

Test Data for §170.314(b)(7) Data portability

Reference the test procedure for test data implementation.

Inpatient Setting

This section contains test data to be used as an illustration of 170.314(b)(7) in the inpatient setting. The test procedure for §170.314(b)(7) Data Portability requires the Tester to validate the expected results for an inpatient setting export summary. Three patients have been defined for this section:

- Patient 1 – James Smith
- Patient 2 – Eve Everywoman
- Patient 3 – Karl Kidd

TD170.314(b)(7) – 1.1: Patient 1, Encounter A

A) Patient Demographics

- Patient name: James Smith
- Sex: M
- Date of birth: 9/1/1965
- Race: White
- Ethnicity: Not Hispanic or Latino
- Preferred language: English

B) Care Team

- Dr. Bruce Healthy, Tel, 555-555-1009, Community General Hospital, 1009 Healthcare Dr. Portland, OR 97005

C) Encounter Diagnosis

- Cholelithiasis without obstruction, [SNOMED CT: 70342003], Start 10/2/2010, Active

D) Social History

- Smoking Status: Current every day smoker, [SNOMED-CT: 449868002], Start: 1984

E) Vital Signs

- Height: 74 in., 10/2/2010
- Weight: 205 lbs, 10/2/2010
- Blood Pressure: 132/86 mmHg, 11/1/2010
- BMI: 26.3, 10/2/2010

TD170.314(b)(7) – 1.2: Patient 1, Encounter B

A) Patient Demographics

- See TD170.314(b)(7) – 1.1: Patient 1, Encounter A, A) Patient Demographics

B) Encounter Diagnosis

- Pneumonia, [SNOMED-CT: 233604007], 11/1/2011, Active

C) Vital Signs

- Height: 74 in., 11/1/2011
- Weight: 218 lbs, 11/1/2011
- Blood Pressure: 141/87 mmHg, 11/1/2011
- BMI: 28, 11/1/2011

D) Immunizations

- Tetanus-diphtheria adult, [CVX: 09], 11/1/2011, Completed

E) Care Plan (Goals and Instructions)

Vendor supplied data that includes care plan goals and instructions are permitted.

- Goal: smoking cessation, [SNOMED CT: 225323000]
- Instructions: resources and instructions provided during visit

- Goal: weight loss, [SNOMED CT: 289169006]
- Instructions: diet and exercise counseling provided during visit

TD170.314(b)(7) – 1.3: Patient 1, Encounter C

A) Patient Demographics

- See TD170.314(b)(7) – 1.1: Patient 1, Encounter A, A) Patient Demographics

B) Encounter Diagnosis

- Essential Hypertension, [SNOMED-CT: 59621000], Test date, Active

C) Problems

- Essential Hypertension, [SNOMED-CT: 59621000], **Select any date**, Active
- Pneumonia, [SNOMED-CT: 233604007], Test date, Resolved
- Gout, [SNOMED-CT: 48440001], Test date, Active
- Diabetes Mellitus Type 2, [SNOMED-CT: 44054006], **Select any date**, Active
- Cholelithiasis, [SNOMED-CT: 77528005], 10/2/2010, Resolved

D) Medications

- Allopurinol, [RxNorm: 197319], Oral, **Select dose** (Range: 200 mg to 600 mg in multiples of 100) tablet, once daily, Test date, Active
- Clarithromycin, [RxNorm: 197517], Oral, **Select dose** (250 mg or 500 mg) tablet, twice daily for 7 days, Test date, Active
- Lisinopril, [RxNorm: 29046], Oral, **Select dose** (5 mg to 40 mg in multiples of 5) tablet, once daily, **Select any date**, Active

- Metformin hydrochloride Oral Tablet, Select dose: 500 mg [RxNorm: 861007] or 850 mg [RxNorm: 861010] tablet, twice daily, **Selected date**, Active

E) Medication Allergies

Allergen: Penicillin G benzathine, [RxNorm: 7982]

Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Codeine, [RxNorm: 2670]

Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Aspirin, [RxNorm: 1191]

Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

F) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Select value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Select value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Select value** (Range: 4.3 to 10.8) ($10^3/\text{ul}$), Test date
- PLT, [LOINC: 26515-7], **Select value** (Range: 150 to 400) ($10^3/\text{ul}$), Test date

G) Vital Signs

- Height: 74 in., Test date
- Weight: 218 lbs, Test date
- Blood Pressure: **Select systolic** (Range: 120 mmHg – 150 mmHg) **and select diastolic** (Range: 80 mmHg to 95 mmHg), Test date
- BMI: 28.0, Test date

H) Procedures

A Vendor-supplied SNOMED CT code for Nasal Swab or other procedure may be used in place of the ONC-supplied SNOMED CT code if the Vendor feels that an alternate SNOMED CT code is more appropriate for clinical purposes or product workflow.

- Nasal Swab, [SNOMED CT: 312882009], Date: Test Date
- Abdominal ultrasound, [SNOMED CT: 441987005], Date: 10/2/2011

I) Cognitive and Functional Status

- Dependence on Walking Stick, [SNOMED-CT: 105504002], Test Date, Active
- Memory Impairment, [SNOMED-CT: 386807006], Test Date, Active

J) Discharge Instructions

Mr. Smith, you were admitted to Community General Hospital on [one week prior to test date] with a diagnosis of community acquired pneumonia. You were treated with IV antibiotics for pneumonia and your condition improved. You were also treated for gout. You are being discharged from Community General Hospital today. Dr. Healthy has provided the following instructions for you at this time; should you have any questions prior to discharge, please contact a member of your healthcare team. If you have left the hospital and have any questions, please contact your primary care physician.

Instructions:

1. Take all medications as prescribed
2. Activity as tolerated
3. If you experience any of the following symptoms, call your primary care physician or return to the Emergency Room:
 - Chest pain
 - Shortness of breath
 - Dizziness or light-headedness
 - Intractable nausea or vomiting
 - Pain or redness at the site of any previous intravenous catheter
 - Any other unusual symptoms
1. Schedule a follow up appointment with your primary care physician in one week

TD170.314(b)(7) – 1.4: Patient 1, Expected Results

The Consolidated CDA conformant export summary for the test patient should include the information within this section, which represents a minimum compilation of most current clinical information for Data Portability across Inpatient encounters A through C for Patient 1. The Vendor may include additional longitudinal information for laboratory test results, immunizations, and procedures, and other data elements in the export summary; this information is encouraged, but is not required for the export summary in Consolidated CDA format.

A) Patient Demographics

- Patient name: James Smith
- Sex: M
- Date of birth: 9/1/1965
- Race: White
- Ethnicity: Not Hispanic or Latino
- Preferred language: English

B) Care Team

- Dr. Bruce Healthy, Tel, 555-555-1009, Community General Hospital, 1009 Healthcare Dr. Portland, OR 97005

C) Vital Signs

- Height: 74 in., Test date

- Weight: 218 lbs, Test date
- Blood Pressure: **Selected systolic** (Range: 120 mmHg – 150 mmHg) **and selected diastolic** (Range: 80 mmHg to 95 mmHg), Test date
- BMI: 28.0, Test date

D) Social History

- Smoking Status: Current every day smoker, [SNOMED-CT: 449868002], Start: 1984

E) Immunizations

- Tetanus-diphtheria adult, [CVX: 09], 10/2/2011, Completed

F) Care Plan (Goals and Instructions)

This section should contain the data used in Encounter B (Vendor supplied test data that includes care plan goals and instructions are permitted).

