection Date/Time - Start** | 09/25/2015 14:00: | |
| **Specimen Collection Date/Time - End** | | |
| **Specimen Reject Reason** | | |
| **Specimen Condition** | **Cool** | |

| Order Information - Display Verification | | |
|---|---|---|
| **Data Element Name** | **Data** | **Tester Comment** |
| **Relevant Clinical Information** | | |
| **Placer Order Number Entity ID** | **ORD723222** | |
| **Ordering Provider** | | |
| **Family Name** | | |
| **Surname** | **Radon** | |
| **Given Name** | **Nicholas** | |
| **Second and Further Given Names or Initials Thereof** | **M** | |
| **Suffix (e.g., JR or III)** | **JR** | |
| **Prefix (e.g., DR)** | **DR** | |
| **Results Copies To** | | |
| **Family Name** | | |
| **Surname** | Hamlin | |
| **Given Name** | Pafford | |
| **Second and Further Given Names or Initials Thereof** | M | |
| **Suffix (e.g., JR or III)** | Sr. | |
| **Prefix (e.g., DR)** | Dr. | |
| **Timing/Quantity Information** | | |
| **Start Date/Time** | 09/25/2015 14:00: | |
| **End Date/Time** | 09/26/2015 14:00: | |
| **Priority** | Routine | |

## 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 | 06/15/1961 | |
| 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 | |
| **PID-10** | **Race** | | | |
| PID-10.1 | Identifier | S-RC | 1002-5 | |
| PID-10.2 | Text | S-RC | American Indian or Alaska Native | |
| 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 | |
| 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 | |
| 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 | M | |
| ORC-12.5/OBR-16.5 | Suffix (e.g., JR or III) | S-RC | JR | |
| ORC-12.6/OBR-16.6 | Prefix (e.g., DR) | S-RC | DR | |
| **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 | |

| Note- Incorporate Verification | | | | |
|---|---|---|---|---|
| **Location** | **Data Element Name** | **Store Requirement** | **Data** | **Tester Comment** |
| NTE-3 | Note | S-EX | Patient is extremely anxious about needles used for drawing blood.<br>If patient is overly frightened, nervous, or anxious please reschedule blood draw. | |
| NTE-3 | Note | S-EX | Patient is allergic to latex | |

| 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 | USA | |
| **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 | III | |
| 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) - 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 | 30341-2 | |
| OBR-4.2 | Text | S-EX-A | Erythrocyte sedimentation rate | |
| OBR-4.3 | Name of the Coding System | S-RC | LN | |
| OBR-4.4 | Alternate Identifier | S-TR-R | 500 | |
| OBR-4.5 | Alternate Text | S-EX-A | Erythrocyte sedimentation rate | |
| OBR-4.6 | Name of Alternate Coding System | S-RC | 99USL | |
| OBR-4.9 | Original Text | S-EX | Erythrocyte sedimentation rate | |
| **OBR-7/SPM-17.1** | **Observation Date/Time** | | | |
| OBR-7.1/SPM-17.1.1 | Time | S-EQ | 09/25/2015 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 | C | |
| **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 | M | |
| OBR-28.5 | Suffix (e.g., JR or III) | S-EX-A | Sr. | |
| OBR-28.6 | Prefix (e.g., DR) | S-EX-A | Dr. | |
| **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 | 30341-2 | |
| OBX-3.2 | Text | S-EX-A | Erythrocyte sedimentation rate | |
| OBX-3.3 | Name of the Coding System | S-RC | LN | |
| OBX-3.4 | Alternate Identifier | S-TR-R | 815117 | |
| OBX-3.5 | Alternate Text | S-EX-A | ESR | |
| OBX-3.6 | Name of Alternate Coding System | S-RC | 99USL | |
| OBX-3.9 | Original Text | S-EX | Erythrocyte sedimentation rate | |
| OBX-5 | Observation Value | S-EQ | 20 | |
| **OBX-6** | **Units (Note 2)** | | | |
| OBX-6.1 | Identifier | S-TR-R | mm/h | |
| OBX-6.2 | Text | S-TR-R | millimeter per hour | |
| 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 | 0 to 17 | |
| **OBX-8** | **Abnormal Flags** | S-TR-R | H | |
| **OBX-11** | **Observation Result Status** | S-TR-R | C | |
| **OBX-14** | **Date/Time of the Observation** | | | |
| OBX-14.1 | Time | S-EQ | 09/25/2015 14:00: | |
| **OBX-19** | **Date/Time of the Analysis** | | | |
| OBX-19.1 | Time | S-EQ | 09/26/2015 13:05:50 | |

**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 | Specimen re-analyzed per request of ordering provider. | |

| 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 | 119297000 | |
| SPM-4.2 | Text | S-EX-A | BLD | |
| SPM-4.3 | Name of the Coding System | S-RC | SCT | |
| SPM-4.4 | Alternate Identifier | S-TR-R | BldSpc | |
| SPM-4.5 | Alternate Text | S-EX-A | Blood | |
| SPM-4.6 | Name of Alternate Coding System | S-RC | 99USL | |
| SPM-4.9 | Original Text | S-EX | Blood Specimen | |
| **SPM-24** | **Specimen Condition (Note 1)** | | | |
| SPM-24.1 | Identifier | S-TR-R | COOL | |
| SPM-24.2 | Text | S-EX-A | Cool | |
| SPM-24.3 | Name of the Coding System | S-RC | HL70493 | |
| SPM-24.4 | Alternate Identifier | S-TR-R | CL | |
| SPM-24.5 | Alternate Text | S-EX-A | Cool | |
| SPM-24.6 | Name of Alternate Coding System | S-RC | 99USL | |
| SPM-24.9 | Original Text | S-EX | Cool | |
| **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. | | | | |

| Timing/Quantity Information- Incorporate Verification | | | | |
|---|---|---|---|---|
| **Location** | **Data Element Name** | **Store Requirement** | **Data** | **Tester Comment** |
| **TQ1-7** | **Start Date/Time** | | | |
| TQ1-7.1 | Time | S-EQ | 09/25/2015 14:00: | |
| **TQ1-8** | **End Date/Time** | | | |
| TQ1-8.1 | Time | S-EQ | 09/26/2015 14:00: | |
| **TQ1-9** | **Priority** | | | |
| TQ1-9.1 | Identifier | S-TR-R | R | |
| TQ1-9.2 | Text | S-EX-A | Routine | |
| TQ1-9.3 | Name of Coding System | S-RC | HL70485 | |
| TQ1-9.9 | Original Text | S-EX | Routine | |

## 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.<br>• 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.<br>• 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.<br>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.<br>• 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.<br>• Tester must verify that the HIT Module being tested incorporates/stores **in the patient's laboratory result record the equivalent value.**<br>• 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).<br>• 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.<br>• 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).<br>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 |