

# Technical HL7 Conformance Profile

# **ENTERPRISE IMAGING**

# **INBOUND ADT\_A31**

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## Message Profile

### About this Conformance

#### Remarks:

Segments present in the message structure, but marked as -not supported- are allowed to be present in the message, but are not processed. The same counts for fields, components, subcomponents marked as not supported.

### Conformance parameters

#### Message Profile

- HL7 Version: 2.3, 2.3.1, 2.4, 2.5
- Profile Type: Constrainable
- Topics: confsig-Agfa Healthcare-2.3, 2.3.1, 2.4, 2.5-profile-accNE\_accAL-Deferred

#### Encoding Method

ER7

## Interaction 1

### Dynamic Definition

- Accept Acknowledgement: NE
- Application Acknowledgement: AL
- Acknowledgement Mode: Deferred

### Static Definition

- Event Description: ADT/ACK - Update person information
- Message Type: ADT
- Trigger Event: A31
- Message Structure: ADT\_A05
- Topics: confsig-Agfa Healthcare-2.3, 2.3.1, 2.4, 2.5-static-ADT-A31-null-ADT\_A05-V1.0-DRAFT-Receiver

### Message structure

MSH EVN PID [PD1] [PV1] {[OBX]} {[AL1]}

### MSH - Message Header

- Usage: Required
- Cardinality:1..1

| Seq. | Name                  | Opt. | Card. | Type   | Table   | Contents     |
|------|-----------------------|------|-------|--------|---------|--------------|
| 1    | Field Separator       | R    | 1..1  | ST     |         |              |
| 2    | Encoding Characters   | R    | 1..1  | ST     |         |              |
| 3    | Sending Application   | O    | 0..1  | HD     | HL70361 |              |
| 3.1  | namespace ID          | O    | 0..   | IS     | HL70363 |              |
| 4    | Sending Facility      | O    | 0..1  | HD     | HL70362 |              |
| 4.1  | namespace ID          | O    | 0..   | IS     | HL70363 |              |
| 5    | Receiving Application | O    | 0..1  | HD     | HL70361 |              |
| 5.1  | namespace ID          | O    | 0..   | IS     | HL70363 |              |
| 6    | Receiving Facility    | O    | 0..1  | HD     | HL70362 |              |
| 6.1  | namespace ID          | O    | 0..   | IS     | HL70363 |              |
| 7    | Date/Time Of Message  | O    | 0..1  | TS     |         |              |
| 7.1  | Date/Time             | O    | 0..   | NM     |         |              |
| 9    | Message Type          | R    | 1..1  | CM_MSG | HL70076 |              |
| 9.1  | message type          | R    | 1..1  | ID     | HL70076 | e.g. ADT     |
| 9.2  | trigger event         | R    | 1..1  | ID     | HL70003 | e.g. A31     |
| 9.3  | message structure     | O    | 0..   | ID     | HL70354 | e.g. ADT_A05 |
| 10   | Message Control ID    | R    | 1..1  | ST     |         |              |
| 11   | Processing ID         | O    | 0..1  | PT     |         |              |
| 11.1 | processing ID         | O    | 0..   | ID     | HL70103 |              |
| 12   | Version ID            | R    | 1..1  | VID    | HL70104 |              |
| 12.1 | version ID            | R    | 1..1  | ID     | HL70104 | e.g. 2.4     |

| Seq. | Name          | Opt. | Card. | Type | Table   | Contents |
|------|---------------|------|-------|------|---------|----------|
| 18   | Character Set | O    | 0..1  | ID   | HL70211 |          |

### 1. Field Separator

### 2. Encoding Characters

### 3. Sending Application

### 4. Sending Facility

### 5. Receiving Application

### 6. Receiving Facility

### 7. Date/Time Of Message

#### 7.1. Date/Time

YYYYMMDD[HHMM[SS]][+ZZZZ]

If timezone information is present, it is taken into account for all date/time fields in the message.