- Goal: smoking cessation, [SNOMED CT: 225323000]
- Instructions: resources and instructions provided during visit

- Goal: weight loss, [SNOMED CT: 289169006]
- Instructions: diet and exercise counseling provided during visit

G) Problems

- Essential Hypertension, [SNOMED-CT: 59621000], **Selected date**, Active
- Gout, [SNOMED-CT: 48440001], Test date, Active
- Diabetes Mellitus Type 2, [SNOMED-CT: 44054006], **Selected date**, Active

H) Medications

- Allopurinol, [RxNorm: 197319], Oral, **Selected dose** (Range: 200 mg to 600 mg in multiples of 100) tablet, once daily, Test date, Active
- Clarithromycin, [RxNorm: 197517], Oral, **Selected dose** (250 mg or 500 mg) tablet, twice daily for 7 days, Test date, Active
- Lisinopril, [RxNorm: 29046], Oral, **Selected dose** (5 mg to 40 mg in multiples of 5) tablet, once daily, **Selected date**, Active
- Metformin hydrochloride Oral Tablet, Select dose: 500 mg [RxNorm: 861007] or 850 mg [RxNorm: 861010] tablet, twice daily, **Selected date**, Active

I) Medication Allergies

Allergen: Penicillin G benzathine, [RxNorm: 7982]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Codeine, [RxNorm: 2670]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Aspirin, [RxNorm: 1191]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

J) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Selected value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Selected value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Selected value** (Range: 4.3 to 10.8) ($10^3/\text{ul}$), Test date
- PLT, [LOINC: 26515-7], **Selected value** (Range: 150 to 400) ($10^3/\text{ul}$), Test date

K) Procedures

- Nasal Swab, [SNOMED CT: 312882009] (or Vendor-supplied test data corresponding to TD170.314(b)(7) – 1.3: Patient 1, Encounter C, Procedures), Date: Test Date
- Abdominal ultrasound, [SNOMED CT: 441987005]

L) Cognitive and Functional Status

- Dependence on Walking Stick, [SNOMED-CT: 105504002], Test Date, Active
- Memory Impairment, [SNOMED-CT: 386807006], Test Date, Active

M) Discharge Instructions

Mr. Smith, you were admitted to Community General Hospital on [one week prior to test date] with a diagnosis of community acquired pneumonia. You were treated with IV antibiotics for pneumonia and your condition improved. You were also treated for gout. You are being discharged from Community General Hospital today. Dr. Healthy has provided the following instructions for you at this time; should you have any questions prior to discharge, please contact a member of your healthcare team. If you have left the hospital and have any questions, please contact your primary care physician.

Instructions:

1. Take all medications as prescribed
2. Activity as tolerated
3. If you experience any of the following symptoms, call your primary care physician or return to the Emergency Room:
 - Chest pain
 - Shortness of breath
 - Dizziness or light-headedness
 - Intractable nausea or vomiting
 - Pain or redness at the site of any previous intravenous catheter
 - Any other unusual symptoms
4. Schedule a follow up appointment with your primary care physician in one week

TD170.314(b)(7) – 2.1: Patient 2, Encounter A

A) Patient Demographics

- Patient name: Eve Everywoman
- Sex: F
- Date of birth: 6/21/1942
- Race: Black
- Ethnicity: Not Hispanic or Latino
- Preferred language: English

B) Care Team

- Dr. Stanley Sage, Tel, 555-555-1034, Local Community Hospital, 1034 Healthcare Dr. Portland, OR 97005

C) Encounter Diagnosis

- Alzheimer disease, [SNOMED CT: 26929004], Start 3/12/2011, Active

D) Social History

- Smoking Status: Unknown if ever smoked, [SNOMED-CT: 266927001]

E) Vital Signs

- Height: 64 in.
- Weight: 130 lbs
- Blood Pressure: 132/86 mmHg
- BMI: 22.3

TD170.314(b)(7) – 2.2: Patient 2, Encounter B

A) Patient Demographics

- See TD170.314(b)(7) – 2.1: Patient 2, Encounter A, A) Patient Demographics

B) Encounter Diagnosis

- Pneumonia, [SNOMED-CT: 233604007], 10/2/2011, Active

C) Vital Signs

- Height: 64 in.
- Weight: 125 lbs
- Blood Pressure: 141/87 mmHg
- BMI: 21.5

D) Medications

- Clarithromycin, [RxNorm: 197517], Oral, **Select dose** (250 mg or 500 mg) tablet, twice daily for 7 days, 10/2/2011, Active

E) Immunizations

- Influenza virus vaccine [CVX: 88], 11/1/2005, Completed

F) Care Plan (Goals and Instructions)

- Vendor supplied data.

TD170.314(b)(7) – 2.3: Patient 2, Encounter C

A) Patient Demographics

- See TD170.314(b)(7) – 2.1: Patient 2, Encounter A, A) Patient Demographics

B) Encounter Diagnosis

- Asthma, [SNOMED-CT: 195967001], Test date, Active

C) Problems

- Asthma, [SNOMED-CT: 195967001], Test date, Active
- Diabetes Mellitus Type 2, [SNOMED-CT: 44054006], **Select any date**, Active
- Alzheimer disease, [SNOMED CT: 26929004], 3/12/2011, Active
- Pneumonia, [SNOMED-CT: 233604007], 10/2/11, Resolved

D) Medications

- Albuterol 0.09 MG/ ACTUAT Metered Dose Inhaler [RxNorm: 745679], 2 puffs once, Test date
- Metformin hydrochloride Oral Tablet, Select dose: 500 mg [RxNorm: 861007] or 850 mg [RxNorm: 861010] tablet, twice daily, **Selected date for Diabetes Mellitus Type 2 above**, Active
- Clarithromycin, [RxNorm: 197517], Oral, **Select dose** (250 mg or 500 mg) tablet, twice daily for 7 days, 10/2/2011, \ Inactive

E) Medication Allergies

Allergen: Penicillin G benzathine, [RxNorm: 7982]

Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Codeine, [RxNorm: 2670]

Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Aspirin, [RxNorm: 1191]

Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

F) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Select value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Select value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Select value** (Range: 4.3 to 10.8) ($10^3/\text{ul}$), Test date
- PLT, [LOINC: 26515-7], **Select value** (Range: 150 to 400) ($10^3/\text{ul}$), Test date

G) Vital Signs

- Height: 64 in.
- Weight: 127 lbs
- Blood Pressure: **Select systolic** (Range: 120 mmHg – 150 mmHg) **and diastolic** (Range: 80 mmHg to 95 mmHg)
- BMI: 21.8

H) Procedures

A Vendor-supplied SNOMED CT code for Nasal Swab or other procedure may be used in place of the ONC-supplied SNOMED CT code if the Vendor feels that an alternate SNOMED CT code is more appropriate for clinical purposes or product workflow.

