Montana Immunization Program HL7 Spec Guide



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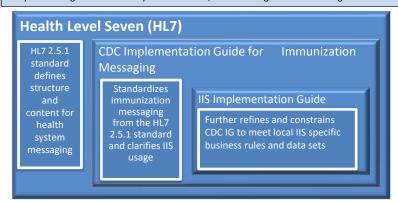
CDC Information

The primary purpose of PHC-Hub (Public Health Connection Hub) is to establish connections (interfaces) to improve public health. PHC-Hub facilitates the integration between healthcare provider systems and Immunization Information Systems (IIS) by managing HL7

In order for different health information systems to exchange data, the structure and content of the data to be exchanged must be standardized.

Three controlling documents define how PHC-Hub HL7 data exchange interface works.

They are arranged in a hierarchy of documents, each refining and constraining the HL7 Standard.



The first document is the HL7 2.5.1 standard developed by Health Level Seven, a not-for-profit ANSI-accredited standards developing organization. This standard defines the structure and content of immunization messages, but leaves many specific implementation details undecided. Beneficial information on HL7 and a copy of the HL7 message standard can be obtained from the Health Level Seven website at http://www.hl7.org/.

The second document is the CDC's HL7 2.5.1 Implementation Guide for Immunization Messaging, Release 1.5 (CDC IG). This guide gives specific instructions regarding how to report to immunization information systems, but still leaves some implementation decisions to each state IIS.

This guide and other technical information can be obtained from the CDC website at http://www.cdc.gov/vaccines/programs/iis/technical-guidance/downloads/hl7guide-1-5-2014-11.pdf.

This document, the MT HL7 Implementation Guide, is the third. It finalizes all implementation decisions and defines exactly what the IIS will and will not accept. In cases where this guide differs from the CDC IG, this guide provides the IIS's limitations, identified on each tab in the IWeb Limit column with character limit or not captured. While reading this guide, you can mouse over the elements that have red triangles to see more details.

NOTE: The PV1 segment is used to convey visit specific information. The primary use in immunization messages in previous releases was to carry information about the client's eligibility status. This is now recorded in the immunization event (dose administered) level. Use of this segment for the purpose of reporting client eligibility for a funding program at the visit level is not supported in this Implementation Guide.

Scope

This document is intended to facilitate the exchange of immunization records between Electronic Health Records (EHR) and the IIS.

This includes:

- a. Sending and receiving immunization histories for individuals
- b. Sending and receiving demographic information about the individuals
- c. Requesting immunization histories for individuals
- d. Responding to requests for immunization histories by returning immunization histories
- e. Acknowledging receipt of immunization histories and requests for immunization histories
- f. Reporting errors in the messaging process
- g. Sending observations about an immunization event (this may include funding, reactions, forecasts and evaluations).

It is important to note this guide adheres to the CDC IG on several key aspects, including:

a. Data type specifications from chapter 4 of the CDC IG have not been redefined and usage has not

HTTP POST Message Transfers

PHC-Hub receives HL7 messages using a protocol defined in the document titled "Transport of Immunization HL7 Transaction over the Internet Using Secure HTTP version 1.0" written by the HL7 Immunization Registry Task Force (Rockmore, Yeatts, and Davidson). It describes sending an username, password, and a HL7 message in an HTTP POST transaction and receiving an HL7 message as a response.

For an external system to connect to the immunization registry it must have two things:

- A connection to the internet so that it can "see" the registry's web interface.
- The ability to send HL7 immunization messages using HTTPS.

Request Encoding

When the sending application sends PHC-Hub an HL7 message via an HTTPS POST command, it must have the following fields:

- USERID Assigned by the PHC-Hub administrator.
- PASSWORD Assigned by the PHC-Hub administrator.
- MESSAGEDATA The HL7 messages.