If timezone information is present also in other datetime fields, it overrules the timezone information in this field

### 9. Message Type

### 10. Message Control ID

### 11. Processing ID

### 12. Version ID

Highest supported version 2.5

### 18. Character Set

## EVN - Event Type

- Usage: Required

- Cardinality:1..1

| Seq. | Name               | Opt. | Card. | Type | Table | Contents                 |
|------|--------------------|------|-------|------|-------|--------------------------|
| 2    | Recorded Date/Time | R    | 1..1  | TS   |       |                          |
| 2.1  | Date/Time          | R    | 1..1  | NM   |       | e.g. 20040328134602+0600 |

### 2. Recorded Date/Time

YYYYMMDDHHMMSS or ""

#### 2.1. Date/Time

YYYYMMDD[HHHMM[SS]][+ZZZ Z]

If timezone information is present it overrules the timezone information if available in MSH-7

## **PID - Patient identification**

- Usage: Required
- Cardinality:1..1

| Seq.   | Name                                               | Opt. | Card. | Type | Table   | Contents |
|--------|----------------------------------------------------|------|-------|------|---------|----------|
| 3      | Patient Identifier List                            | R    | 1..*  | CX   |         |          |
| 3.1    | ID                                                 | R    | 1..1  | ST   |         |          |
| 3.4    | assigning authority                                | O    | 0..   | HD   |         |          |
| 3.4.1  | namespace ID                                       | O    | 0..   | IS   | HL70363 |          |
| 3.4.2  | universal ID                                       | O    | 0..   | ST   |         |          |
| 3.4.3  | universal ID type                                  | O    | 0..   | ID   | HL70301 |          |
| 3.5    | identifier type code (ID)                          | O    | 0..   | ID   | HL70203 |          |
| 3.6    | assigning facility                                 | O    | 0..   | HD   |         |          |
| 3.6.1  | namespace ID                                       | O    | 0..   | IS   | HL70363 |          |
| 3.7    | effective date (DT)                                | O    | 0..   | DT   |         |          |
| 3.8    | expiration date                                    | O    | 0..   | DT   |         |          |
| 5      | Patient Name                                       | R    | 1..*  | XPN  |         |          |
| 5.1    | family name                                        | R    | 1..1  | FN   |         |          |
| 5.1.1  | surname                                            | R    | 1..1  | ST   |         |          |
| 5.1.2  | own surname prefix                                 | O    | 0..   | ST   |         |          |
| 5.1.3  | own surname                                        | O    | 0..   | ST   |         |          |
| 5.2    | given name                                         | O    | 0..   | ST   |         |          |
| 5.3    | second and further given names or initials thereof | O    | 0..   | ST   |         |          |
| 5.4    | suffix (e.g., JR or III)                           | O    | 0..   | ST   |         |          |
| 5.5    | prefix (e.g., DR)                                  | O    | 0..   | ST   |         |          |
| 5.7    | name type code                                     | O    | 0..   | ID   | HL70200 |          |
| 5.8    | Name Representation code                           | O    | 0..   | ID   | HL70465 |          |
| 7      | Date/Time Of Birth                                 | O    | 0..1  | TS   |         |          |
| 7.1    | Date/Time                                          | O    | 0..   | NM   |         |          |
| 8      | Administrative Sex                                 | O    | 0..1  | IS   | HL70001 |          |
| 11     | Patient Address                                    | O    | 0..*  | XAD  |         |          |
| 11.1   | street address (SAD)                               | O    | 0..   | SAD  |         |          |
| 11.1.1 | street or mailing address                          | O    | 0..   | ST   |         |          |
| 11.1.2 | street name                                        | O    | 0..   | ST   |         |          |
| 11.1.3 | dwelling number                                    | O    | 0..   | ST   |         |          |
| 11.2   | other designation                                  | O    | 0..   | ST   |         |          |
| 11.3   | city                                               | O    | 0..   | ST   |         |          |
| 11.4   | state or province                                  | O    | 0..   | ST   |         |          |
| 11.5   | zip or postal code                                 | O    | 0..   | ST   |         |          |