- Nasal Swab, [SNOMED CT: 312882009], Date: Test date
- Abdominal Ultrasound, [SNOMED CT: 441987005]

I) Cognitive and Functional Status

- Dependence on Walking Stick, [SNOMED-CT: 105504002], Test date, Active
- Memory Impairment, [SNOMED-CT: 386807006], Test date, Active

J) Discharge Instructions

Ms. Everywoman, you were admitted to Local Community Hospital on [test date] with a diagnosis of asthma. You were treated with 2 puffs of albuterol and your condition improved. You are being discharged from Local Community Hospital today. Dr. Sage has provided the following instructions for you at this time; should you have any questions prior to discharge, please contact a member of your healthcare team. If you have left the hospital and have any questions, please contact your primary care physician.

Instructions:

1. Take all medications as prescribed
2. Activity as tolerated
3. If you experience any of the following symptoms, call your primary care physician or return to the Emergency Room:
 - Chest pain
 - Shortness of breath
 - Dizziness or light-headedness
 - Intractable nausea or vomiting
 - Any other unusual symptoms
4. Schedule a follow up appointment with your primary care physician in one week

TD170.314(b)(7) – 2.4: Patient 2, Expected Results

The Consolidated CDA conformant export summary for the test patient should include the information within this section, which represents a minimum compilation of most current clinical information for Data Portability across Inpatient encounters A through C for Patient 2. The Vendor may include additional longitudinal information for laboratory test results, immunizations, and procedures, and other data elements in the export summary; this information is encouraged, but is not required for the export summary in Consolidated CDA format.

A) Patient Demographics

- Patient name: Eve Everywoman
- Sex: F
- Date of birth: 6/21/1942
- Race: Black
- Ethnicity: Not Hispanic or Latino
- Preferred language: English

B) Care Team

- Dr. Stanley Sage, Tel, 555-555-1034, Local Community Hospital, 1034 Healthcare Dr. Portland, OR 97005

C) Encounter Diagnosis

- Asthma, [SNOMED-CT: 195967001], Test date, Active

D) Vital Signs

- Height: 64 in., Test date
- Weight: 127 lbs, Test date
- Blood Pressure: **Selected systolic** (Range: 120 mmHg – 150 mmHg) **and selected diastolic** (Range: 80 mmHg to 95 mmHg), Test date
- BMI: 21.8, Test date

E) Social History

- Smoking Status: Unknown if ever smoked, [SNOMED-CT: 266927001]

F) Immunizations

- Influenza virus vaccine [CVX: 88], 11/1/2005, Completed

G) Care Plan (Goals and Instructions)

This section should contain the data used in Encounter B (Vendor supplied test data that includes care plan goals and instructions).

H) Problems

- Asthma, [SNOMED-CT: 195967001], Test date, Active
- Diabetes Mellitus Type 2, [SNOMED-CT: 44054006], **Selected date**, Active
- Alzheimer disease, [SNOMED CT: 26929004], 3/12/2011, Active

I) Medications

- Albuterol 0.09 MG/ ACTUAT Metered Dose Inhaler [RxNorm: 745679], 2 puffs once
- Metformin hydrochloride Oral Tablet, Select dose: 500 mg [RxNorm: 861007] or 850 mg [RxNorm: 861010] tablet, twice daily, **Selected date**, Active

J) Medication Allergies

Allergen: Penicillin G benzathine, [RxNorm: 7982]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Codeine, [RxNorm: 2670]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Aspirin, [RxNorm: 1191]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

K) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Selected value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Selected value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Selected value** (Range: 4.3 to 10.8) ($10^3/\text{ul}$), Test date
- PLT, [LOINC: 26515-7], **Selected value** (Range: 150 to 400) ($10^3/\text{ul}$), Test date

L) Procedures

- Nasal Swab, [SNOMED CT: 312882009] (or Vendor-supplied test data corresponding to TD170.314(b)(7) – 2.3: Patient 2, Encounter C, Procedures), Date: Test date
- Abdominal Ultrasound, [SNOMED CT: 441987005], Date: 10/2/2011

K) Cognitive and Functional Status

- Dependence on Walking Stick, [SNOMED-CT: 105504002], Test date, Active
- Memory Impairment, [SNOMED-CT: 386807006], Test date, Active

L) Discharge Instructions

Ms. Everywoman, you were admitted to Local Community Hospital on [Test date] with a diagnosis of asthma. You were treated with 2 puffs of albuterol and your condition improved. You are being discharged from Local Community Hospital today. Dr. Sage has provided the following instructions for you at this time; should you have any questions prior to discharge, please contact a member of your healthcare team. If you have left the hospital and have any questions, please contact your primary care physician.

Instructions:

1. Take all medications as prescribed
2. Activity as tolerated

3. If you experience any of the following symptoms, call your primary care physician or return to the Emergency Room:
 - Chest pain
 - Shortness of breath
 - Dizziness or light-headedness
 - Intractable nausea or vomiting
 - Any other unusual symptoms
4. Schedule a follow up appointment with your primary care physician in one week”

TD170.314(b)(7) – 3.1: Patient 3, Encounter A

A) Patient Demographics

- Patient name: Karl Kidd
- Sex: M
- Date of birth: 10/22/2000
- Race: White
- Ethnicity: Not Hispanic or Latino
- Preferred language: English

B) Care Team

- Dr. Karen K. Kidder, Tel, 555-555-1046, Local Community Hospital, 1044 Healthcare Dr., Portland, OR 97005

C) Encounter Diagnosis

- Asthma, [SNOMED-CT: 195967001], 3/15/2010, Active

D) Social History

- Smoking Status: Never smoker, [SNOMED-CT: 266919005]

E) Vital Signs

- Height: 62 in.
- Weight: 134 lbs
- Blood Pressure: 89/62 mmHg
- BMI: 24.5

TD170.314(b)(7) – 3.2: Patient 3, Encounter B

A) Patient Demographics

- See TD170.314(b)(7) – 3.1: Patient 3, Encounter A: A) Patient Demographics

B) Care Team

- See TD170.314(b)(7) – 3.1: Patient 3, Encounter A: B) Care Team

C) Encounter Diagnosis

- Asthma, [SNOMED-CT: 195967001], 3/12/2011, Active

D) Social History

- Smoking Status: Never smoker, [SNOMED-CT: 266919005]

E) Vital Signs

- Height: 66 in.
- Weight: 140 lbs
- Blood Pressure: 92/64 mmHg
- BMI: 22.6

F) Immunizations

- Measles, Mumps and Rubella virus vaccine, [CVX: 03], 3/12/2011, Completed

G) Care Plan (Goals and Instructions)

Vendor supplied data that includes care plan goals and instructions are permitted.

