
All Messages

Segment	Cardinality	Usage	Comment
[FSH]	[0..1]	O	File Header Segment
[BHS]	[1..*]	O	Batch Header Segment
...			
[BTS]	[0..1]	O	Batch Trailer Segment
[FTS]	[1..*]	O	File Trailer Segment

VXU^V04

Unsolicited Vaccination Record Update

Segment	Cardinality	Usage	Field Name	Comment
MSH	[1..1]	R	Message Header Segment	Every message begins with an MSH.
PID	[1..1]	R	Patient Identification Segment	Every VXU has one PID segment.
[PD1]	[0..1]	RE	Additional Demographics	Every PID segment in VXU may have one or less PD1 segment
{{NK1}}	[0..*]	RE	Next of Kin/Associated Parties	The PID segment in a VXU may have zero or more NK1 segments.
[PATIENT VISIT begin			
PV1	[0..1]	RE	Patient Visit	The PID segment in a VXU may have zero or one PV1 segment. Subsequent messages regarding the same patient/client may have a different PV1 segment.
[PV2]	[0..1]	O	Patient Visit Additional Information	
]	PATIENT VISIT end			
[INSURANCE begin			Each VXU may have zero or more Insurance Groups
IN1	[0..1]	O	Insurance	
[IN2]	[0..1]	O	Insurance Additional Information	
[IN3]	[0..1]	O	Insurance Additional Information-Cert.	
]	INSURANCE end			
[ORDER begin			Each VXU may have zero or more Order Groups
ORC	[1..*]	RE	Common Order Segment	The PID segment in a VXU may have zero or more ORC segments.
RXA	[1..1]	R	Pharmacy Administration	Each ORC segment in a VXU must have one RXA segment. Every RXA requires an ORC segment.
[RXR]	[0..1]	RE	Pharmacy Route	Every RXA segment in a VXU may have zero or one RXR segments.
[OBSERVATION BEGIN			
OBX	[0..*]	RE	Observation/Result	Every RXA segment in a VXU may have zero or more OBX segments.
{{NTE}}	[0..1]	RE	Notes (Regarding Immunizations)	Every OBX segment in a VXU may have zero or one NTE segment.
]	OBSERVATION END			
]	ORDER end			

ADT^A01

Admit/Visit Notification

Segment	Cardinality	Usage	Field Name	Comment
MSH	[1..1]	R	Message Header Segment	Every message begins with an MSH.
EVN	[1..1]	R	Event Type	Every ADT has one EVN segment.
PID	[1..1]	R	Patient Identification Segment	Every ADT has one PID segment.
[PD1]	[0..1]	RE	Patient Additional Demographics	Every PID segment in ADT may have zero or one PD1 segment.
{{ROL}}	[0..*]	O	Role	
{{NK1}}	[0..*]	O	Next of Kin/Associated Parties	The PID segment in a ADT may have zero or more NK1 segments.
PV1	[1..1]	R	Patient Visit Information	The PID segment in an ADT must have one PV1 segment.
[PV2]	[0..1]	O	Patient Visit Additional Information	
{{ROL}}	[0..*]	O	Role	
{{DB1}}	[0..*]	O	Disability Information	
{{OBX}}	[0..*]	O	Observation /Result	The PID segment in an ADT may have zero or more OBX segments.
{{AL1}}	[0..*]	O	Allergy Information	
{{DG1}}	[0..*]	O	Diagnosis Information	
[DRG]	[0..*]	O	Diagnosis Related Group	
{{	PROCEDURE begin			
PR1	[0..1]	O	Procedures	
{{ROL}}	[0..*]	O	Role	
}}	PROCEDURE end			
{{GT1}}	[0..*]	O	Guarantor	
{{	INSURANCE begin			
IN1	[0..1]	O	Insurance	
[IN2]	[0..1]	O	Insurance Add'l Information	
{{IN3}}	[0..*]	O	Insurance Add'l Info - Cert	
{{ROL}}	[0..*]	O	Role	
}}	INSURANCE end			
[ACC]	[0..1]	O	Accident Information	
[UB1]	[0..1]	O	Universal Bill Information	
[UB2]	[0..1]	O	Universal Bill 92 Information	
[PDA]	[0..1]	O	Patient Death and Autopsy	

ADT^A04 Register a Patient

Segment	Cardinality	Usage	Field Name	Comment
MSH	[1..1]	R	Message Header Segment	Every message begins with an MSH.
EVN	[1..1]	R	Event Type	Every ADT has one EVN segment.
PID	[1..1]	R	Patient Identification Segment	Every ADT has one PID segment.
[PD1]	[0..1]	RE	Patient Additional Demographics	Every PID segment in ADT may have zero or one PD1 segment.
{{ROL}}	[0..*]	O	Role	
{{NK1}}	[0..*]	O	Next of Kin/Associated Parties	The PID segment in a ADT may have zero or more NK1 segments.
PV1	[1..1]	R	Patient Visit Information	The PID segment in an ADT must have one PV1 segment.
[PV2]	[0..1]	O	Patient Visit Additional Information	
{{ROL}}	[0..*]	O	Role	
{{DB1}}	[0..*]	O	Disability Information	
{{OBX}}	[0..*]	O	Observation /Result	The PID segment in an ADT may have zero or more OBX segments.
{{AL1}}	[0..*]	O	Allergy Information	
{{DG1}}	[0..*]	O	Diagnosis Information	
[DRG]	[0..*]	O	Diagnosis Related Group	
{{	PROCEDURE begin			
PR1	[0..1]	O	Procedures	
{{ROL}}	[0..*]	O	Role	
}}	PROCEDURE end			
{{GT1}}	[0..*]	O	Guarantor	
{{	INSURANCE begin			
IN1	[0..1]	O	Insurance	
[IN2]	[0..1]	O	Insurance Add'l Information	
{{IN3}}	[0..*]	O	Insurance Add'l Info - Cert	
{{ROL}}	[0..*]	O	Role	
}}	INSURANCE end			
[ACC]	[0..1]	O	Accident Information	
[UB1]	[0..1]	O	Universal Bill Information	
[UB2]	[0..1]	O	Universal Bill 92 Information	
[PDA]	[0..1]	O	Patient Death and Autopsy	

ADT^A05

Pre-Admit a Patient

Segment	Cardinality	Usage	Field Name	Comment
MSH	[1..1]	R	Message Header Segment	Every message begins with an MSH.
EVN	[1..1]	R	Event Type	Every ADT has one EVN segment.
PID	[1..1]	R	Patient Identification Segment	Every ADT has one PID segment.
[PD1]	[0..1]	RE	Patient Additional Demographics	Every PID segment in ADT may have zero or one PD1 segment.
{{ROL}}	[0..*]	O	Role	
{{NK1}}	[0..*]	O	Next of Kin/Associated Parties	The PID segment in a ADT may have zero or more NK1 segments.
PV1	[1..1]	R	Patient Visit Information	The PID segment in an ADT must have one PV1 segment.
[PV2]	[0..1]	O	Patient Visit Additional Information	
{{ROL}}	[0..*]	O	Role	
{{DB1}}	[0..*]	O	Disability Information	
{{OBX}}	[0..*]	O	Observation /Result	The PID segment in an ADT may have zero or more OBX segments.
{{AL1}}	[0..*]	O	Allergy Information	
{{DG1}}	[0..*]	O	Diagnosis Information	
[DRG]	[0..*]	O	Diagnosis Related Group	
{{	PROCEDURE begin			
PR1	[0..1]	O	Procedures	
{{ROL}}	[0..*]	O	Role	
}}	PROCEDURE end			
{{GT1}}	[0..*]	O	Guarantor	
{{	INSURANCE begin			
IN1	[0..1]	O	Insurance	
[IN2]	[0..1]	O	Insurance Add'l Information	
{{IN3}}	[0..*]	O	Insurance Add'l Info - Cert	
{{ROL}}	[0..*]	O	Role	
}}	INSURANCE end			
[ACC]	[0..1]	O	Accident Information	
[UB1]	[0..1]	O	Universal Bill Information	
[UB2]	[0..1]	O	Universal Bill 92 Information	