HL7 messages may be one at a time (one for every HTTPS request) or grouped in a batch. Batch messages do not have any special separators or wrappers, but the standard HL7 batch protocol may be used. The batch is formatted as follows:

[FHS] { [BHS] { [MSH] ...] } [BTS] } [FTS]

Response Encoding

Response Encoding

PHC-Hub returns responses to the sending system. Requests with multiple messages can have multiple responses, one for each request message. Responses are returned as defined in the import profile configuration. The available options are:

- Always Always send a response for a message.
- Never Never send a response for a message.
- On Error Send responses only for those messages that have errors and are not accepted.
- Determined by Message Use the incoming message's MSH segment to determine the response option (Always, Never, or Only on Error).

Responses from the HL7 interface are always in HL7 format. HL7 responses can indicate any one of the following things:

- Authentication error The HL7 user making the request is not allowed to because username and password are incorrect or account does not have permission to accept HL7 messages.
- Message parsing error The HL7 parser is unable to read the incoming message because it doesn't conform to HL7 standards.
- Message content error PHC-Hub cannot accept the data because of missing or incorrect information.
- Message processing exception PHC-Hub cannot process the message because of an unexpected problem.
- Message accepted PHC-Hub has accepted the data and is either holding it for review or submitting it to the IIS for
 processing.
- Response to query The IIS responds to the query with query results.

CDC WSDL

The standard interface defines the contract between the trading partners (<u>Sender and Receiver</u>). SOAP (Simple Object Access Protocol) web services use a Web Services Definition Language (WSDL) to achieve this. The WSDL for the SOAP web service is used as the contract between the sender and the receiver to pass the HL7 message as a string of data. For further information please refer to http://www.cdc.gov/vaccines/programs/iis/technical-guidance/soap/wsdl.html.

The WSDL tells a program that knows about SOAP exactly how to use the web service. If a tool is available that understands SOAP web services, the following URLs are all that is needed to set up the web service. Please review the EHR documentation to determine all steps in setting up the web service.

The first part of the WSDL URL depends on which version of PHC-Hub is being used, Production or Test.

The WSDL URL is: /soa/ws/HL7Service.wsdl

- For example:
 - imMTrax Test is: https://immtraxtest.org/phc/soa/ws/HL7Service.wsdl

TCP/IP connection and polling a local directory for files to upload are not supported.

Sample:

Segment	Segment Header	
MSH	Message Header	
PID	Patient Identification	
PD1	Patient Demographic	
NK1	Next of Kin	
ORC	Common Order	
RXA	Pharmacy/Treatment Administration	
RXR	Pharmacy/Treatment Route	
OBX	Observation	

 Sample:
 MSH|^~\&|MYEHR|MYSITE|MYIIS|MYFACILITYID|20141121100000||VXU^VO4^VXU_V04|123456|P|2.5.1|||AL|AL|||||Z22^CDCPHINVS|MYORG|MYORGID|

Notes: *MT accepts only "P" as the value in MSH-11.
*We highly recommend that MSH-16 be AL in order view all ACK messages-especially during the test phase.

Segment	SEQ	Example Segment	Element Name	DataType	Usage	imMTrax Limit
MSH	1	1	Field Separator	ST	R	
MSH	2	^~\&	Encoding Characters	ST	R	
MSH	3	MYEHR	Sending Application	HD	RE	Not captured
MSH	4	MYSITE	Sending Facility	HD	RE	50
MSH	5	MYIIS	Receiving Application	HD	RE	Not captured
MSH	6	MYFACILITYID	Receiving Facility	HD	RE	25
MSH	7	20141121100000	Date/Time Of Message	TS_Z	R	
MSH	8		Security	ST	0	Not captured
MSH	9	VXU^VO4^VXU_V04	Message Type	MSG	R	
MSH	10	123456	Message Control ID	ST	R	
MSH	11	P	Processing ID	PT	R	
MSH	12	2.5.1	Version ID	VID	R	
MSH	13		Sequence Number	NM	0	Not captured
MSH	14		Continuation Pointer	ST	0	Not captured
MSH	15	AL	Accept Acknowledgement Type	ID	R	
MSH	16	AL	Application Acknowledgment Type	ID	R	
MSH	17		Country Code	ID	0	Not captured
MSH	18		Character Set	ID	0	Not captured
MSH	19		Principal Language of Message	CE	0	Not captured
MSH	20		Alternate Character Set Handling Scheme	ID	0	Not captured
MSH	21	Z22^CDCPHINVS	Message Profile Identifier (EI) 01598	EI	R	
MSH	22	MYORG	Sending Responsible Organization	XON	RE	50
MSH	23	MYORGID	Receiving Responsible Organization	XON	RE	25
MSH	24	•	Sending Network Address	HD	0	Not captured
MSH	25		Receiving Network Address	HD	0	Not captured