| Seq. | Name                                  | Opt. | Card. | Type | Table   | Contents |
|------|---------------------------------------|------|-------|------|---------|----------|
| 11.6 | country                               | O    | 0..   | ID   | HL70399 |          |
| 11.7 | address type                          | O    | 0..   | ID   | HL70190 |          |
| 11.8 | other geographic designation          | O    | 0..   | ST   |         |          |
| 11.9 | county/parish code                    | O    | 0..   | IS   | HL70289 |          |
| 13   | Phone Number - Home                   | O    | 0..1  | XTN  |         |          |
| 13.1 | Telephone Number                      | O    | 0..   | TN   |         |          |
| 13.2 | telecommunication use code            | R    | 1..1  | ID   | HL70201 |          |
| 13.3 | telecommunication equipment type (ID) | R    | 1..1  | ID   | HL70202 |          |
| 13.4 | Email address                         | O    | 0..   | ST   |         |          |
| 14   | Phone Number - Business               | O    | 0..1  | XTN  |         |          |
| 14.1 | Telephone Number                      | O    | 0..   | TN   |         |          |
| 14.2 | telecommunication use code            | R    | 1..1  | ID   | HL70201 |          |
| 14.3 | telecommunication equipment type (ID) | R    | 1..1  | ID   | HL70202 |          |
| 14.4 | Email address                         | O    | 0..   | ST   |         |          |
| 19   | SSN Number - Patient                  | O    | 0..1  | ST   |         |          |
| 23   | Birth Place                           | O    | 0..1  | ST   |         |          |
| 29   | Patient Death Date and Time           | C    | 0..1  | TS   |         |          |
| 30   | Patient Death Indicator               | O    | 0..1  | ID   | HL70136 |          |

### 3. Patient Identifier List

#### 3.1. ID

Identification number or code for the patient.

#### 3.4. assigning authority

The "Assigning authority" aka "Issuer of Patient ID" can consist of the following three parts:

- Namespace ID // Issuer of Patient ID
- Universal ID // Universal Entity ID
- Universal ID Type // Universal Entity ID Type

Namespace ID, or combination of Universal ID and Universal ID Type, unique define the issuer.

Either only Namespace is specified, or only Universal ID and Universal ID Type are specified, or all three components are specified.

The combination of "Namespace ID" - "Universal ID" - "Universal ID Type" must be unique in EI!  
Though the component is not required, it is strongly advised to provide a value.

##### 3.4.1. namespace ID

Identifier of the Assigning Authority that issued the patient id.

If not available an unique internal assigning authority will be used

**3.4.2. universal ID**

Universal Entity ID.

This ID must be unique in EI and must be in the correct format, i.e. containing only digits and dots.  
Its total length  $\leq 64$  characters!

**3.4.3. universal ID type**

Universal Entity ID Type.

Only supported value :

-ISO

**3.5. identifier type code (ID)**

Supported values:

- PI = Patient Primary Identifier,
- SS = Social Security number

\* If empty PI will be used by default

**5. Patient Name****5.1. family name**

When representation code = alphabetic or Name type code indicates maiden name is specified following rule applies:

if Surname (PID.5.1.1) is empty, Own Surname Prefix (PID.5.1.2) and Own Surname (PID.5.1.3) are concatenated as last name.

**5.1.1. surname**

Patient's lastname

**5.2. given name**

Patient's firstname

**5.3. second and further given names or initials thereof**

Patient Middle Name

**5.4. suffix (e.g., JR or III)**

Patient's suffix

**5.5. prefix (e.g., DR)**

Patient's prefix

**5.7. name type code**

M = maiden name, only support storing last name for maiden name.

**5.8. Name Representation code**

Supported are :

- A or empty = Alphabetic

- I = Ideographic
- P = Phonetic

## **7. Date/Time Of Birth**

### **7.1. Date/Time**

YYYYMMDD[HHMM[SS]]

## **8. Administrative Sex**

## **11. Patient Address**

### **11.1. street address (SAD)**

This component specifies the street or mailing address of a person or institution.

#### **11.1.1. street or mailing address**

Text value used when SAD-2 (Street Name) is empty.

#### **11.1.2. street name**

Name of the street.

#### **11.1.3. dwelling number**

House number.

### **11.3. city**

Municipality code of the city.