ADT^A08

Update Patient Information

Segment	Cardinality	Usage	Field Name	Comment
MSH	[1..1]	R	Message Header Segment	Every message begins with an MSH.
EVN	[1..1]	R	Event Type	Every ADT has one EVN segment.
PID	[1..1]	R	Patient Identification Segment	Every ADT has one PID segment.
[PD1]	[0..1]	RE	Patient Additional Demographics	Every PID segment in ADT may have zero or one PD1 segment.
{{ROL}}	[0..*]	O	Role	
{{NK1}}	[0..*]	O	Next of Kin/Associated Parties	The PID segment in a ADT may have zero or more NK1 segments.
PV1	[1..1]	R	Patient Visit Information	The PID segment in an ADT must have one PV1 segment.
[PV2]	[0..1]	O	Patient Visit Additional Information	
{{ROL}}	[0..*]	O	Role	
{{DB1}}	[0..*]	O	Disability Information	
{{OBX}}	[0..*]	O	Observation /Result	The PID segment in an ADT may have zero or more OBX segments.
{{AL1}}	[0..*]	O	Allergy Information	
{{DG1}}	[0..*]	O	Diagnosis Information	
[DRG]	[0..*]	O	Diagnosis Related Group	
{{	PROCEDURE begin			
PR1	[0..1]	O	Procedures	
{{ROL}}	[0..*]	O	Role	
}}	PROCEDURE end			
{{GT1}}	[0..*]	O	Guarantor	
{{	INSURANCE begin			
IN1	[0..1]	O	Insurance	
[IN2]	[0..1]	O	Insurance Add'l Information	
{{IN3}}	[0..*]	O	Insurance Add'l Info - Cert	
{{ROL}}	[0..*]	O	Role	
}}	INSURANCE end			
[ACC]	[0..1]	O	Accident Information	
[UB1]	[0..1]	O	Universal Bill Information	
[UB2]	[0..1]	O	Universal Bill 92 Information	
[PDA]	[0..1]	O	Patient Death and Autopsy	

ADT^A18 Merge Patient Information

Segment	Cardinality	Usage	Field Name	Comment
MSH	[1..1]	R	Message Header Segment	Every message begins with an MSH.
EVN	[1..1]	R	Event Type	Every ADT has one EVN segment.
PID	[1..1]	R	Patient Identification Segment	Every ADT has one PID segment.
[PD1]	[0..1]	RE	Patient Additional Demographics	Every PID segment in ADT may have zero or one PD1 segment.
MRG	[1..1]	R	Merge Information	Every ADT has one MRG segment.
PV1	[1..1]	R	Patient Visit	Every ADT has one PV1 segment.

ADT^A28

Add Person Information

Segment	Cardinality	Usage	Field Name	Comment
MSH	[1..1]	R	Message Header Segment	Every message begins with an MSH.
EVN	[1..1]	R	Event Type	Every ADT has one EVN segment.
PID	[1..1]	R	Patient Identification Segment	Every ADT has one PID segment.
[PD1]	[0..1]	RE	Patient Additional Demographics	Every PID segment in ADT may have zero or one PD1 segment.
{{ROL}}	[0..*]	O	Role	
{{NK1}}	[0..*]	O	Next of Kin/Associated Parties	The PID segment in a ADT may have zero or more NK1 segments.
PV1	[1..1]	R	Patient Visit Information	The PID segment in an ADT must have one PV1 segment.
[PV2]	[0..1]	O	Patient Visit Additional Information	
{{ROL}}	[0..*]	O	Role	
{{DB1}}	[0..*]	O	Disability Information	
{{OBX}}	[0..*]	O	Observation /Result	The PID segment in an ADT may have zero or more OBX segments.
{{AL1}}	[0..*]	O	Allergy Information	
{{DG1}}	[0..*]	O	Diagnosis Information	
[DRG]	[0..*]	O	Diagnosis Related Group	
{{	PROCEDURE begin			
PR1	[0..1]	O	Procedures	
{{ROL}}	[0..*]	O	Role	
}}	PROCEDURE end			
{{GT1}}	[0..*]	O	Guarantor	
{{	INSURANCE begin			
IN1	[0..1]	O	Insurance	
[IN2]	[0..1]	O	Insurance Add'l Information	
{{IN3}}	[0..*]	O	Insurance Add'l Info - Cert	
{{ROL}}	[0..*]	O	Role	
}}	INSURANCE end			
[ACC]	[0..1]	O	Accident Information	
[UB1]	[0..1]	O	Universal Bill Information	
[UB2]	[0..1]	O	Universal Bill 92 Information	

ADT^A31

Update Person Information

Segment	Cardinality	Usage	Field Name	Comment
MSH	[1..1]	R	Message Header Segment	Every message begins with an MSH.
EVN	[1..1]	R	Event Type	Every ADT has one EVN segment.
PID	[1..1]	R	Patient Identification Segment	Every ADT has one PID segment.
[PD1]	[0..1]	RE	Patient Additional Demographics	Every PID segment in ADT may have zero or one PD1 segment.
{{ROL}}	[0..*]	O	Role	
{{NK1}}	[0..*]	O	Next of Kin/Associated Parties	The PID segment in a ADT may have zero or more NK1 segments.
PV1	[1..1]	R	Patient Visit Information	The PID segment in an ADT must have one PV1 segment.
[PV2]	[0..1]	O	Patient Visit Additional Information	
{{ROL}}	[0..*]	O	Role	
{{DB1}}	[0..*]	O	Disability Information	
{{OBX}}	[0..*]	O	Observation /Result	The PID segment in an ADT may have zero or more OBX segments.
{{AL1}}	[0..*]	O	Allergy Information	
{{DG1}}	[0..*]	O	Diagnosis Information	
[DRG]	[0..*]	O	Diagnosis Related Group	
{{	PROCEDURE begin			
PR1	[0..1]	O	Procedures	
{{ROL}}	[0..*]	O	Role	
}}	PROCEDURE end			
{{GT1}}	[0..*]	O	Guarantor	
{{	INSURANCE begin			
IN1	[0..1]	O	Insurance	
[IN2]	[0..1]	O	Insurance Add'l Information	
{{IN3}}	[0..*]	O	Insurance Add'l Info - Cert	
{{ROL}}	[0..*]	O	Role	
}}	INSURANCE end			
[ACC]	[0..1]	O	Accident Information	
[UB1]	[0..1]	O	Universal Bill Information	
[UB2]	[0..1]	O	Universal Bill 92 Information	

ADT^A47 *Change Patient Identifier List*

Segment	Cardinality	Usage	Field Name	Comment
MSH	[1..1]	R	Message Header Segment	Every message begins with an MSH.
EVN	[1..1]	R	Event Type	Every ADT has one EVN segment.
PID	[1..1]	R	Patient Identification Segment	Every ADT has one PID segment.
[PD1]	[0..1]	RE	Patient Additional Demographics	Every PID segment in ADT may have zero or one PD1 segment.
MRG	[1..1]	R	Merge Information	Every ADT has one MRG segment.