PID[1||A69532^^^^MR||SMITH^MICK^D^^^^L|JONES|20140708|M|^MICKY|2106-3^White^HL70005|123 MAIN STREET^^CHEYENNE^WY^82002^USA^L^^56021||^PRN^PH^^^406^5551234^^NET^INTERNET^LSMITH@GMAIL.COM|^WPN^PH^^^406^6581255|

Sample:

EN^ENGLISH^HL70296|||||||2186-5^not Hispanic or Latino^HL70189|CHILDRENS HOSPITAL|Y|1||Y||20160912070000|Y|

*Please do **not** send a social security number in the PID-3 or PID-19.
*Please submit a full address including the MT county code in the PID-11.9. Notes:

Segment	SEQ	Example Segment	Element Name	DataType	Usage	imMTrax Limit
PID	1	1	Set ID - PID	SI	R	-
PID	2		Patient ID	CX	Х	Not captured
PID	3	A69532^^^MR	Patient Identifier List	CX	R	30
PID	4		Alternate Patient ID - 00106	CX	Х	Not captured
PID	5	SMITH^MICK^D^^^L	Patient Name	XPN	R	48
PID	6	JONES	Mother's Maiden Name	XPN	RE	48
PID	7	20140708	Date of Birth	TS_NZ	R	
PID	8	М	Administrative Sex	IS	R	1
PID	9	^MICKY	Patient Alias	XPN	X	48
PID	10	2106-3^White^HL70005	Race	CE	RE	20
PID	11	123 MAIN STREET^^CHEYENNE^WY^82002^USA^L^^56021	Patient Address	XAD	RE	
PID	12		County Code	IS	Х	Not captured
PID	13	^PRN^PH^^^406^5551234	Phone Number - Home	XTN	RE	7 or 10
PID	14	^WPN^PH^^^406^6581255	Phone Number - Business	XTN	0	7 or 10
PID	15	EN^ENGLISH^HL70296	Primary Language	CE	0	30
PID	16		Marital Status	CE	0	Not captured
PID	17		Religion	CE	0	Not captured
PID	18		Patient Account Number	CX	0	Not captured
PID	19		SSN Number - Patient	ST	X	9
PID	20		Driver's License Number - Patient	DLN	Х	Not captured
PID	21		Mother's Identifier	CX	Х	Not captured
PID	22	2186-5^not Hispanic or Latino^HL70189	Ethnic Group	CE	RE	37
PID	23	CHILDRENS HOSPITAL	Birth Place	ST	0	100
PID	24	Υ	Multiple Birth indicator	ID	RE	1
PID	25	1	Birth Order	NM	C(RE/O)	1
PID	26		Citizenship	CE	0	Not captured
PID	27		Veterans Military Status	CE	0	Not captured
PID	28		Nationality	CE	0	Not captured
PID	29	20160912070000	Patient Death Date and Time	TS	C(RE/X)	14
PID	30	Υ	Patient Death Indicator	ID	RE	1
PID	31		Identity Unknown Indicator	ID	0	Not captured
PID	32		Indentity Reliability Code	IS	0	Not captured
PID	33		Last Update Date/Time	TS	0	Not captured
PID	34		Last Update Facility	HD	0	Not captured
PID	35		Species Code	CE	0	Not captured
PID	36		Breed Code	CE	0	Not captured
PID	37		Strain	ST	0	Not captured
PID	38		Production Class Code	CE	0	Not captured
PID	39		Tribal Citizenship	CWE	0	Not captured