If field is empty, the city will be listed as 'Unknown' (code UKW)

### **11.4. state or province**

Is always the highest region level, but there can be a lower subdividing region level for a state or province.

### **11.5. zip or postal code**

Zip or postal code of the city.

### **11.6. country**

A 3-digit code defining the country.

This is necessary in EI for the address segment to be processed.

It defaults to UKW (Unknown country) when left empty.

### **11.7. address type**

O (office), H (home address) are supported.

L (Legal Address) defaults to office and the rest defaults to H (home address)

## **13. Phone Number - Home**

Segment is used for all home communication.

First one is the primary home communication channel

### 13.1. Telephone Number

In case of telephone number/fax number/cellular number, the phone number is put in this field

[(999)] 999-9999 [X99999][C any text]

### 13.2. telecommunication use code

Required. If this is empty the communication cannot be registered.

Supported are:

- Primary Residence Number (PRN)
- Work Number (WPN)
- Network (email) Address (NET)

### 13.3. telecommunication equipment type (ID)

Required. If this is empty the communication cannot be registered.

Supported are:

- Telephone (PH)
- Fax (FX)
- Cellular Phone(CP)
- Internet Address (Internet)

### 13.4. Email address

In case of Network Email Address, this needs to be filled in.

## 14. Phone Number - Business

Segment is used for all business communication

First one is the primary home business channel

### 14.1. Telephone Number

In case of telephone number/fax number/cellular number, the phone number is put in this field

[(999)] 999-9999 [X99999][C any text]

### 14.2. telecommunication use code

Required. If this is empty the communication cannot be registered.

Supported are:

- Primary Residence Number (PRN)
- Work Number (WPN)
- Other Residence Number (ORN)
- Network (email) Address (NET)

### 14.3. telecommunication equipment type (ID)

Required. If this is empty the communication cannot be registered.

Supported are:

- Telephone (PH)
- Fax (FX)
- Cellular Phone(CP)
- Internet Address (Internet)

#### 14.4. Email address

In case of Network Email Address, this needs to be filled in.

#### 19. SSN Number - Patient

Social security number of the patient.

#### 23. Birth Place

#### 29. Patient Death Date and Time

*Condition Predicate:*

If Patient Death Indicator (PID.30) has value Y, this field also needs a value.

#### 30. Patient Death Indicator

Y or N

### PD1 - Patient Additional Demographic

- Usage: Optional
- Cardinality:0..1

| Seq.  | Name                                        | Opt. | Card. | Type | Table   | Contents |
|-------|---------------------------------------------|------|-------|------|---------|----------|
| 4     | Patient Primary Care Provider Name & ID No. | O    | 0..1  | XCN  |         |          |
| 4.1   | ID number (ST)                              | O    | 0..   | ST   |         |          |
| 4.2   | family name                                 | O    | 0..   | FN   |         |          |
| 4.2.1 | surname                                     | O    | 0..   | ST   |         |          |
| 4.3   | given name                                  | O    | 0..   | ST   |         |          |
| 4.9   | assigning authority                         | O    | 0..   | HD   |         |          |
| 4.9.1 | namespace ID                                | O    | 0..   | IS   | HL70363 |          |

#### 4. Patient Primary Care Provider Name & ID No.

##### 4.1. ID number (ST)

Primary Care Physician code.

##### 4.2. family name

Physician Family Name

##### 4.3. given name

Physician Given Name

#### 4.9. assigning authority

Assigning authority that issued the physicians code.