ORU^R01 Unsolicited Transmission of an Observation (Result)

Segment	Cardinality	Usage	Field Name	Comment
MSH	[1..1]	R	Message Header Segment	Every message begins with an MSH.
{			PATIENT RESULT begin	
[PATIENT begin	
PID	[1..1]	R	Patient Identification Segment	Each Patient Group will have only one PID segment.
[PD1]	[0..1]	RE	Patient Additional Demographics	Every PID segment in ORU may have zero or one PD1 segment.
[[NTE]]	[0..*]	RE	Notes and Comments	
[[NK1]]	[0..*]	RE	Next of Kin/Associated Parties	
[PATIENT VISIT begin	
PV1	[0..1]	RE	Patient Visit	The PID segment in a ORU Patient Group may have zero or one PV1 segment. Subsequent messages regarding the same patient/client may have a different PV1 segment.
[PV2]	[0..1]	O	Patient Visit Additional Information	
]			PATIENT VISIT end	
]			PATIENT end	
{			ORDER_OBSERVATION begin	
[ORC]	Order Common			
OBR	Observations Request			
[[NTE]]	Notes and Comments			
[[OBSERVATION begin	
OBX	Observation/Result			
[[NTE]]	Notes and Comments			
]]			OBSERVATION end	
[[CTI]]	Clinical Trial Identification			
}			ORDER_OBSERVATION end	
}			PATIENT_RESULT end	
[DSC]	Continuation Pointer			

Spec Notes
[] = optional
{ } = repeatable
R = required
RE = required but may be empty
O = optional
C = conditional
CE = conditional but may be empty
X = not supported

File Header Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comment	Mapped
FHS	1	1	ST	R	[1..1]		00067	File field separator	The FHS.1 field shall be	
FHS	2	4	ST	R	[1..1]		00068	File encoding characters	The FHS.2 field shall be ^~\&	
FHS	3	227	HD	O	[0..1]		00069	File sending application		
FHS	4	227	HD	O	[0..1]		00070	File receiving application		
FHS	5	227	HD	O	[0..1]		00071	File receiving application		
FHS	6	227	HD	O	[0..1]		00072	File receiving facility		
FHS	7	26	TS	O	[0..1]		00073	File creation date/time		
FHS	8	40	ST	O	[0..1]		00074	File security		
FHS	9	20	ST	O	[0..1]		00075	File name/ID/type		
FHS	10	80	ST	O	[0..1]		00076	File comment		
FHS	11	20	ST	O	[0..1]		00077	File control ID		
FHS	12	20	ST	O	[0..1]		00078	Reference file control ID		

Batch Header Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comment	Mapped
BHS	1	1	ST	R	[1..1]		00081	Batch field separator	The BHS.1 field shall be	
BHS	2	3	ST	R	[1..1]		00082	Batch encoding characters	The BHS.2 field shall be ^~\&	
BHS	3	15	ST	O	[0..1]		00083	Batch sending application		
BHS	4	20	ST	O	[0..1]		00084	Batch sending facility		
BHS	5	15	ST	O	[0..1]		00085	Batch receiving application		
BHS	6	20	ST	O	[0..1]		00086	Batch receiving facility		
BHS	7	26	TS	O	[0..1]		00087	Batch creation date/time		
BHS	8	40	ST	O	[0..1]		00088	Batch security		
BHS	9	20	ST	O	[0..1]		00089	Batch name/ID/type		
BHS	10	80	ST	O	[0..1]		00090	Batch comment		
BHS	11	20	ST	O	[0..1]		00091	Batch control ID		
BHS	12	20	ST	O	[0..1]		00092	Reference batch control ID		

Message Header Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	Item #	Element Name	Comment	Mapped
MSH	1	1	ST	R	[1..1]		00001	Field Separator	The MSH.1 field shall be	
MSH	2	4	ST	R	[1..1]		00002	Encoding Characters	The MSH.2 field shall be ^-\\&	
MSH	3		HD	O	[0..1]	0361	00003	Sending Application		
MSH	4		HD	O	[0..1]	0362	00004	Sending Facility		Y
MSH	5		HD	O	[0..1]	0361	00005	Receiving Application		
MSH	6		HD	O	[0..1]	0362	00006	Receiving Facility		
MSH	7		TS	R	[1..1]		00007	Date/Time of Message	The degree of precision must be at least to the minute, and the time zone must be included (format YYYYMMDDHHMM[SS[.S[S[S[S]]]]] +/- ZZZZ).	
MSH	8	40	ST	O	[0..1]		00008	Security		
MSH	9	15	MSG	R	[1..1]	0076 0003	00009	Message Type		
MSH	10	20	ST	R	[1..1]		00010	Message Control ID	2.5.1	Y
MSH	11	3	PT	R	[1..1]		00011	Processing ID		
MSH	12		VID	R	[1..1]	0104	00012	Version ID		
MSH	13	15	NM	O	[0..1]		00013	Sequence Number		
MSH	14	180	ST	O	[0..1]		00014	Continuation Pointer		
MSH	15	2	ID	O	[0..1]	0155	00015	Accept Acknowledgement Type		
MSH	16	2	ID	O	[0..1]	0155	00016	Application Acknowledgement Type	AL-always, NE-Never, ER-Error/reject only, SU successful completion only	
MSH	17	3	ID	O	[0..1]	0399	00017	Country Code	Use 3 character country code from ISO 3166. If is empty, assume USA	
MSH	18	16	ID	O	[0..1]	0211	00692	Character Set	blank defaults to ASCII printable	
MSH	19		CE	O	[0..1]		00693	Principal Language of Message		
MSH	20	20	ID	O	[0..1]	0356	01317	Alternate Character Set Handling Scheme		
MSH	21		EI	O	[0..*]		01598	Message Profile Identifier	This field will be required for use whenever a Profile is being used.	