- Goal: Asthma Management, [SNOMED CT: 406162001]
- Instructions: resources and instructions provided during visit

TD170.314(b)(7) – 3.3: Patient 3, Encounter C

A) Patient Demographics

- See TD170.314(b)(7) – 3.1: Patient 3, Encounter A: A) Patient Demographics

B) Care Team

- See TD170.314(b)(7) – 3.1: Patient 3, Encounter A: B) Care Team

C) Encounter Diagnosis

- Flu-like illness, [SNOMED-CT: 95891005], Test date, Active

D) Problems

- Flu-like illness, [SNOMED-CT: 95891005], Test date, Active
- Asthma, [SNOMED-CT: 195967001], **select any date**, Active

E) Medications

- Oseltamivir 30 MG Oral Capsule [Tamiflu], [RxNorm: 728111], 30 MG every 12 hours until all consumed, Test date, Active
- Albuterol 0.09 MG/ACTUAT Metered Dose Inhaler, [RxNorm: 745679], 2 puffs every 6 hours PRN wheezing, **select any date**, Active

F) Medication Allergies

Allergen: No known allergies

G) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Select value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Select value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Select value** (Range: 4.3 to 10.8) (10³/ul), Test date
- PLT, [LOINC: 26515-7], **Select value** (Range: 150 to 400) (10³/ul), Test date

H) Vital Signs

- Height: 67 in.
- Weight: 150 lbs
- Blood Pressure: **Select systolic** (Range: 120 mmHg – 150 mmHg) **and select diastolic** (Range: 80 mmHg to 95 mmHg)
- BMI: 23.5

I) Procedures

A Vendor-supplied SNOMED CT code for Nasal Swab or other procedure may be used in place of the ONC-supplied SNOMED CT code if the Vendor feels that an alternate SNOMED CT code is more appropriate for clinical purposes or product workflow.

- Nasal Swab, [SNOMED CT: 312882009], Date: Test date

J) Cognitive and Functional Status

- No impairment, [SNOMED-CT: 66557003], Test date, Active

K) Discharge Instructions

Mr. Kidd, you were admitted to Local Community Hospital on [Test date] with a diagnosis of flu-like illness and on-going issues related to your asthma. You were treated with 2 puffs of albuterol and your condition improved; you were also given a prescription for Tamiflu that you must complete. You are being discharged from Local Community Hospital today. Dr. Kidder has provided the following instructions for you at this time; should you have any questions prior to discharge, please contact a member of your healthcare team. If you have left the hospital and have any questions, please contact your primary care physician.

Instructions:

1. Take all medications as prescribed
2. Activity as tolerated

3. If you experience any of the following symptoms, call your primary care physician or return to the Emergency Room:
 - Chest pain
 - Shortness of breath
 - Dizziness or light-headedness
 - Intractable nausea or vomiting
 - Any other unusual symptoms
4. Schedule a follow up appointment with your primary care physician in one week

TD170.314(b)(7) – 3.4: Patient 3, Expected Results

The Consolidated CDA conformant export summary for the test patient should include the information within this section, which represents a minimum compilation of most current clinical information for Data Portability across Inpatient encounters A through C for Patient 2. The Vendor may include additional longitudinal information for laboratory test results, immunizations, and procedures, and other data elements in the export summary; this information is encouraged, but is not required for the export summary in Consolidated CDA format.

A) Patient Demographics

- Patient name: Karl Kidd
- Sex: M
- Date of birth: 10/22/2000
- Race: White
- Ethnicity: Not Hispanic or Latino
- Preferred language: English

B) Care Team

- Dr. Karen K. Kidder, Tel, 555-555-1046, Local Community Hospital, 1044 Healthcare Dr., Portland, OR 97005

C) Encounter Diagnosis

- Flu-like illness, [SNOMED-CT: 95891005], Test date, Active

D) Care Plan (Goals and Instructions)

This section should contain the data used in Encounter B (Vendor supplied test data that includes care plan goals and instructions are permitted).

- Goal: Asthma Management, [SNOMED CT: 406162001]
- Instructions: resources and instructions provided during visit

E) Vital Signs

- Height: 67 in.
- Weight: 150 lbs
- Blood Pressure: **Selected systolic** (Range: 120 mmHg – 150 mmHg) **and selected diastolic** (Range: 80 mmHg to 95 mmHg)

- BMI: 23.5

F) Social History

- Smoking Status: Never smoker, [SNOMED-CT: 266919005]

G) Immunizations

- Measles, Mumps and Rubella virus vaccine, [CVX: 03], 3/12/2011, Completed

H) Problems

- Flu-like illness, [SNOMED-CT: 95891005], Test date, Active
- Asthma, [SNOMED-CT: 195967001], **selected date**, Active

I) Medications

- Oseltamivir 30 MG Oral Capsule [Tamiflu], [RxNorm: 728111], 30 MG every 12 hours until all consumed, Test date, Active
- Albuterol 0.09 MG/ACTUAT Metered Dose Inhaler, [RxNorm: 745679], 2 puffs every 6 hours PRN wheezing, **selected date**, Active

J) Medication Allergies

Allergen: No known allergies

K) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Selected value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Selected value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Selected value** (Range: 4.3 to 10.8) (10^3 /ul), Test date
- PLT, [LOINC: 26515-7], **Selected value** (Range: 150 to 400) (10^3 /ul), Test date

L) Procedures

- Nasal Swab, [SNOMED CT: 312882009] (or Vendor-supplied test data corresponding to TD170.314(b)(7) – 3.3: Patient 3, Encounter C, Procedures), Date: Test date

L) Cognitive and Functional Status

- No impairment, [SNOMED-CT: 66557003], Test date, Active

M) Discharge Instructions

Mr. Kidd, you were admitted to Local Community Hospital on [Test date] with a diagnosis of flu-like illness and on-going issues related to your asthma. You were treated with 2 puffs of albuterol and your condition improved; you were also given a prescription for Tamiflu that you must complete. You are being discharged from Local Community Hospital today. Dr. Kidder has provided the following instructions for you at this time; should you have any questions prior to discharge, please contact a member of your healthcare team. If you have left the hospital and have any questions, please contact your primary care physician.