### **PV1 - Patient visit**

- Usage: Required but may be empty

- Cardinality:0..1

| Seq.   | Name                                               | Opt. | Card. | Type | Table   | Contents |
|--------|----------------------------------------------------|------|-------|------|---------|----------|
| 1      | Set ID - PV1                                       | O    | 0..1  | SI   |         |          |
| 2      | Patient Class                                      | R    | 1..1  | IS   | HL70004 |          |
| 3      | Assigned Patient Location                          | O    | 0..1  | PL   |         |          |
| 3.1    | point of care                                      | O    | 0..   | IS   | HL70302 |          |
| 3.2    | room                                               | O    | 0..   | IS   | HL70303 |          |
| 3.3    | bed                                                | O    | 0..   | IS   | HL70304 |          |
| 3.4    | facility (HD)                                      | O    | 0..   | HD   |         |          |
| 3.4.1  | namespace ID                                       | O    | 0..   | IS   | HL70300 |          |
| 3.11   | assigning authority for location                   | O    | 0..   | HD   |         |          |
| 3.11.1 | namespace ID                                       | O    | 0..   | IS   | HL70300 |          |
| 4      | Admission Type                                     | O    | 0..1  | IS   | HL70007 |          |
| 7      | Attending Doctor                                   | O    | 0..*  | XCN  | HL70010 |          |
| 7.1    | ID number (ST)                                     | O    | 0..   | ST   |         |          |
| 7.2    | family name                                        | O    | 0..   | FN   |         |          |
| 7.2.1  | surname                                            | O    | 0..   | ST   |         |          |
| 7.3    | given name                                         | O    | 0..   | ST   |         |          |
| 7.4    | second and further given names or initials thereof | O    | 0..   | ST   |         |          |
| 7.5    | suffix (e.g., JR or III)                           | O    | 0..   | ST   |         |          |
| 7.6    | prefix (e.g., DR)                                  | O    | 0..   | ST   |         |          |
| 7.9    | assigning authority                                | O    | 0..   | HD   |         |          |
| 7.9.1  | namespace ID                                       | O    | 0..   | IS   | HL70363 |          |
| 8      | Referring Doctor                                   | O    | 0..*  | XCN  | HL70010 |          |
| 8.1    | ID number (ST)                                     | O    | 0..   | ST   |         |          |
| 8.2    | family name                                        | O    | 0..   | FN   |         |          |
| 8.2.1  | surname                                            | O    | 0..   | ST   |         |          |
| 8.3    | given name                                         | O    | 0..   | ST   |         |          |
| 8.4    | second and further given names or initials thereof | O    | 0..   | ST   |         |          |
| 8.5    | suffix (e.g., JR or III)                           | O    | 0..   | ST   |         |          |
| 8.6    | prefix (e.g., DR)                                  | O    | 0..   | ST   |         |          |

| Seq.   | Name                                               | Opt. | Card. | Type | Table   | Contents |
|--------|----------------------------------------------------|------|-------|------|---------|----------|
| 8.9    | assigning authority                                | O    | 0..   | HD   |         |          |
| 8.9.1  | namespace ID                                       | O    | 0..   | IS   | HL70363 |          |
| 15     | Ambulatory Status                                  | O    | 0..*  | IS   | HL70009 |          |
| 16     | VIP Indicator                                      | O    | 0..1  | IS   | HL70099 |          |
| 17     | Admitting Doctor                                   | O    | 0..*  | XCN  | HL70010 |          |
| 17.1   | ID number (ST)                                     | O    | 0..   | ST   |         |          |
| 17.2   | family name                                        | O    | 0..   | FN   |         |          |
| 17.2.1 | surname                                            | O    | 0..   | ST   |         |          |
| 17.3   | given name                                         | O    | 0..   | ST   |         |          |
| 17.4   | second and further given names or initials thereof | O    | 0..   | ST   |         |          |
| 17.5   | suffix (e.g., JR or III)                           | O    | 0..   | ST   |         |          |
| 17.6   | prefix (e.g., DR)                                  | O    | 0..   | ST   |         |          |
| 17.9   | assigning authority                                | O    | 0..   | HD   |         |          |
| 17.9.1 | namespace ID                                       | O    | 0..   | IS   | HL70363 |          |
| 18     | Patient Type                                       | O    | 0..1  | IS   | HL70018 |          |
| 19     | Visit Number                                       | O    | 0..1  | CX   |         |          |
| 19.1   | ID                                                 | O    | 0..   | ST   |         |          |
| 19.4   | assigning authority                                | O    | 0..   | HD   |         |          |
| 19.4.1 | namespace ID                                       | O    | 0..   | IS   | HL70363 |          |
| 44     | Admit Date/Time                                    | O    | 0..1  | TS   |         |          |
| 44.1   | Date/Time                                          | O    | 0..   | NM   |         |          |
| 45     | Discharge Date/Time                                | O    | 0..*  | TS   |         |          |
| 45.1   | Date/Time                                          | O    | 0..   | NM   |         |          |

## 1. Set ID - PV1

## 2. Patient Class

Patient Class

### 3.1. point of care

Patient

### 3.2. room

Room in the department

### 3.3. bed

Bed in the room

### 3.4.1. namespace ID

Partient

#### **3.11.1. namespace ID**

Assigning authority of the issuer of department/facility code.