PD1 Segment

Sample: PD1|||MYSITE^SIISCLIENT1724|||||||02^Reminder/Recall - any method^HL70215|N|20160825|||A||||

*PD1-3 identifies the site sending the message and is required. This deviates from the CDC's HL7 2.5.1 Implementation Guide for Immunization Messaging, Notes:

Release 1.5 (CDC IG).
*PD1-12 identifies if the patient has given consent for their immunization data to be shared. A value is required due to Montana being an "opt-in" state. This deviates from the CDC's HL7 2.5.1 Implementation Guide for Immunization Messaging, Release 1.5 (CDC IG).

Segment	SEQ	Example Segment	Element Name	DataType	Usage	IWeb Limit
PD1	1		Living Dependency	IS	0	Not captured
PD1	2		Living Arrangement	IS	0	Not captured
PD1	3	MYSITE^^SIISCLIENT1724	Patient Primary Facility	XON	R	50
PD1	4		Patient Primary Care Provider name & ID No.	XCN	Х	48
PD1	5		Student Indicator	IS	0	Not captured
PD1	6		Handicap	IS	0	Not captured
PD1	7		Living Will Code	IS	0	Not captured
PD1	8		Organ Donor Code	IS	0	Not captured
PD1	9		Separate Bill	ID	0	Not captured
PD1	10		Duplicate Patient	CX	0	Not captured
PD1	11	02^Reminder/Recall - any method^HL70215	Publicity Code	CE	RE	2
PD1	12	N	Protection Indicator	ID	R	1
PD1	13	20160825	Protection Indicator Effective Date	DT_T	C(RE/X)	
PD1	14		Place of Worship	XON	0	Not captured
PD1	15		Advance Directive Code	CE	0	Not captured
PD1	16	A	Immunization Registry Status	IS	RE	1
PD1	17		Immunization Registry Status Effective Date	DT_T	C(RE/X)	Not captured
PD1	18		Publicity Code Effective Date	DT_T	C(RE/X)	Not captured
PD1	19		Military Branch	IS	0	Not captured
PD1	20		Military Rank/Grade	IS	0	Not captured
PD1	21		Military Status	IS	0	Not captured

Sample: NK1|1|SMITH^WALT|FTH^FATHER^HL70063|123 MAIN STREET^^CHEYENNE^WY^82002^USA|^PRN^PH^^^307^5551289|^PRN^PH^^^307^5564582|

*NK1 segment is conditional based on patients age. The segment is required for patients under 18 years old.
* imMTrax will process only NK1 segment that have the NK1-3 (Relationship) equal to: FTH (Father), GRD (Guardian), MTH (Mother), or PAR (parent).