Instructions:

1. Take all medications as prescribed
2. Activity as tolerated

3. If you experience any of the following symptoms, call your primary care physician or return to the Emergency Room:
 - Chest pain
 - Shortness of breath
 - Dizziness or light-headedness
 - Intractable nausea or vomiting
 - Any other unusual symptoms
4. Schedule a follow up appointment with your primary care physician in one week

Ambulatory Setting

This section contains test data to be used as an illustration of 170.314 (b)(7) in the ambulatory setting. The test procedure for §170.314(b)(7) Data Portability requires the Tester to validate the expected results for an ambulatory setting export summary. Three patients, with three encounters each, have been defined for this section:

- TD170.314(b)(7) – 4: Patient 4 – Maria Hernandez
- TD170.314(b)(7) – 5: Patient 5 – Adam Everyman
- TD170.314(b)(7) – 6: Patient 6 – Kari Kidd

TD170.314(b)(7) – 4.1 Patient 4, Encounter A

A) Patient Demographics

- Patient name: Maria Hernandez
- Sex: F
- Date of birth: 2/18/1966
- Race: White
- Ethnicity: Hispanic or Latino
- Preferred language: Spanish

B) Care Team

- Dr. James Getwell, Tel, 555-555-1009, Get Well Clinic, 1002 Healthcare Dr. Portland, OR 97005

C) Encounter Diagnosis

- Acute pharyngitis [SNOMED CT: 363746003], Start: 10/28/2011, Active

D) Social History

- Smoking Status: Never smoker, [SNOMED-CT: 266919005]

E) Vital Signs

- Height: 64 in.
- Weight: 150 lbs
- Blood Pressure: 114/76 mmHg
- BMI: 25.7

TD170.314(b)(7) – 4.2: Patient 4, Encounter B

A) Patient Demographics

- See TD170.314(b)(7) – 4.1: Patient 4, Encounter A: A) Patient Demographics

B) Care Team

- See TD170.314(b)(7) – 4.1: Patient 4, Encounter A: B) Care Team

C) Encounter Diagnosis

- Essential hypertension, [SNOMED CT: 59621000], Start: 9/25/2012, Active

D) Social History

- Smoking Status: Current some day smoker, [SNOMED-CT: 428041000124106], Start: 2012

E) Vital Signs

- Height: 64 in.
- Weight: 155 lbs
- Blood Pressure: 155/94 mmHg
- BMI: 26.6

F) Immunizations

- Influenza virus vaccine, [CVX: 88], 9/25/2010, Completed

G) Care Plan (Goals and Instructions)

Vendor supplied data that includes care plan goals and instructions are permitted.

- Goal: smoking cessation, [SNOMED CT: 225323000]
- Instructions: resources and instructions provided during visit

- Goal: weight loss, [SNOMED CT: 289169006]
- Instructions: diet and exercise counseling provided during visit

- Preventative Health: annual pap smear, biennial screening mammogram, and annual clinical breast exam

TD170.314(b)(7) – 4.3: Patient 4, Encounter C

A) Patient Demographics

- See TD170.314(b)(7) – 4.1: Patient 4, Encounter A: A) Patient Demographics

B) Care Team

- Dr. Patricia Primary, Tel, 555-555-1004, Get Well Clinic, 1002 Healthcare Dr., Portland, OR 97005

C) Encounter Diagnosis

- Pneumonia, [SNOMED CT: 233604007], Start: Test date, Active

D) Problems

- Pneumonia, [SNOMED-CT: 233604007], Test date, Active
- Essential hypertension, [SNOMED-CT: 59621000], 9/25/2012, Active
- Asthma, [SNOMED-CT: 195967001], **Select any date**, Active
- Acute pharyngitis, [SNOMED-CT: 363746003], Select any date after 10/28/2011, Resolved

E) Medications

- Azithromycin, [RxNorm: 141962], Oral, Take 500 mg on day 1, then 250 mg tablet once daily for next 4 days, Test date, Active
- Metoprolol tartrate, [RxNorm: 866924], Oral, Select dose (5 mg to 40 mg in multiples of 5) tablet, once daily, **Select any date**, Active
- Proventil 0.09 MG/ACTUAT metered dose, [RxNorm: 202908], Inhalant, 0.09 MG/ACTUAT metered dose, 2 puffs QID PRN wheezing, **Select any date**, Active

F) Medication Allergies

Allergen: Penicillin G benzathine, [RxNorm: 7982]

Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Codeine, [RxNorm: 2670]

Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Aspirin, [RxNorm: 1191]

Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

G) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Select value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Select value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Select value** (Range: 4.3 to 10.8) ($10^3/\text{ul}$), Test date
- PLT, [LOINC: 26515-7], **Select value** (Range: 150 to 400) ($10^3/\text{ul}$), Test date

H) Vital Signs

- Height: 64 in.
- Weight: 162 lbs
- Blood Pressure: **Select systolic** (Range: 120 mmHg – 150 mmHg) **and diastolic** (Range: 80 mmHg to 95 mmHg)
- BMI: 27.8

I) Procedures

A Vendor-supplied SNOMED CT code for Nasal Swab or other procedure may be used in place of the ONC-supplied SNOMED CT code if the Vendor feels that an alternate SNOMED CT code is more appropriate for clinical purposes or product workflow.

- Nasal Swab, [SNOMED CT: 312882009], Date: Test Date

J) Cognitive and Functional Status

- No impairment, [SNOMED-CT: 66557003], Test Date, Active

K) Referral

- Pulmonary function tests, Dr. George Lung, Tel: 555-555-1049, 987 Anymed Way, Portland, OR 97005, Scheduled Date: Test Date + 7 days

TD170.314(b)(7) – 4.4: Patient 4, Expected Results

The Consolidated CDA conformant export summary for the test patient should include the information within this section, which represents a minimum compilation of most current clinical information for Data Portability across Ambulatory encounters A through C for Patient 4. The Vendor may include additional longitudinal information for laboratory test results, immunizations, and procedures, and other data elements in the export summary; this information is encouraged, but is not required for the export summary in Consolidated CDA format.

A) Patient Demographics

- Patient name: Maria Hernandez
- Sex: F
- Date of birth: 2/18/1966
- Race: White
- Ethnicity: Hispanic or Latino
- Preferred language: Spanish

B) Care Team

- Dr. James Getwell, Tel, 555-555-1009, Get Well Clinic, 1002 Healthcare Dr. Portland, OR 97005
- Dr. Patricia Primary, Tel, 555-555-1004, Get Well Clinic, 1002 Healthcare Dr., Portland, OR 97005

C) Encounter Diagnosis

- Pneumonia, [SNOMED CT: 233604007], Start: Test date, Active

D) Social History

- Smoking Status: Current some day smoker, [SNOMED-CT: 428041000124106], Start: 2012

E) Medication Allergies

Allergen: Penicillin G benzathine, [RxNorm: 7982]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Codeine, [RxNorm: 2670]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Aspirin, [RxNorm: 1191]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

F) Medications

- Azithromycin, [RxNorm: 141962], Oral, Take 500 mg on day 1, then 250 mg tablet once daily for next 4 days, Test date, Active
- Metoprolol tartrate, [RxNorm: 866924], Oral, Select dose (5 mg to 40 mg in multiples of 5) tablet, once daily, **Selected date**, Active
- Proventil 0.09 MG/ACTUAT metered dose, [RxNorm: 202908], Inhalant, 0.09 MG/ACTUAT metered dose, 2 puffs QID PRN wheezing, **Selected date**, Active

G) Problems

- Pneumonia, [SNOMED-CT: 233604007], Test date, Active
- Essential hypertension, [SNOMED-CT: 59621000], 9/25/2012, Active
- Asthma, [SNOMED-CT: 195967001], **Selected date**, Active

H) Procedures

- Nasal Swab, [SNOMED CT: 312882009] (or Vendor-supplied test data corresponding to TD170.314(b)(7) – 4.3: Patient 4, Encounter C, Procedures), Date: Test Date

I) Vital Signs

- Height: 64 in.
- Weight: 162 lbs
- Blood Pressure: **Selected systolic** (Range: 120 mmHg – 150 mmHg) **and selected diastolic** (Range: 80 mmHg to 95 mmHg)
- BMI: 27.8

J) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Selected value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Selected value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Selected value** (Range: 4.3 to 10.8) ($10^3/\text{ul}$), Test date
- PLT, [LOINC: 26515-7], **Selected value** (Range: 150 to 400) ($10^3/\text{ul}$), Test date

K) Immunizations

- Influenza virus vaccine, [CVX: 88], 9/25/2010, Completed

L) Care Plan (Goals and Instructions)

This section should contain the data used in Encounter B (Vendor supplied test data that includes care plan goals and instructions are permitted).