Message Acknowledgment Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	Item #	Element Name	Comment	Mapped
MSA	1	2	ID	R	[1..1]	0008	00018	Acknowledgement code		
MSA	2	20	ST	R	[1..1]		00010	Message control ID		
MSA	3	80	ST	O	[0..1]		00020	Test message		
MSA	4	15	NM	O	[0..1]		00021	Expected sequence number		
MSA	5		ID	O	[0..1]		00022	Delayed acknowledgment type		
MSA	6		CE	X	[0..0]	0357	00023	Error condition		

Event Type Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	Item #	Element Name	Comments	Mapped
EVN	1	3	ID	O	[0..1]	0003	00099	Event Type Code		
EVN	2		TS	R	[1..1]		00100	Recorded Date/Time		
EVN	3		TS	O	[0..1]		00101	Date/Time Planned Event		
EVN	4	3	IS	O	[0..1]	0062	00102	Event Reason Code		
EVN	5		XCN	O	[0..*]	0188	0103	Operator ID		
EVN	6		TS	O	[0..1]		01278	Event Occurred		
EVN	7		HD	O	[0..1]		01534	Event Facility		

Patient Identification Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comment	Mapped
PID	1	4	SI	RE	[1..1]		00104	Set ID - PID		
PID	2		CX	X	[0..1]		00105	Patient ID		
PID	3		CX	R	[1..*]		00106	Patient Identifier list		Y
PID	4		CX	X	[0..1]		00107	Alternate Patient ID - 00106		
PID	5		XPN	R	[1..*]		00108	Patient name	The first repetition shall contain the legal name. Multiple given names or initials are seperated by spaces.	Y
PID	6		XPN	RE	[0..1]		00109	Mother's maiden name		
PID	7		TS	R	[1..1]		00110	Date/time of birth	Required, must have month, day and year.	Y
PID	8	1	IS	RE	[0..1]	0001	00111	Administrative Sex		Y
PID	9		XPN	X	[0..1]		00112	Patient alias	This field should not be used. It was supported in earlier implementations.	
PID	10		CE	RE	[0..*]	0005	00113	Race		Y
PID	11		XAD	RE	[0..*]		00114	Patient address	The first repetition should be the primary address.	Y
PID	12	4	IS	X	[0..1]	0289	00115	County code	County belongs in the address field.	
PID	13		XTN	RE	[0..*]		00116	Phone number - home	PID13.5-8 will hold the primary number. PID13.1 will be used if PID13.5-8 is not populated. PID13.4 may contain an email address.	Y
PID	14		XTN	O	[0..1]		00117	Phone number - business	PID13.5-8 will hold the primary number. PID13.1 will be used if PID13.5-8 is not populated. PID13.4 may contain an email address.	Y
PID	15		CE	O	[0..1]	0296	00118	Primary language	Use ISO 639.	Y
PID	16		CE	O	[0..1]		00119	Marital status		
PID	17		CE	O	[0..1]		00120	Religion		
PID	18		CX	O	[0..1]		00121	Patient account number		
PID	19	16	ST	X	[0..1]		00122	SSN number - patient		
PID	20		DLN	X	[0..1]		00123	Driver's license number - patient		
PID	21		CX	X	[0..1]		00124	Mother's identifier		Y

Patient Identification Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comment	Mapped
PID	22		CE	RE	[0..1]	0189	00125	Ethnic group	First triplet shall contain H,N,U if populated. Second triplet shall contain government issued code from table xxx, if populated. If both are populated, they must match logically.	
PID	23	60	ST	O	[0..1]		00126	Birth place	Use may be specified locally.	
PID	24	1	ID	RE	[0..1]	0136	00127	Multiple birth indicator	The acceptable values are Y and N. If the status is undetermined, then field shall be empty.	Y
PID	25	2	NM	CE	[0..1]		00128	Birth order	If Multiple Birth Indicator is populated with Y, then this field should contain the number indicating the person's birth order, with 1 for the first child born and 2 for the second.	Y
PID	26		CE	O	[0..1]	0171	00129	Citizenship		
PID	27		CE	O	[0..1]	0172	00130	Veterans military status		
PID	28		CE	O	[0..1]	0212	00739	Nationality		Y
PID	29		TS	RE	[0..1]		00740	Patient death date and time		
PID	30	1	ID	CE	[0..1]	0136	00741	Patient death indicator	If patient death date is populated, then this field should be populated.	Y
PID	31	1	ID	O	[0..1]	0136	01535	Identity Unknown Indicator		
PID	32	20	IS	O	[0..1]	0445	01536	Identity Reliability		
PID	33		TS	O	[0..1]		01537	Last Update Date/Time	May be locally specified.	
PID	34		HD	O	[0..1]		01538	Last Update Facility	Use is locally specified.	
PID	35		CE	O	[0..1]	0446	01539	Species Code		
PID	36		CE	O	[0..1]	0447	01540	Breed Code		
PID	37		ST	O	[0..1]		01541	Strain		
PID	38		CE	O	[0..1]	0429	01542	Production Class Code		
PID	39		CE	O	[0..1]	0171	01840	Tribal Citizenship		

Patient Additional Demographic Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
PD1	1	1	ST	O	[0..1]	0223	00755	Living dependency		
PD1	2	4	ST	O	[0..1]	0220	00742	Living arrangement		
PD1	3		HD	O	[0..1]		00756	Patient primary facility		
PD1	4		HD	O	[0..1]		00757	Patient Primary Care Provider Name & ID No.		
PD1	5		HD	O	[0..1]	0231	00745	Student indicator		
PD1	6		HD	O	[0..1]	0295	00753	Handicap		
PD1	7		TS	O	[0..1]	0315	00759	Living will code		
PD1	8	40	ST	O	[0..1]	0316	00760	Organ donor code		
PD1	9	15	MSG	O	[0..1]	0136	00761	Separate bill		
PD1	10	20	ST	O	[0..1]		00762	Duplicate patient		
PD1	11	3	PT	RE	[0..1]	0215	00763	Publicity code		
PD1	12	60	ID	RE	[0..1]	0136	00744	Protection indicator		
PD1	13	15	NM	CE	[0..1]		01566	Protection Indicator effective date	If protection indicator is valued, then this field should be valued.	
PD1	14	180	ST	O	[0..1]		01567	Place of worship		
PD1	15	2	ID	O	[0..1]		01568	Advance directive code		
PD1	16	2	ID	RE	[0..1]	0441	01569	Immunization registry status		Y
PD1	17	3	ID	CE	[0..1]		01570	Immunization registry status effective date	If the registry status field is filled, then this should be valued.	
PD1	18	16	ID	CE	[0..1]		01571	Publicity code effective date	If the publicity code field is filled then this field should be valued.	
PD1	19		CE	O	[0..1]	00140	01572	Military Branch		
PD1	20	20	ID	O	[0..1]	00141	00486	Military Rank/Grade		
PD1	21		EI	O	[0..1]	00142	01573	Military Status		