Segment	SEQ	Example Segment	Element Name	DataType	Usage	imMTrax Limit
NK1	1	1	Set ID - NK1	SI	R	
NK1	2	SMITH^WALT	Name	XPN	R	48
NK1	3	FTH^Father^HL70063	Relationship	CE	R	3
NK1	4	123 MAIN^^CHEYENNE^WY^82002^USA	Address	XAD	RE	
NK1	5	^PRN^PH^^^307^5551289	Phone Number	XTN	RE	9
NK1	6	^WPN^PH^^^307^5564582	Business Phone Number	XTN	0	9
NK1	7		Contact Role	CE	0	Not captured
NK1	8		Start Date	DT	0	Not captured
NK1	9		End Date	DT	0	Not captured
NK1	10		Next of Kin / Associated Parties Job Title	ST	0	Not captured
NK1	11		Next of Kin / Associated Parties Job Code/Class	JCC	0	Not captured
NK1	12		Next of Kin / Associated Parties Employee Number	CX	0	Not captured
NK1	13		Organization Name - NK1	XON	0	Not captured
NK1	14		Marital Status	CE	0	Not captured
NK1	15		Administrative Sex	IS	0	Not captured
NK1	16		Date/Time of Birth	TS	0	Not captured
NK1	17		Living Dependency	IS	0	Not captured
NK1	18		Ambulatory Status	IS	0	Not captured
NK1	19		Citizenship	CE	0	Not captured
NK1	20		Primary Language	CE	0	Not captured
NK1	21		Living Arrangement	IS	0	Not captured
NK1	22		Publicity Code	CE	0	Not captured
NK1	23		Protection Indicator	ID	0	Not captured
NK1	24		Student Indicator	IS	0	Not captured
NK1	25		Religion	CE	0	Not captured
NK1	26		Mother's Maiden Name	XPN	0	48
NK1	27		Nationality	CE	0	Not captured
NK1	28		Ethnic Group	CE	0	Not captured
NK1	29		Contact Reason	CE	0	Not captured
NK1	30		Contact Person's Name	XPN	0	Not captured
NK1	31		Contact Person's Telephone Number	XTN	0	Not captured
NK1	32		Contact Person's Address	XAD	0	Not captured
NK1	33		Next of Kin/Associated Party's Identifiers	CX	0	Not captured
NK1	34		Job Status	IS	0	Not captured
NK1	35		Race	CE	0	Not captured
NK1	36		Handicap	IS	0	Not captured
NK1	37		Contact Person Social Security Number	ST	0	Not captured
NK1	38		Next of Kin Birth Place	ST	0	Not captured
NK1	39		VIP Indicator	IS	0	Not captured

ORC Segment

Sample: ORC|RE|365412^^^|56789^^^||||||SIISCLIENT1724^SMITH^MAGGIE||SIISCLIENT1724^WILSON^MATT|||||SIISCLIENT1724|

Notes:

Segment	SEQ	Example Segment	Element Name	DataType	Usage	imMTrax Limit
ORC	1	RE	Order Control	ID	R	Not captured
ORC	2	365412	Placer Order Number	EI	RE	Not captured
ORC	3	56789	Filler Order Number	EI	R	
ORC	4		Placer Group Number	EI	0	Not captured
ORC	5		Order Status	ID	0	Not captured
ORC	6		Response Flag	ID	0	Not captured
ORC	7		Quantity/Timing	TQ	Х	Not captured
ORC	8		Parent	EIP	0	Not captured
ORC	9		Date/Time of Transaction	TS	0	Not captured
ORC	10	SIISCLIENT1724^SMITH^MAGGIE	Entered By	XCN	RE	Not captured
ORC	11		Verified By	XCN	0	Not captured
ORC	12	SIISCLIENT1724^WILSON^MATT	Ordering Provider	XCN	C(RE/O)	
ORC	13		Enterer's Location	PL	0	Not captured
ORC	14		Call Back Phone Number	XTN	0	Not captured
ORC	15		Order Effective Date/Time	TS	0	Not captured
ORC	16		Order Control Code Reason	CE	0	Not captured
ORC	17	SIISCLIENT1724	Entering Organization	CE	RE	
ORC	18		Entering Device	CE	0	Not captured
ORC	19		Action By	XCN	0	Not captured
ORC	20		Advanced Beneficiary Notice Code	CE	0	Not captured
ORC	21		Ordering Facility Name	XON	0	Not captured
ORC	22		Ordering Facility Address	XAD	0	Not captured
ORC	23		Ordering Facility Phone Number	XTN	0	Not captured
ORC	24		Ordering Provider Address	XAD	0	Not captured
ORC	25		Order Status Modifier	CWE	0	Not captured
ORC	26		Advanced Beneficiary Notice Override Reason	CWE	0	Not captured
ORC	27		Filler's Expected Availability Date/Time	TS	0	Not captured
ORC	28		Confidentiality Code	CWE	0	Not captured
ORC	29		Order Type	CWE	0	Not captured
ORC	30		Enterer Authorization Mode	CNE	0	Not captured
ORC	31		Parent Universal Service identifier	CWE	0	Not captured

