

| HL7 v2.5 ORU^R01^ORU_R01 Message: Incorporation of Laboratory Results | | |
|---|--------------------------|--------------------------|
| Test Case ID | LRI_4.1_4.1-NG_FRU | |
| Juror ID | | |
| Juror Name | | |
| HIT System Tested | | |
| Inspection Date/Time | | |
| Inspection Settlement (Pass/Fail) | Pass | Fail |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 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 |
| <i>PATID1234</i> | <i>William A Jones</i> | 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 trimethoprim-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: | |
| Trimethoprim+Sulfamethoxazole [Susceptibility] by Minimum inhibitory concentration (MIC) | 2 / 38 | | | S | B | | | 09/27/2015 11:20: | |
| Ciprofloxacin [Susceptibility] by Minimum inhibitory concentration (MIC) | 0.05 | | | S | B | | | 09/27/2015 11:20: | |

| 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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 | IsIt-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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 | 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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 | 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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 trimethoprim-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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 | I19339001 | |
| 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 <u>Identifier</u> and the <u>Text</u> for each populated triplet using the S-EX-A, S-TR-R, or S-EX store requirement as indicated. If <u>Original Text</u> 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 | <p>The HIT Module being tested must be designed to incorporate/store only the exact data received in the LRI message.</p> <ul style="list-style-type: none"> 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 | <p>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.</p> <ul style="list-style-type: none"> 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. <p>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.</p> |
| S-EQ | Store equivalent | <p>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.</p> <ul style="list-style-type: none"> 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) | <p>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.</p> <ul style="list-style-type: none"> 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 | <p>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).</p> <ul style="list-style-type: none"> 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). <p>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</p> |