Patient Visit Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
PV1	1	4	SI	O	[0..1]		00131	Set ID - PV1	If populated, this should be 1.	
PV1	2	1	IS	R	[1..1]	0004	00132	Patient class		
PV1	3		PL	O	[0..1]		00133	Assigned patient location		
PV1	4	2	IS	O	[0..1]	0007	00134	Admission type		
PV1	5		CX	O	[0..1]		00135	Preadmit number		
PV1	6		PL	O	[0..1]		00136	Prior patient location		
PV1	7		XCN	O	[0..1]	0010	00137	Attending doctor		
PV1	8		XCN	O	[0..1]	0010	00138	Referring doctor		
PV1	9		XCN	O	[0..1]	0010	00139	Consulting doctor		
PV1	10	3	IS	O	[0..1]	0069	00140	Hospital service		
PV1	11		PL	O	[0..1]		00141	Temporary location		
PV1	12	2	IS	O	[0..1]	0087	00142	Preadmit test indicator		
PV1	13	2	IS	O	[0..1]	0092	00143	Re-admission indicator		
PV1	14	6	IS	O	[0..1]	0023	00144	Admit source		
PV1	15	2	IS	O	[0..1]	0009	00145	Ambulatory status		
PV1	16	2	IS	O	[0..1]	0099	00146	VIP indicator		
PV1	17		XCN	O	[0..1]	0010	00147	Admitting doctor		
PV1	18	2	IS	O	[0..1]	0018	00148	Patient type		
PV1	19		CX	O	[0..1]		00149	Visit number		
PV1	20		FC	R	[1..*]	0064	00150	Financial class	VFC Status	Y
PV1	21	2	IS	O	[0..1]	0032	00151	Charge price indicator		
PV1	22	2	IS	O	[0..1]	0045	00152	Courtesy code		
PV1	23	2	IS	O	[0..1]	0046	00153	Credit rating		
PV1	24	2	IS	O	[0..1]	0044	00154	Contract code		
PV1	25	8	DT	O	[0..1]		00155	Contract effective date		
PV1	26	12	NM	O	[0..1]		00156	Contract amount		
PV1	27	3	NM	O	[0..1]		00157	Contract period		
PV1	28	2	IS	O	[0..1]	0073	00158	Interest code		
PV1	29	4	IS	O	[0..1]	0110	00159	Transfer to bad debt code		
PV1	30	8	DT	O	[0..1]		00160	Transfer to bad debt date		
PV1	31	10	IS	O	[0..1]	0021	00161	Bad debt agency code		
PV1	32	12	NM	O	[0..1]		00162	Bad debt transfer amount		
PV1	33	12	NM	O	[0..1]		00163	Bad debt recovery amount		
PV1	34	1	IS	O	[0..1]	0111	00164	Delete account indicator		
PV1	35	8	DT	O	[0..1]		00165	Delete account date		
PV1	36	3	IS	O	[0..1]	0112	00166	Discharge disposition		
PV1	37		DLD	O	[0..1]	0113	00167	Discharged to location		
PV1	38		CE	O	[0..1]	0114	00168	Diet type		
PV1	39	2	IS	O	[0..1]	0115	00169	Servicing facility		

Patient Visit Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
PV1	40	1	IS	O	[0..1]	0116	00170	Bed status		
PV1	41	2	IS	O	[0..1]	0117	00171	Account status		
PV1	42		PL	O	[0..1]		00172	Pending location		
PV1	43		PL	O	[0..1]		00173	Prior temporary location		
PV1	44		TS	O	[0..1]		00174	Admit date/time		
PV1	45		TS	O	[0..1]		00175	Discharge date/time		
PV1	46	12	NM	O	[0..1]		00176	Current patient balance		
PV1	47	12	NM	O	[0..1]		00177	Total charges		
PV1	48	12	NM	O	[0..1]		00178	Total adjustments		
PV1	49	12	NM	O	[0..1]		00179	Total payments		
PV1	50		CX	O	[0..1]	0203	00180	Alternate visit ID		
PV1	51	1	IS	O	[0..1]	0326	01226	Visit indicator		
PV1	52		XCN	O	[0..1]	0010	01274	Other healthcare provider		

Next of Kin / Associated Parties Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
NK1	1	4	SI	R	[1..1]		00190	Set ID- NK1		Y
NK1	2		XPN	R	[1..*]		00191	Name	The first instance is the legal name and is required.	Y
NK1	3		CE	R	[1..1]	0063	00192	Relationship		Y
NK1	4		XAD	RE	[0..*]		00193	Address	The first instance shall be the primary address.	Y
NK1	5		XTN	RE	[0..*]		00194	Phone number	The first instance shall be the primary phone number.	Y
NK1	6		XTN	O	[0..*]		00195	Business phone number		Y
NK1	7		CE	O	[0..1]	0131	00196	Contact role		
NK1	8	8	DT	O	[0..1]		00197	Start date		
NK1	9	8	DT	O	[0..1]		00198	End date		
NK1	10	60	ST	O	[0..1]		00199	Next of Kin / Associated Parties Job Title		
NK1	11		JCC	O	[0..1]	0327 0328	00200	Next of Kin / Associated Parties Job Code/Class		
NK1	12		CX	O	[0..1]		00201	Next of Kin / Associated Parties Employee Number		
NK1	13		XON	O	[0..1]		00202	Organization name - NK1		
NK1	14		CE	O	[0..1]	0002	00119	Marital status		
NK1	15	1	IS	O	[0..1]	0001	00111	Administrative Sex		Y
NK1	16		TS	O	[0..1]		00110	Date/time of birth		Y
NK1	17	2	IS	O	[0..1]	0223	00755	Living dependency		
NK1	18	2	IS	O	[0..1]	0009	00145	Ambulatory status		
NK1	19		CE	O	[0..1]	0171	00129	Citizenship		
NK1	20		CE	O	[0..1]	0296	00118	Primary language		Y
NK1	21	2	IS	O	[0..1]	0220	00742	Living arrangement		
NK1	22		CE	O	[0..1]	0215	00743	Publicity code		
NK1	23	1	ID	O	[0..1]	0136	00744	Protection indicator		
NK1	24	2	IS	O	[0..1]	0231	00745	Student indicator		
NK1	25		CE	O	[0..1]	0006	00120	Religion		
NK1	26		XPN	O	[0..1]		00746	Mother's maiden name		Y
NK1	27		CE	O	[0..1]	0212	00739	Nationality		Y
NK1	28		CE	O	[0..1]	0189	00125	Ethnic group		
NK1	29		CE	O	[0..1]	0222	00747	Contact reason		
NK1	30		XPN	O	[0..1]		00748	Contact person's name		

Next of Kin / Associated Parties Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
NK1	31		XTN	O	[0..1]		00749	Contact person's telephone number		
NK1	32		XAD	O	[0..1]		00750	Contact person's address		
NK1	33		CX	O	[0..1]		00751	Next of kin/AP's identifier		
NK1	34	2	IS	O	[0..1]	0311	00752	Job status		
NK1	35		CE	O	[0..1]	0005	00113	Race		Y
NK1	36	2	IS	O	[0..1]	0295	00753	Handicap		
NK1	37	16	ST	O	[0..1]		00754	Contact person social security #		
NK1	38		ST	O	[0..1]		01905	Next of Kin Birth Place		
NK1	39	2	IS	O	[0..1]	0099	00146	VIP Indicator		