- Goal: smoking cessation, [SNOMED CT: 225323000]
- Instructions: resources and instructions provided during visit

- Goal: weight loss, [SNOMED CT: 289169006]
- Instructions: diet and exercise counseling provided during visit

- Preventative Health: annual pap smear, biennial screening mammogram, and annual clinical breast exam

M) Functional and Cognitive Status

- No impairment, [SNOMED-CT: 66557003], Test Date, Active

N) Referral

- Pulmonary function tests, Dr. George Lung, Tel: 555-555-1049, 987 Anymed Way, Portland, OR 97005, Scheduled Date: Test Date + 7 days

TD170.314(b)(7) – 5.1: Patient 5, Encounter A

A) Patient Demographics

- Patient name: Adam Everyman
- Sex: M
- Date of birth: 10/22/1962
- Race: White
- Ethnicity: Not Hispanic or Latino
- Preferred language: English

B) Care Team

- Dr. Henry L. Seven, Tel, 555-555-1002, Get Well Clinic, 1002 Healthcare Dr., Portland, OR 97005

C) Encounter Diagnosis

- Asthma, [SNOMED-CT: 195967001], 9/25/2011, Active

D) Social History

- Smoking Status: Never smoker, [SNOMED-CT: 266919005]

E) Vital Signs

- Height: 70 in.
- Weight: 180 lbs
- Blood Pressure: 120/75 mmHg
- BMI: 25.8

TD170.314(b)(7) – 5.2: Patient 5, Encounter B

A) Patient Demographics

- See TD170.314(b)(7) – 5.1: Patient 5, Encounter A: A) Patient Demographics

B) Care Team

- See TD170.314(b)(7) – 5.1 Patient 5, Encounter A: B) Care Team

C) Encounter Diagnosis

- Essential hypertension, [SNOMED CT: 59621000], Start: 3/30/2012, Active

D) Social History

- Smoking Status: Smoker, current status unknown, [SNOMED-CT: 77176002], Start: 2011

E) Vital Signs

- Height: 70 in.
- Weight: 195 lbs
- Blood Pressure: 160/98 mmHg
- BMI: 28

F) Immunizations

- Influenza virus vaccine, [CVX: 88], 3/30/2010, Completed

G) Care Plan (Goals and Instructions)

Vendor supplied data that includes care plan goals and instructions are permitted.

- Goal: smoking cessation, [SNOMED CT: 225323000]
- Instructions: resources and instructions provided during visit

- Goal: weight loss, [SNOMED CT: 289169006]
- Instructions: diet and exercise counseling provided during visit

TD170.314(b)(7) – 5.3: Patient 5, Encounter C

A) Patient Demographics

- See TD170.314(b)(7) – 5.1: Patient 5, Encounter A: A) Patient Demographics

B) Care Team

- See TD170.314(b)(7) – 5.1 Patient 5, Encounter A: B) Care Team

C) Encounter Diagnosis

- Pneumonia, [SNOMED-CT: 233604007], Test date, Active

D) Problems

- Asthma, [SNOMED-CT: 195967001], 9/25/2011, Active
- Pneumonia, [SNOMED-CT: 233604007], Test date, Active
- Essential hypertension, [SNOMED-CT: 59621000], 3/30/2012, Active
- Acute pharyngitis, [SNOMED-CT: 363746003], 10/28/2011, **Select any date after 10/28/2011**, Resolved

E) Medications

- Azithromycin 250 MG Oral Capsule, [RxNorm: 141962], Take 500 mg on day 1, then 250 mg tablet once daily for next 4 days, Test date, Active
- Albuterol 0.09 MG/ACTUAT Metered Dose Inhaler, [RxNorm: 745679], 2 puffs every 6 hours PRN wheezing, **select any date**, Active

F) Medication Allergies

Allergen: Penicillin G benzathine, [RxNorm: 7982]
Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)
Status: Vendor supplied (for example, Active)

Allergen: Codeine, [RxNorm: 2670]
Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)
Status: Vendor supplied (for example, Active)

Allergen: Aspirin, [RxNorm: 1191]
Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)
Status: Vendor supplied (for example, Active)

G) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Select value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Select value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Select value** (Range: 4.3 to 10.8) (10³/ul), Test date
- PLT, [LOINC: 26515-7], **Select value** (Range: 150 to 400) (10³/ul), Test date

H) Vital Signs

- Height: 70 in.
- Weight: 162 lbs
- Blood Pressure: **Select systolic** (Range: 120 mmHg – 150 mmHg) **and diastolic** (Range: 80 mmHg to 95 mmHg)
- BMI: 23.2

I) Procedures

A Vendor-supplied SNOMED CT code for Nasal Swab or other procedure may be used in place of the ONC-supplied SNOMED CT code if the Vendor feels that an alternate SNOMED CT code is more appropriate for clinical purposes or product workflow.

- Nasal Swab, [SNOMED CT: 312882009], Date: Test Date

J) Cognitive and Functional Status

- No impairment, [SNOMED-CT: 66557003], Test Date, Active

K) Referral

- Pulmonary function tests, Dr. Penny Puffer, Tel: 555-555-1049, 1047 Healthcare Drive, Portland, OR 97005, Scheduled Date: Test Date + 7 days

TD170.314(b)(7) – 5.4: Patient 5, Expected Results

The Consolidated CDA conformant export summary for the test patient should include the information within this section, which represents a minimum compilation of most current clinical information for Data Portability across Ambulatory encounters A through C for Patient 5. The Vendor may include additional longitudinal information for laboratory test results, immunizations, and procedures, and other data elements in the export summary; this information is encouraged, but is not required for the export summary in Consolidated CDA format.

A) Patient Demographics

- Patient name: Adam Everyman
- Sex: M
- Date of birth: 10/22/1962
- Race: White
- Ethnicity: Not Hispanic or Latino
- Preferred language: English

B) Care Team

- Dr. Henry L. Seven, Tel, 555-555-1002, Get Well Clinic, 1002 Healthcare Dr., Portland, OR 97005

C) Encounter Diagnosis

- Pneumonia, [SNOMED-CT: 233604007], Test date, Active

D) Vital Signs

- Height: 70 in.
- Weight: 162 lbs
- Blood Pressure: **Selected systolic** (Range: 120 mmHg – 150 mmHg) **and selected diastolic** (Range: 80 mmHg to 95 mmHg)
- BMI: 23.2

E) Social History

- Smoking Status: Smoker, current status unknown, [SNOMED-CT: 77176002], Start: 2011

F) Immunizations

- Influenza virus vaccine, [CVX: 88], 3/30/2010, Completed

G) Care Plan (Goals and Instructions) - 3/30/2012

This section should contain the data used in Encounter B (Vendor supplied test data that includes care plan goals and instructions are permitted).