RXA Segment

 $RXA |0|1|20160908||20^{DTa}P^{CVX}|0.5|mL^{milliliters}UCUM||00^{New}\ immunization$

record^NIP001|SIISCLIENT1724^MAGNOLIA^IRENE^B^^^^^^^^^MD|MYSITE^^^SIISCLIENT1724|||3923K|20171115|SKB^GlaxoSmithKline^HL70227|||CP|A||

Notes:

*RXA-11 identifies the administered at location, therefore; should contain a value for administered immunizations (RXA-9 = 00) only. Historical immunization (RXA-9 = 01-08) should be empty unless original administrative facility is known.

*If RXA-9 indicates an administered vaccine (00), the RXA-11, RXA-15, RXA-16 and RXA-17 are required to be populated.

*RXA-6 is expected to be 999 if one of the following three conditions are met: (1) RXA-20 = RE or (2) RXA-5.3 = 998 or (3) RXA-9 <> 00.

*If RXA-9 indicates a historical vaccine record (01-08), the RXA-11, RXA-15, RXA-16 and RXA-17 fields are expected to be empty.

*Interfaces that enable inventory dose decrementing require the following fields to be populated: RXA-3, RXA-5, RXA-6, RXA-7, RXA-9 (as 00), RXA-11, RXA-15, RXA16, RXA-17. Values not matching existing data in imMTrax will not properly decrement.

*If the RXA-4 is populated, it must equal RXA-3's date.

Segment	SEQ	Example Segment	Element Name	DataType	Usage	imMtrax Limit
RXA	1	0	Give Sub-ID Counter	NM	R	
RXA	2	1	Administration Sub-ID Counter	NM	R	
RXA	3	20160908	Date/Time Start of Administration	TS_NZ	R	
RXA	4		Date/Time End of Administration	TS	0	Not captured
RXA	5	20^DTaP^CVX	Administered Code	CE	R	
RXA	6	0.5	Administered Amount	NM	R	
RXA	7	mL^milliliters^UCUM	Administered Units	CE	C(R/O)	
RXA	8		Administered Dosage Form	CE	0	Not captured
RXA	9	00^New immunization record^NIP001	Administration Notes	varies	C(R/O)	254
RXA	10	SIISCLIENT1724^MAGNOLIA^IRENE^B^^^^^^^^^^^^^	Administering Provider	XCN	C(RE/O)	
RXA	11	MYSITE^^^SIISCLIENT1724	Administered- at Location	LA2	C(R/X)	
RXA	12		Administered Per (Time Unit)	ST	0	Not captured
RXA	13		Administered Strength	NM	0	Not captured
RXA	14		Administered Strength Units	CE	0	Not captured
RXA	15	3923K	Substance Lot Number	ST	C(R/O)	20
RXA	16	20171115	Substance Expiration Date	TS	C(RE/O)	
RXA	17	SKB^GlaxoSmithKline^HL70227	Substance Manufacturer Name	CE	C(R/O)	500
RXA	18		Substance/Treatment Refusal Reason	CE	C(R/X)	
RXA	19		Indication	CE	0	Not captured
RXA	20	CP	Completion Status	ID	RE	Not captured
RXA	21	A	Action Code - RXA	ID	C(R/O)	
RXA	22		System Entry Date/Time	TS	0	Not captured
RXA	23		Administered Drug Strength Volume	NM	0	Not captured
RXA	24		Administered Drug Strength Volume Units	CWE	0	Not captured
RXA	25		Administered Barcode Identifier	CWE	0	Not captured
RXA	26		Pharmacy Order Type	ID	0	Not captured

RXR Segment

Sample: RXR|C28161^IM^NCIT^Intramuscular^^HL70162|LT^Left Thigh^HL70163|

Notes: *This segment is only used when RXA-9 indicates an administered vaccine (00).