Common Order Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
ORC	1	2	ID	R	[1..1]	0119	00215	Order control	use RE	
ORC	2		EI	RE	[0..1]		00216	Placer order number	See guidance below	
ORC	3		EI	R	[0..1]		00217	Filler order number	See guidance below	
ORC	4		EI	O	[0..1]		00218	Placer group number		
ORC	5	2	ID	O	[0..1]	0038	00219	Order status		
ORC	6	1	ID	O	[0..1]	0121	00220	Response flag		
ORC	7		TQ	X	[0..1]		00221	Quantity/timing		
ORC	8		EIP	O	[0..1]		00222	Parent		
ORC	9		TS	O	[0..1]		00223	Date/time of transaction		
ORC	10		XCN	RE	[0..1]		00224	Entered by	This is the person that entered this immunization record into the system.	
ORC	11		XCN	O	[0..1]		00225	Verified by		
ORC	12		XCN	RE	[0..1]		00226	Ordering provider	This shall be the provider ordering the immunization. It is expected to be empty if the immunization record is transcribed from a historical record.	
ORC	13		PL	O	[0..1]		00227	Enterer's location		
ORC	14		XTN	O	[0..1]		00228	Call back phone number		
ORC	15		TS	O	[0..1]		00229	Order effective date/time		
ORC	16		CE	O	[0..1]		00230	Order control code reason		
ORC	17		CE	O	[0..1]		00231	Entering organization	This is the provider organization that entered this record/order.	
ORC	18		CE	O	[0..1]		00232	Entering device		
ORC	19		XCN	O	[0..1]		00233	Action by		
ORC	20		CE	O	[0..1]	0339	01310	Advanced beneficiary notice code		
ORC	21		XON	O	[0..1]		01311	Ordering facility name		
ORC	22		XAD	O	[0..1]		01312	Ordering facility address		
ORC	23		XTN	O	[0..1]		01313	Ordering facility phone number		
ORC	24		XAD	O	[0..1]		01314	Ordering provider address		
ORC	25		CWE	O	[0..1]		01473	Order Status Modifier		
ORC	26		CWE	O	[0..1]	0552	01641	Advanced Beneficiary Notice Override Reason		
ORC	27		TS	O	[0..1]		01642	Filler's Expected Availability Date/Time		
ORC	28		CWE	O	[0..1]	0177	00615	Confidentiality Code		
ORC	29		CWE	O	[0..1]	0482	01643	Order Type		

Common Order Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
ORC	30		CNE	O	[0..1]	0483	01644	Enterer Authorization Mode		
ORC	31		CWE	O	[0..1]		02286	Parent Universal Service Identifier		

Pharmacy/Treatment Route Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
RXR	1		CE	R	[1..1]	0162	00309	Route		Y
RXR	2		CWE	RE	[0..1]	0163	00310	Administration Site		Y
RXR	3		CE	O	[0..1]	0164	00311	Administration Device		
RXR	4		CWE	O	[0..1]	0165	00312	Administration Method		
RXR	5		CE	O	[0..1]		01315	Routing instructions		
RXR	6		CWE	O	[0..1]	0495	01670	Administration Site Modifier		

Pharmacy/Treatment Administration Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
RXA	1	4	NM	R	[1..1]		00342	Give sub-ID counter	Constrain to 0 (zero)	
RXA	2	4	NM	R	[1..1]		00344	Administration sub-ID counter	Constrain to 1	
RXA	3		TS	R	[1..1]		00345	Date/time start of administration		Y
RXA	4		TS	RE	[0..1]		00346	Date/time end of administration	If populated, this should be the same as Start time (RXA-3)	Y
RXA	5		CE	R	[1..1]	0292	00347	Administered code	CVX code is strongly preferred	Y
RXA	6	20	NM	R	[1..1]		00348	Administered amount	If administered amount is not recorded, use 999.	
RXA	7		CE	CE	[0..1]		00349	Administered units	If previous field is populated by any value except 999, it is required.	
RXA	8		CE	O	[0..1]		00350	Administered dosage form		
RXA	9		CE	RE	[0..*]	NIP 0001	00351	Administration notes	Constrained to one repetition. This repetition is intended for conveying if this immunization record is based on a historical record or was given by the provider recording the immunization.	
RXA	10		XCN	RE	[0..1]		00352	Administering provider	This is the person who gave the administration	Y
RXA	11		LA2	RE	[0..1]		00353	Administered-at location		
RXA	12	20	ST	O	[0..1]		00354	Administered per (time unit)		
RXA	13	20	NM	O	[0..1]		01134	Administered strength		
RXA	14		CE	O	[0..1]		01135	Administered strength units		
RXA	15	20	ST	RE	[0..*]		01129	Substance lot number		Y
RXA	16		ST	CE	[0..1]		01130	Substance expiration date	If the lot number is not null, this field should be valued.	
RXA	17		CE	RE	[0..*]	0227	01131	Substance manufacturer name		
RXA	18		CE	C	[0..*]		01136	Substance refusal reason	If the Completion status is RE, then this shall be populated.	
RXA	19		CE	O	[0..1]		01123	Indication		

Pharmacy/Treatment Administration Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
RXA	20	2	ID	RE	[0..1]	0322	01223	Completion status	If this field is not populated, it is assumed to be CP or complete. If the Refusal reason is populated, this field shall be set to RE.	
RXA	21	2	ID	RE	[0..1]	0323	01224	Action code-RXA		
RXA	22		TS	O	[0..1]		01225	System entry date/time		
RXA	23	5	NM	O	[0..1]		01696	Administered Drug Strength Volume		
RXA	24		CWE	O	[0..1]		01697	Administered Drug Strength Volume Units		
RXA	25		CWE	O	[0..1]		01698	Administered Barcode Identifier		
RXA	26	1	ID	O	[0..1]	480	01699	Pharmacy Order Type		

Observation/Result Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
OBX	1	4	SI	R	[1..1]		00569	Set ID - OBX		
OBX	2	2	ID	R	[1..1]	0125	00570	Value Type	CE,NM,ST,DT,or TS	Y
OBX	3		CE	R	[1..1]		00571	Observation identifier	This indicates what observation refers to. It poses the question that is answered by OBX-5.	Y
OBX	4	20	ST	RE	[1..1]		00572	Observation sub-ID		
OBX	5		Varies	R	[1..1]		00573	Observation value	This is the observation value and answers the question posed by OBX-3.	Y
OBX	6		CE	CE	[0..1]		00574	Units	If the observation in OBX-5 requires an indication of the units, they are placed here.	
OBX	7		ST	O	[0..1]		00575	Reference ranges		
OBX	8		IS	O	[0..1]	0078	00576	Abnormal flags		
OBX	9		NM	O	[0..1]		00577	Probability		
OBX	10		ID	O	[0..1]	0080	00578	Nature of abnormal test		
OBX	11		ID	R	[1..1]	0085	00579	Observ result status	Constrain to F	
OBX	12		TS	O	[0..1]		00580	Effective Date of Reference Range Values		
OBX	13	20	ST	O	[0..1]		00581	User defined access checks		
OBX	14		TS	R	[1..1]		00582	Date/time of the observation		
OBX	15		CE	O	[0..1]		00583	Producer's ID		
OBX	16		XCN	O	[0..1]		00584	Responsible observer		
OBX	17		CE	O	[0..1]		00936	Observation method		
OBX	18		EI	O	[0..1]		01479	Equipment Instance Identifier		
OBX	19		TS	O	[0..1]		01480	Date/Time of the Analysis		
OBX	20			O	[0..1]			Reserved for harmonization with v2.6		
OBX	21			O	[0..1]			Reserved for harmonization with v2.6		
OBX	22			O	[0..1]			Reserved for harmonization with v2.6		
OBX	23		XON	O	[0..1]		02283	Performing Organization Name		
OBX	24		XAD	O	[0..1]		02284	Performing Organization Address		
OBX	25		XCN	O	[0..1]		02285	Performing Organization Medical Director		

Notes and Comments Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comments	Mapped
NTE	1	4	SI	O	[0..1]		00096	Set ID-NTE		
NTE	2	8	ID	O	[0..1]	0105	00097	Source of comment		
NTE	3	65536	FT	R	[1..1]		00098	Comment		Y
NTE	4	250	CE	O	[0..1]	0364	01318	Comment type		