- Goal: smoking cessation, [SNOMED CT: 225323000]
- Instructions: resources and instructions provided during visit

- Goal: weight loss, [SNOMED CT: 289169006]
- Instructions: diet and exercise counseling provided during visit

H) Problems

- Asthma, [SNOMED-CT: 195967001], 9/25/2011, Active
- Pneumonia, [SNOMED-CT: 233604007], Test date, Active
- Essential hypertension, [SNOMED-CT: 59621000], 3/30/2012, Active

I) Medications

- Azithromycin 250 MG Oral Capsule, [RxNorm: 141962], Take 500 mg on day 1, then 250 mg tablet once daily for next 4 days, Test date, Active
- Albuterol 0.09 MG/ACTUAT Metered Dose Inhaler [RxNorm: 745679], 2 puffs every 6 hours PRN wheezing, **selected date**, Active

J) Medication Allergies

Allergen: Penicillin G benzathine, [RxNorm: 7982]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Codeine, [RxNorm: 2670]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

Allergen: Aspirin, [RxNorm: 1191]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

K) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Selected value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Selected value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Selected value** (Range: 4.3 to 10.8) (10³/ul), Test date

- PLT, [LOINC: 26515-7], **Selected value** (Range: 150 to 400) ($10^3/\text{ul}$), Test date

L) Procedures

- Nasal Swab, [SNOMED CT: 312882009] (or Vendor-supplied test data corresponding to TD170.314(b)(7) – 5.3: Patient 5, Encounter C, Procedures), Date: Test Date

M) Cognitive and Functional Status

- No impairment, [SNOMED-CT: 66557003], Test Date, Active

N) Referral

- Pulmonary function tests, Dr. Penny Puffer, Tel: 555-555-1049, 1047 Healthcare Drive, Portland, OR 97005, Scheduled Date: Test Date + 7 days

TD170.314(b)(7) – 6.1: Patient 6, Encounter A

A) Patient Demographics

- Patient name: Kari Kidd
- Sex: F
- Date of birth: 10/22/2000
- Race: White
- Ethnicity: Not Hispanic or Latino
- Preferred language: English

B) Care Team

- Dr. Karen K. Kidder, Tel, 555-555-1046, Get Well Clinic, 1044 Healthcare Dr., Portland, OR 97005

C) Encounter Diagnosis

- Asthma, [SNOMED-CT: 195967001], 4/15/2010, Active

D) Social History

- Smoking Status: Never smoker, [SNOMED-CT: 266919005]

E) Vital Signs

- Height: 60 in.
- Weight: 125 lbs
- Blood Pressure: 90/60 mmHg
- BMI: 24.4

TD170.314(b)(7) – 6.2: Patient 6, Encounter B

A) Patient Demographics

- See TD170.314(b)(7) – 6.1: Patient 6, Encounter A: A) Patient Demographics
- B) Care Team
- See TD170.314(b)(7) – 6.1: Patient 6, Encounter A: B) Care Team
- C) Encounter Diagnosis
- Asthma, [SNOMED-CT: 195967001], 3/12/2011, Active
- D) Social History
- Smoking Status: Never smoker, [SNOMED-CT: 266919005]
- E) Vital Signs
- Height: 62 in.
 - Weight: 145 lbs
 - Blood Pressure: 89/62 mmHg
 - BMI: 26.5
- F) Immunizations
- Measles, Mumps and Rubella virus vaccine, [CVX: 03], 3/12/2011, Completed
- G) Care Plan (Goals and Instructions)
- Vendor supplied data that includes care plan goals and instructions are permitted.
- Goal: asthma management, [SNOMED CT: 406162001]
 - Instructions: resources and instructions provided during visit

TD170.314(b)(7) – 6.3: Patient 6, Encounter C

- A) Patient Demographics
- See TD170.314(b)(7) – 6.1: Patient 6, Encounter A: A) Patient Demographics
- B) Care Team
- See TD170.314(b)(7) – 6.1: Patient 6, Encounter A: B) Care Team
- C) Encounter Diagnosis
- Flu-like illness, [SNOMED-CT: 95891005], Test date, Active
- D) Problems
- Flu-like symptoms, [SNOMED-CT: 95891005], Test date, Active
 - Asthma, [SNOMED-CT: 195967001], **select any date**, Active
- E) Medications

- Oseltamivir 30 MG Oral Capsule [Tamiflu], [RxNorm: 728111], 30 MG every 12 hours until all consumed, Test date, Active
- Proventil 0.09 MG/ACTUAT metered dose, [RxNorm: 202908], Inhalant, 0.09 MG/ACTUAT metered dose, 2 puffs QID PRN wheezing, **Select any date**, Active

F) Medication Allergies

Allergen: Penicillin G benzathine, [RxNorm: 7982]

Reaction: **Select reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

G) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Select value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Select value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Select value** (Range: 4.3 to 10.8) ($10^3/\text{ul}$), Test date
- PLT, [LOINC: 26515-7], **Select value** (Range: 150 to 400) ($10^3/\text{ul}$), Test date

H) Vital Signs

- Height: 64 in.
- Weight: 162 lbs
- Blood Pressure: **Select systolic** (Range: 120 mmHg – 150 mmHg) **and diastolic** (Range: 80 mmHg to 95 mmHg)
- BMI: 27.8

I) Procedures

A Vendor-supplied SNOMED CT code for Nasal Swab or other procedure may be used in place of the ONC-supplied SNOMED CT code if the Vendor feels that an alternate SNOMED CT code is more appropriate for clinical purposes or product workflow.

- Nasal Swab, [SNOMED CT: 312882009], Date: Test Date

J) Cognitive and Functional Status

- No impairment, [SNOMED-CT: 66557003], Test Date, Active

K) Referral

- Pulmonary function tests, Dr. Penny Puffer, Tel: 555-555-1049, 1047 Healthcare Drive, Portland, OR 97005, Scheduled Date: Test Date + 2 days

TD170.314(b)(7) – 6.4: Patient 6, Expected Results

The Consolidated CDA conformant export summary for the test patient should include the information within this section, which represents a minimum compilation of most current clinical information for Data Portability across Ambulatory encounters A through C for Patient 6. The Vendor may include additional longitudinal information for laboratory test results, immunizations, and procedures, and other data

elements in the export summary; this information is encouraged, but is not required for the export summary in Consolidated CDA format.