#### **4. Admission Type**

Type of admission, the circumstances under which the patient was or will be admitted.

#### **7. Attending Doctor**

Attending physician information.

#### **8. Referring Doctor**

Referring physician information.

#### **15. Ambulatory Status**

Code indicating any permanent or transient handicapped conditions.

#### **16. VIP Indicator**

This field identifies the type of VIP.

- 1 set VIP or personnel as yes
- 0 set as no

#### **17. Admitting Doctor**

Admitting physician information.

#### **18. Patient Type**

Site-specific values that identify the patient type.

#### **19. Visit Number**

##### **19.1. ID**

Unique number identifying the admission.

#### **44. Admit Date/Time**

When no admit date/time is present in the message, a fallback is done to EVN-2.

##### **44.1. Date/Time**

YYYYMMDD[HHMM[SS]][+/-ZZZ Z]

If timezone information is present it overrides the timezone information if available in MSH-7

#### **45. Discharge Date/Time**

##### **45.1. Date/Time**

YYYYMMDD[HHMM[SS]][+/-ZZZ Z]

If timezone information is present it overrides the timezone information if available in MSH-7

## OBX - Observation/Result

- Usage: Optional
- Cardinality:0..\*

| Seq. | Name                               | Opt. | Card. | Type | Table   | Contents                      |
|------|------------------------------------|------|-------|------|---------|-------------------------------|
| 1    | Set ID - OBX                       | O    | 0..1  | SI   |         |                               |
| 2    | Value Type                         | R    | 1..1  | ID   | HL70125 |                               |
| 3    | Observation Identifier             | R    | 1..1  | CE   |         |                               |
| 3.1  | identifier                         | R    | 1..1  | ST   |         |                               |
| 3.2  | text                               | O    | 0..   | ST   |         |                               |
| 3.3  | name of coding system              | O    | 0..   | IS   | HL70396 |                               |
| 3.4  | alternate identifier               | O    | 0..   | ST   |         |                               |
| 3.5  | alternate text                     | O    | 0..   | ST   |         |                               |
| 3.6  | name of alternate coding system    | O    | 0..   | IS   | HL70396 |                               |
| 4    | Observation Sub-Id                 | C    | 0..1  | ST   |         |                               |
| 5    | Observation Value                  | R    | 1..1  | *    |         |                               |
| 6    | Units                              | O    | 0..1  | CE   |         |                               |
| 6.2  | text                               | O    | 0..   | ST   |         |                               |
| 6.3  | name of coding system              | O    | 0..   | IS   | HL70396 |                               |
| 6.4  | alternate identifier               | O    | 0..   | ST   |         |                               |
| 6.5  | alternate text                     | O    | 0..   | ST   |         |                               |
| 6.6  | name of alternate coding system    | O    | 0..   | IS   | HL70396 |                               |
| 7    | References Range                   | O    | 0..1  | ST   |         |                               |
| 8    | Abnormal Flags                     | O    | 0..1  | IS   | HL70078 |                               |
| 9    | Probability                        | O    | 0..*  | NM   |         |                               |
| 10   | Nature of Abnormal Test            | O    | 0..1  | ID   | HL70080 |                               |
| 11   | Observation Result Status          | R    | 1..1  | ID   | HL70085 |                               |
| 12   | Date Last Observation Normal Value | O    | 0..1  | TS   |         |                               |
| 13   | User Defined Access Checks         | O    | 0..1  | ST   |         |                               |
| 14   | Date/Time of the Observation       | O    | 0..1  | TS   |         |                               |
| 14.1 | Date/Time                          | O    | 0..   | NM   |         | e.g. 20040328134602.1234+0600 |
| 15   | Producer's ID                      | O    | 0..1  | CE   |         |                               |
| 15.2 | text                               | O    | 0..   | ST   |         |                               |
| 15.3 | name of coding system              | O    | 0..   | IS   | HL70396 |                               |
| 15.4 | alternate identifier               | O    | 0..   | ST   |         |                               |
| 15.5 | alternate text                     | O    | 0..   | ST   |         |                               |
| 15.6 | name of alternate coding system    | O    | 0..   | IS   | HL70396 |                               |
| 16   | Responsible Observer               | O    | 0..1  | XCN  |         |                               |
| 16.1 | ID number (ST)                     | O    | 0..   | ST   |         |                               |