Role Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comment	Mapped
ROL	1	60	EI	C			01206	Role Instance ID		
ROL	2	2	ID	R		0287	00816	Action Code		
ROL	3	250	CE	R		0443	01197	Role-ROL		
ROL	4	250	XCN	R	Y		01198	Role Person		
ROL	5	26	TS	O			01199	Role Begin Date/Time		
ROL	6	26	TS	O			01200	Role End Date/Time		
ROL	7	250	CE	O			01201	Role Duration		
ROL	8	250	CE	O			01205	Role Action Reason		
ROL	9	250	CE	O	Y		01510	Provider Type		
ROL	10	250	CE	O		0406	01461	Organization Unit Type		
ROL	11	250	XAD	O	Y		00679	Office/Home Address/Birthplace		
ROL	12	250	XTN	O	Y		00678	Phone		

HL7 Table 0287 – Problem/goal action code		
Value	Description	Comment
AD	ADD	
CO	CORRECT	
DE	DELETE	
LI	LINK	
UC	UNCHANGED *	
UN	UNLINK	
UP	UPDATE	

Patient Death and Autopsy Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comment	Mapped
PDA	1	250	CE	O	[0..*]		01574	Death Cause Code		
PDA	2	80	PL	O	[0..1]		01575	Death Location		
PDA	3	1	ID	O	[0..1]	0136	01576	Death Certified Indicator		
PDA	4	26	TS	O	[0..1]		01577	Death Certificate Signed Date/Time		
PDA	5	250	XCN	O	[0..1]	0136	01578	Death Certified By		
PDA	6	1	ID	O	[0..1]		01579	Autopsy Indicator		
PDA	7	53	DR	O	[0..1]		01580	Autopsy Start and End Date/Time		
PDA	8	250	XCN	O	[0..1]		01581	Autopsy Performed By		
PDA	9	1	ID	O	[0..1]	0136	01582	Coroner Indicator		

Batch Trailer Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comment
BTS	1	10	ST	O	[0..1]		00093	Batch message count	
BTS	2	80	ST	O	[0..1]		00094	Batch comment	
BTS	3	100	NM	O	[0..1]		00095	Batch totals	

File Trailer Segment

Segment	Field	Length	Type	Req/Opt	RP/#	Table	ITEM #	Element Name	Comment
FTS	1	10	NM	O	[0..1]		00079	File batch count	
FTS	2	80	ST	O	[0..1]		00080	File trailer comment	

Race Type Table

Race	
Code	Type
10	WHITE
20	BLACK
50	HISPANIC
42	ALASKAN NATIVE
43	ALEUT
41	AMERICAN INDIAN
38	ASIAN - OTHER
36	ASIAN INDIAN
30	ASIAN OR PACIFIC ISLANDER
31	CHINESE
34	FILIPINO
3A	GUAMANIAN
33	HAWAIIAN
32	JAPANESE
35	KOREAN
40	NATIVE AMERICAN
80	OTHER
3B	SAMOAN
99	UNKNOWN
37	VIETNAMESE

Race Types	
1002-5	American Indian or Alaska Native
2028-9	Asian
2076-8	Native Hawaiian or Other Pacific Islander
2054-5	Black or African-American
2106-3	White
2135-2	Hispanic or Latino
2186-5	Other race
2131-1	Unknown

Relationship Code Table

Type	Relationship Description
BRO	Brother
CGV	Caregiver
DEP	Handicapped dependent
DOM	Life Partner
EMC	Emergency Contact
EME	Employee
EMR	Employer
EXF	Extended family
FCH	Foster Child
FND	Friend
FTH	Father
GCH	Grandchild
GRD	Guardian
GRP	Grandparent
MGR	Manager
MTH	Mother
NCH	Natural child
NON	None
OAD	Other adult
OTH	Other
OWN	Owner
PAR	Parent
SCH	Stepchild
SEL	Self
SIB	Sibling
SIS	Sister
SPO	Spouse
TRA	Trainer
UNK	Unknown
WRD	Ward of court
VAB	Vaccine administered by
FVP	Form completed by Vaccine provider
FPP	Form completed by Patient/Parent
FMN	Form completed by Manufacturer
FOT	Form completed by Other

VFC Status Table

Type	VFC Description
V00	VFC eligibility not determined/unknown
V01	Not VFC eligible
V02	VFC eligible-Medicaid/Medicaid Managed Care
V03	VFC eligible-Uninsured
V04	VFC eligible - American Indian/Alaskan Native
V05	VFC eligible - Federally Qualified Health Center Patient (under-insured)
V06	VFC eligible - State specific eligibility (e.g. S-CHIP plan)
V07	VFC eligibility - Local- specific eligibility

Address Type Table

Address	
Type	Description
C	Current or temporary
P	Permanent
M	Mailing
B	Firm/business
O	Office
H	Home
N	Birth
F	Country of origin
L	Legal Address
BDL	Birth delivery location
BRO	Residence at birth
RH	Registry home
BA	Bad address

Shot Route Table

Shot Route	
Type	Description
ID	Intradermal
IM	Intramuscular
IN	Intranasal
IV	Intravenous
PO	Oral
OTH	Orther/Miscellaneous
SCH	Subcutaneous
TD	Transdermal

Shot Site Table

Shot Site	
Type	Description
LT	Left Thigh
LA	Left Arm
LD	Left Deltoid
LG	Left Gluteous Medius
LVL	Left Vastus Lateralis
LLFA	Left Lower Forearm
RA	Right Arm
RT	Right Thigh
RVL	Right Vastus Lateralis
RG	Right Gluteus Medius
RD	Rigth Deltoid
RLFA	Right Lower Forearm

Telecom Type Table

HL7-defined Table 0200	
Type	Description
PRN	Primary residence number
ORN	Other residence number
WPN	Work number
VHN	Vacation home number
ASN	Answering service number
EMR	Emergency number
NET	Network (email) address
BPN	Beeper number

HL7-defined Table 0201	
Type	Description
PH	Telephone
FX	Fax
MD	Modem
CP	Cellular phone
BP	Beeper
Internet	Internet address: Use only if telecommunication use code is NET
X.400	X.400 email address: Use only if telecommunication use code is NET
TDD	Telecommunications Device for the Deaf
TTY	Teletypewriter

ID Type Table

Type	Identifier Type Description
SS	Social Security Number
MA	Medicaid Number
MC	Medicare Number
BRO	Birth Registry Number
U	Unspecified
AM	American Express
AN	Account Number
ANON	Anonymous Identifier
DI	Diner's Club Card
DL	Driver's License Number
DN	Doctor's Number
DS	Discover Card
EI	Employee Number
EN	Employer Number
FI	Facility Identifier
GI	Guarantee Internal Identifier
GN	Guarantee External Identifier
LN	License Number
LR	Local Registry ID
MS	MasterCard
MR	Medical Record Number
NET	National Employer Identifier
NH	National Health Plan Identifier
NPI	National Provide Identifier
PI	Patient Internal Identifier
PN	Person Number
PRN	Provider Number
PT	Patient External Identifier
RRI	Regional Registry ID
RRI	Railroad Retirement Number
SL	State License
SR	State Registry ID
UPIN	Meicare/CMS's Universal Physician ID Numbers
VS	Visa
VN	Visit Number
WC	WIC Identifier
XX	Organization Identifier
VEI	Vaccinatory Employee Number
OEI	Order Employee Number
REI	Recorder Employee Number
CS_ID	Cornerstone ID
TOTID	TOTS ID