A) Patient Demographics

- Patient name: Kari Kidd
- Sex: F
- Date of birth: 10/22/2000
- Race: White
- Ethnicity: Not Hispanic or Latino
- Preferred language: English

B) Care Team

- Dr. Karen K. Kidder, Tel, 555-555-1046, Get Well Clinic, 1044 Healthcare Dr., Portland, OR 97005

C) Encounter Diagnosis

- Flu-like illness, [SNOMED-CT: 95891005], Test date, Active

D) Vital Signs

- Height: 64 in.
- Weight: 162 lbs
- Blood Pressure: **Selected systolic** (Range: 120 mmHg – 150 mmHg) **and selected diastolic** (Range: 80 mmHg to 95 mmHg)
- BMI: 27.8

E) Social History

- Smoking Status: Never smoker, [SNOMED-CT: 266919005]

F) Immunizations

- Measles, Mumps and Rubella virus vaccine, [CVX: 03], 3/12/2011, Completed

G) Care Plan (Goals and Instructions) - 3/12/2012

This section should contain the data used in Encounter B (Vendor supplied test data that includes care plan goals and instructions are permitted).

- Goal: asthma management, [SNOMED CT: 406162001]
- Instructions: resources and instructions provided during visit

H) Problems

- Flu-like symptoms, [SNOMED-CT: 95891005], Test date, Active
- Asthma, [SNOMED-CT: 195967001], **selected date**, Active

I) Medications

- Oseltamivir 30 MG Oral Capsule [Tamiflu], [RxNorm: 728111], 30 MG every 12 hours until all consumed, Test date, Active
- Proventil 0.09 MG/ACTUAT metered dose, [RxNorm: 202908], Inhalant, 0.09 MG/ACTUAT metered dose, 2 puffs QID PRN wheezing, **Selected date**, Active

J) Medication Allergies

Allergen: Penicillin G benzathine, [RxNorm: 7982]

Reaction: **Selected reaction** (for example, Hives, Swelling, Shortness of Breath, or Anaphylaxis)

Status: Vendor supplied (for example, Active)

K) Laboratory Tests and Values/Results

- HGB, [LOINC: 30313-1], **Selected value** (Range: 13.5 g/dl to 18.0 g/dl), Test date
- HCT, [LOINC: 20570-8], **Selected value** (Range: 41% to 53%), Test date
- WBC, [LOINC: 33765-9], **Selected value** (Range: 4.3 to 10.8) ($10^3/\text{ul}$), Test date
- PLT, [LOINC: 26515-7], **Selected value** (Range: 150 to 400) ($10^3/\text{ul}$), Test date

L) Procedures

- Nasal Swab, [SNOMED CT: 312882009] (or Vendor-supplied test data corresponding to TD170.314(b)(7) – 6.3: Patient 6, Encounter C, Procedures), Date: Test Date

M) Cognitive and Functional Status

- No impairment, [SNOMED-CT: 66557003], Test Date, Active

N) Referral

- Pulmonary function tests, Dr. Penny Puffer, Tel: 555-555-1049, 1047 Healthcare Drive, Portland, OR 97005, Scheduled Date: Test Date + 2 days

Notes

- Where permitted by the Consolidated CDA IG (HL7 Implementation Guide for CDA Release 2: IHE Health Story Consolidation, DSTU Release 1.1 Draft Standard for Trial Use July 2012), and not otherwise restricted by a code system or the 2014 Edition Certification Criteria (Health Information Technology: Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology, 2014 Edition; Revisions to the Permanent Certification Program for Health Information Technology, Final Rule) alternate code systems to those presented here may be used.
- Where permitted by the Consolidated CDA IG, and not otherwise restricted by a code system or the 2014 Edition Certification Criteria, coded examples may be replaced with text-only entries.
- Blood pressure may be recorded as separate systolic and diastolic values.
- Where permitted by the Consolidated CDA IG, and not otherwise restricted by a code system, metric units of measure may be used.
- Status and dates are Vendor supplied unless provided; dates are to include month, day and year, no standard date format is required unless specified by the Consolidated CDA IG.
- Vendor supplied dates are permitted where supplied dates are not usable over time, but must retain the chronological order of the provided dates: Encounter A must precede encounter B; encounter C must be the last patient encounter.
- Vendors may supply alternate vocabulary codes, provided they are valid, appropriate and meet the 2014 Edition Certification Criteria requirements.
- Provider contact information may be modified to associate multiple providers with a single/consolidated contact information

Document History

Version Number	Description of Change	Date Published
1.0	Released for public comment	October 17, 2012
1.1	Delivered for National Coordinator Approval	December 3, 2012
1.2	Posted Approved Test Data	December 14, 2012
1.3	Updated Approved Test Data Updates: <ul style="list-style-type: none"> • Removed resolved problems from Expected Results sections • Updated date of Asthma on Problem List for Patient 3, Encounter C to allow tester selected date and updated Asthma on Expected Results Problem List to “selected date” • Updated date of Asthma on Problem list for Patient 6, Encounter C to allow tester selected date and updated Asthma on Expected Results Problem List to “selected date” • Removed “Generic substitutions allowed” from Medication lists • In Inpatient Setting Table of Contents, changed “Encounter” to “Patient” • Updated Name and SNOMED-CT code of Diabetes Mellitus Type 2 of Patient 1, Encounter C Problems and Expected Results Problems • Updated Name and SNOMED-CT code of Diabetes Mellitus Type 2 in Patient 2, Encounter B Problems and reference to Diabetes date in Medications, and Patient 2 Expected Results Problems 	February 22, 2013
1.4	Updated Approved Test Data Updates: <ul style="list-style-type: none"> • Updated “Hypertension” to “Essential Hypertension” and updated associated SNOMED CT code 	May 6, 2013
1.5	Updated Approved Test Data Updates: <ul style="list-style-type: none"> • Updated dates for CVX codes to conform to valid code dates • Fixed formatting in Section 5.4 • Removed body site information throughout test data • Added “unless specified by the Consolidated CDA IG.” to test data notes bullet regarding vendor-supplied dates and status, removed “below” and changed “date” to “dates” 	June 10, 2013
1.6	Updated Approved Test Data Updates: <ul style="list-style-type: none"> • Updated Lisinopril RxNorm Code from 258395 to 29046 • Updated Albuterol RxNorm Code from 573621 to 745679 • Updated Metformin RxNorm Code from 860978 to 500 mg: 861007 or 850 mg: 861010 • Added the following to test data note: Provider contact information may be modified to associate multiple providers with a single/consolidated contact information 	March 21, 2014

Version Number	Description of Change	Date Published
1.7	<p>Updated Approved Test Data</p> <p>Updates:</p> <ul style="list-style-type: none">• Replaced all instances of “Chest X-Ray, PA and Lateral Views, [SNOMED CT: 168731009]” with “Nasal Swab, [SNOMED CT: 312882009]”• Added the following note above “Nasal Swab” in Encounter C for each patient: “A Vendor-supplied SNOMED CT code for Nasal Swab or other procedure may be used in place of the ONC-supplied SNOMED CT code if the Vendor feels that an alternate SNOMED CT code is more appropriate for clinical purposes or product workflow.”• Added the following sample note after “Nasal Swab” in the expected results for each patient: (or Vendor-supplied test data corresponding to TD170.314(b)(7) – [Section number]: Patient [number], Encounter C, Procedures)	June 19, 2014