| Seq.    | Name                                               | Opt. | Card. | Type | Table   | Contents |
|---------|----------------------------------------------------|------|-------|------|---------|----------|
| 16.2    | family name                                        | O    | 0..   | FN   |         |          |
| 16.2.1  | surname                                            | O    | 0..   | ST   |         |          |
| 16.2.2  | own surname prefix                                 | O    | 0..   | ST   |         |          |
| 16.2.3  | own surname                                        | O    | 0..   | ST   |         |          |
| 16.2.4  | surname prefix from partner/spouse                 | O    | 0..   | ST   |         |          |
| 16.2.5  | surname from partner/spouse                        | O    | 0..   | ST   |         |          |
| 16.3    | given name                                         | O    | 0..   | ST   |         |          |
| 16.4    | second and further given names or initials thereof | O    | 0..   | ST   |         |          |
| 16.5    | suffix (e.g., JR or III)                           | O    | 0..   | ST   |         |          |
| 16.6    | prefix (e.g., DR)                                  | O    | 0..   | ST   |         |          |
| 16.7    | degree (e.g., MD)                                  | O    | 0..   | IS   | HL70360 |          |
| 16.8    | source table                                       | O    | 0..   | IS   | HL70297 |          |
| 16.9    | assigning authority                                | O    | 0..   | HD   |         |          |
| 16.9.1  | namespace ID                                       | O    | 0..   | IS   | HL70363 |          |
| 16.9.2  | universal ID                                       | O    | 0..   | ST   |         |          |
| 16.9.3  | universal ID type                                  | O    | 0..   | ID   | HL70301 |          |
| 16.10   | name type code                                     | O    | 0..   | ID   | HL70200 |          |
| 16.11   | identifier check digit                             | O    | 0..   | ST   |         |          |
| 16.12   | code identifying the check digit scheme employed   | O    | 0..   | ID   | HL70061 |          |
| 16.13   | identifier type code (IS)                          | O    | 0..   | IS   |         |          |
| 16.14   | assigning facility                                 | O    | 0..   | HD   |         |          |
| 16.14.1 | namespace ID                                       | O    | 0..   | IS   | HL70363 |          |
| 16.14.2 | universal ID                                       | O    | 0..   | ST   |         |          |
| 16.14.3 | universal ID type                                  | O    | 0..   | ID   | HL70301 |          |
| 16.15   | Name Representation code                           | O    | 0..   | ID   | HL70465 |          |
| 16.16   | name context                                       | O    | 0..   | CE   | HL70448 |          |
| 16.16.1 | identifier                                         | O    | 0..   | ST   |         |          |
| 16.16.2 | text                                               | O    | 0..   | ST   |         |          |
| 16.16.3 | name of coding system                              | O    | 0..   | IS   | HL70396 |          |
| 16.16.4 | alternate identifier                               | O    | 0..   | ST   |         |          |
| 16.16.5 | alternate text                                     | O    | 0..   | ST   |         |          |
| 16.16.6 | name of alternate coding system                    | O    | 0..   | IS   | HL70396 |          |
| 16.17   | name validity range                                | O    | 0..   | DR   |         |          |
| 16.17.1 | range start date/time                              | O    | 0..   | TS   |         |          |
| 16.17.2 | range end date/time                                | O    | 0..   | TS   |         |          |
| 16.18   | name assembly order                                | O    | 0..   | ID   | HL70444 |          |