Nationality Type Table

Type	Nationality Description
CAN	Canada
MEX	Mexico
USA	United State
UMI	United States Minor Outlying Islands

Manufacturer Type Table

Type	Manufacturer Description
AB	Abbot Laboratories (includes Ross Products Division)
ACA	Acambis, Inc
AD	Adams Laboratories, Inc.
ALP	Alpha Therapeutic Corporation
AR	Armour [inactive use ZLB]
AVB	Aventis Behrig L.L.C. (formerly Centeon L.L.C.; includes Armour Pharmaceutical Company [inactive use ZLB])
AVI	Aviron
BA	Baxter healthcare Corporation [inactive use BAH]
BAH	Baxter healthcare Corporation (includes Hyland Immuno, Immuno Internationl AG, and North American Vaccine, Inc.)
BAY	Bayer Corporation (includes Miles, Inc. and Cutter Laboratories)
BP	Berna Products [inactive use BPC]
BPC	Berna Products Corporation (includes Swiss Serum and Vaccine Institute Berne)
CNJ	Cagene Corporation
CEN	Centeon L.L.C. [inactive use ZLB]
CHI	Chiron Corporation [inactive use NOV]
CSL	CSL Biotherapies, Inc.
CMP	Celltech Medeva Pharmaceuticals [inactive use NOV]
CON	Connaught [inactive use PMC]
DVC	DynPort Vaccine Company, LLC
EVN	Evans Medical Limited [inactive use PMC]
GEO	Geo Vax Labs, Inc
GRE	Greer Laboratories, Inc.
IAG	Immuno International AG
IM	Merieux [inactive use PMC]
IUS	Immuno-U.S., Inc.
JPN	The Research Foundation for Microbial Deseases of Osaka University (BIKEN)
KGC	Korea Green Corsss Corporation
LED	Lederle [inactive use WAL]
MA	Massachusettes Public Health Biological Laboratories [inactive use MBL]
MBL	Massachusettes Biological Laboratories (formerly Massachusettes Public Health Biologic Laboratories)
MED	MedImmune, Inc.
MIL	Miles [inactive use BAY]
MIP	BioPort Corporation (formerly Michigan biologc Products Institute)
MSD	Merck & Co. Inc.
NAB	NABI (formerly Michigan Biologic Products Institute)
HYB	New York Blood Center
NAV	North American Vaccine, Inc. [inactive use BAH]
NOV	Novartis Pharmaceutical Corporation (includes Celltech Medeva Vaccines and Evans Medical Limited)
NVX	Novavax, Inc.
OTC	Organon Teknika Corporation
ORT	Ortho-Clinical Diagnostics (formerly Ortho Diagnostics Systems, Inc.)
PD	Parkedale pharmaceuticals (formerly Parke-Davis)
PMC	Aventis Pasteur Inc. (formerly Pasteur Merieux Connaught; includes Connaught Laboratories and Pasteur Merieux)
PRX	Praxis Biologics [inactive use WAL]
PWJ	PowerJect Pharmaceuticals (includes Celtech Medeva Vaccines and Evans Medical Limited) [inactive use NOV]
SCL	Sclavo, Inc.
SI	Swiss Serum and Vaccine Inst. [inactive use BPC]

Manufacturer Type Table

Type	Manufacturer Description
SKB	GlaxoSmithKline (formerly SmithKline Beecham; includes SmithKline Beecham and Glaxo Wellcome)
SOL	Solvay Pharmaceuticals
TAL	Talecris
USA	United States Army Medical Research and Materiel Command
VXG	VaxGen
WA	Wyeth-Ayerst [inactive use WAL]
WAL	Wyeth-Ayerst (includes Wyeth-Lederke Vaccines and Pediatrics, Wyeth Laboratories, Lederle Laboratories, and Prazis Biologics)
ZLB	ZLB Behring (includes Aventis Behring and Armour Pharmaceutical Company)
OTH	Other
UNK	Unknown Manufacturer

Contraindications Type Table

HL7 Type	Contraindications Description
01	recipient condition - unspecified
02	household condition - unspecified
03	allergy to baker's yeast (anaphylactic)
04	allergy to egg ingestion (anaphylactic)
05	allergy to gelatin (anaphylactic)
06	allergy to neomycin (anaphylactic)
07	allergy to streptomycin (anaphylactic)
08	allergy to thimerosal (anaphylactic)
09	allergy to previous dose of this vaccine or to any of its unlisted vaccine components (anaphylactic)
10	anaphylactic (life-threatening) reaction to previous dose of this vaccine or any of its components
11	collapse or shock like state within 48 hours of previous dose of DTP/DTaP
12	convulsions (fits, seizures) within 72 hours of previous dose of DTP/DTaP
13	persistent, inconsolable crying >=3 hours within 48 hours of previous dose of DTP/DTaP
14	current diarrhea, moderate to severe
15	encephalopathy within 7 days of previous dose of DTP or DTaP
16	current fever with moderate-to-severe illness
17	fever of >=40.5C (015F) within 48 hours of previous dose of DTP/DTaP
18	Guillain-Barre syndrome (GBS) within 6 weeks of previous dose of DTP/DTaP
19	[inactive use 36]
20	[inactive use 36]
21	current acute illness, moderate to severe (with or without fever) (e.g. diarrhea, otitis media, vomiting)
22	chronic illness (e.g. chronic gastrointestinal disease)
23	recent or simultaneous administration of an antibody-containing blood product (immune globulin)
24	immunity: diphtheria
25	immunity: Haemophilus influenza type B (Hib)
26	immunity: hepatitis B
27	immunity: measles
28	immunity: mumps
29	immunity: pertussis
30	immunity: poliovirus
31	immunity: rubella
32	immunity: tetanus
33	immunity: varicella
34	[inactive use 36]
35	[inactive use 36]
36	immunodeficiency due to any cause, including HIV (hematologic and solid tumors, congenital immunodeficiency, long-term immunosuppressive therapy, including steroids)
37	underlying unstable, evolving neurologic disorders, (including seizure disorders, cerebral palsy, and developmental delay)
38	otitis media (ear infection) moderate to severe (with or without fever)
39	pregnancy (in recipient)
40	thrombocytopenia
41	thrombocytopenic purpura (history)
42	other contraindication/precaution/immunity not listed (must add text component of the CE field with description)
43	Unknown (valid only for historical immunization)

Patient Registry Status Code Table

Patient Registry Status Code	
Type	Description
A	Active
I	Inactive
L	Inactive-Lost to follow-up (cannot contact)
M	Inactive-Moved or gone elsewhere (transferred)
P	Inactive-Permanently inactive (do not re-activate or add new entries to this record)
O	Other/unspecified
U	Unknown

Scenarios Table

Transaction	Description	Results	Action	Comments
VXU^V04	Unsolicited Vaccination Update	Record Found Record Not Found	Update Record Create New	
ADT^A31	Update Person Information	Record Found Record Not Found	Update Record Add New Record	