| Seq. | Name                            | Opt. | Card. | Type | Table   | Contents |
|------|---------------------------------|------|-------|------|---------|----------|
| 17   | Observation Method              | O    | 0..2  | CE   |         |          |
| 17.2 | text                            | O    | 0..   | ST   |         |          |
| 17.3 | name of coding system           | O    | 0..   | IS   | HL70396 |          |
| 17.4 | alternate identifier            | O    | 0..   | ST   |         |          |
| 17.5 | alternate text                  | O    | 0..   | ST   |         |          |
| 17.6 | name of alternate coding system | O    | 0..   | IS   | HL70396 |          |
| 18   | Equipment Instance Identifier   | O    | 0..*  | EI   |         |          |
| 18.1 | entity identifier               | O    | 0..   | ST   |         |          |
| 18.2 | namespace ID                    | O    | 0..   | IS   | HL70363 |          |
| 18.3 | universal ID                    | O    | 0..   | ST   |         |          |
| 18.4 | universal ID type               | O    | 0..   | ID   | HL70301 |          |
| 19   | Date/Time of the Analysis       | O    | 0..1  | TS   |         |          |

## 1. Set ID - OBX

### 2. Value Type

Supported value(s)

- TX (For Text Attachment type or Pregnancy information)
- FT (For Text Attachment type)

### 3. Observation Identifier

#### 3.1. identifier

Must correspond with an attachment code that is setup in Administrator desktop as a \_\_Patient level\_\_-attachment.

For Pregnancy : PREGNANT to indicate Pregnancy information

## 4. Observation Sub-Id

### 5. Observation Value

Supported:

- plain text (in case of Text attachment type)
- YES/NO/UNKNOWN (in case of pregnancy information)

**6. Units**

**7. References Range**

**8. Abnormal Flags**

**9. Probability**

**10. Nature of Abnormal Test**

**11. Observation Result Status**

**12. Date Last Observation Normal Value**

**13. User Defined Access Checks**

**14. Date/Time of the Observation**

YYYYMMDD (date/time of last menstrual period - in case of pregnancy information)

**14.1. Date/Time**

YYYYMMDD[HHMM[SS[.SSSS]]] [+ZZZZ]

**15. Producer's ID**

**16. Responsible Observer**

**17. Observation Method**

**18. Equipment Instance Identifier**

**19. Date/Time of the Analysis**

**AL1 - Patient allergy information**

- Usage: Optional

- Cardinality:0..\*

| Seq. | Name                               | Opt. | Card. | Type | Table   | Contents |
|------|------------------------------------|------|-------|------|---------|----------|
| 2    | Allergen Type Code                 | O    | 0..1  | CE   | HL70127 |          |
| 2.2  | text                               | O    | 0..   | ST   |         |          |
| 2.3  | name of coding system              | O    | 0..   | IS   | HL70396 |          |
| 2.4  | alternate identifier               | O    | 0..   | ST   |         |          |
| 2.5  | alternate text                     | O    | 0..   | ST   |         |          |
| 2.6  | name of alternate coding system    | O    | 0..   | IS   | HL70396 |          |
| 3    | Allergen Code/Mnemonic/Description | R    | 1..1  | CE   |         |          |
| 3.1  | identifier                         | R    | 1..1  | ST   |         |          |
| 4    | Allergy Severity Code              | O    | 0..1  | CE   | HL70128 |          |
| 4.1  | identifier                         | O    | 0..   | ST   |         |          |

| Seq. | Name                  | Opt. | Card. | Type | Table | Contents |
|------|-----------------------|------|-------|------|-------|----------|
| 5    | Allergy Reaction Code | O    | 0..1  | ST   |       |          |
| 6    | Identification Date   | O    | 0..1  | DT   |       |          |

**2. Allergen Type Code**

Category

**3. Allergen Code/Mnemonic/Description**

Allergy code, name

**4. Allergy Severity Code**

Severity code, supported values : SV - Severe, MO - Moderate, MI - Mild, U - Unknown.

**5. Allergy Reaction Code**

Reaction code

**6. Identification Date**

The start date/time when allergy identified.