Segment	SEQ	Example Segment	Element Name	DataType	Usage	imMTrax Limit
RXR	1	IM^NCIT^Intramuscular^^HL70162	Route	CE	R	50
RXR	2	LT^Left Thigh^HL70163	Administration Site	CWE	RE	50
RXR	3		Administration Device	CE	0	Not captured
RXR	4		Administration Method	CWE	0	Not captured
RXR	5		Routing Instruction	CE	0	Not captured
RXR	6		Administration Site Modifier	CWE	0	Not captured

OBX|1|CE|64994-7^VACCINE FUNDING PGM ELIG^NIP003|1|V02^VFC eligible - Medicaid^HL70064|||||F|
OBX|2|CE|30963-3^VACCINE FUNDING SOURCE^NIP003|2|VXC1^Federal Funds^CDCPHINVS|||||F|
OBX|3|CE|30956-7^VACCINE TYPE^NIP003|3|20^DTaP||||||F|

OBX|4|DT|29769-7^DATE VIS PRESENTED^NIP003|4|201411211|||||F| OBX|5|DT|29768-9^DATE VIS PUBLISHED^NIP003|5|20080918||||||F|

*The above 5 statements are expected to be submitted with each administered vaccine (RXA-9 = 00). Additional OBX statements may be submitted. Please see

the NIP003 and NIP004 tables for more options (found on the "OBX Value Sets" tab). *Inventory dose decrementing requires the 30963-3 and 64994-7 OBX segments

*The OBX 64994-7 (funding source) values can come from either the NIP008 or the CDCPHINVS table.

Segment	SEQ	Example Segment	Element Name	DataType	Usage	imMTrax Limit
OBX	1	1	Set ID – OBX	SI	R	
ОВХ	2	CE	Value Type	ID	R	
ОВХ	3	64994-7^FUNDING PGM ELIG^NIP003	Observation Identifier	CE	R	
ОВХ	4	1	Observation Sub-ID	ST	R	
OBX	5	V02^VFC eligible - Medicaid^HL70064	Observation Value	**varies**	R	
OBX	6		Units	CE	C(R/O)	Not captured
OBX	7		References Range	ST	0	Not captured
OBX	8		Abnormal Flags	IS	0	Not captured
OBX	9		Probability	NM	0	Not captured
OBX	10		Nature of Abnormal Test	ID	0	Not captured
ОВХ	11	F	Observation Result Status	ID	R	, , , , , , , , , , , , , , , , , , ,
OBX	12		Effective Date of Reference Range Values	TS	0	Not captured
OBX	13		User Defined Access Checks	ST	0	Not captured
OBX	14		Date/Time of the Observation	TS_NZ	0	
OBX	15		Producer's Reference	CE	0	Not captured
OBX	16		Responsible Observer	XCN	0	Not captured
OBX	17		Observation Method	CE	C(R/O)	Not captured
OBX	18		Equipment Instance Identifier	EI	0	Not captured
OBX	19		Date/Time of the Analysis	TS	0	Not captured
OBX	20		Reserved for harmonization with V2.6	13	X	Not captured
OBX	21		Reserved for harmonization with V2.6		X	Not captured
OBX	22		Reserved for harmonizatioin with V2.6		Х	Not captured
OBX	23		Performing Organization Name	XON	0	Not captured
OBX	24		Performing Organization Address	XAD	0	Not captured
OBX	25		Performing Organization Medical Director	XCN	0	Not captured
OBX 2						
ОВХ	1	2	Set ID – OBX	SI	R	
ОВХ	2	CE	Value Type	ID	R	
ОВХ	3	30963-3^VACCINE FUNDING SOURCE^NIP003	Observation Identifier	CE	R	
OBX	4	2	Observation Sub-ID	ST	R	
OBX	5	VXC1^Federal Funds^CDCPHINVS	Observation Value	**varies**	R	
ОВХ	11	F	Observation Result Status	ID	R	
<u> </u>	U			•		•
OBX 3						•
OBX	1	3	Set ID – OBX	SI	R	
OBX	2	CE	Value Type	ID	R	
ОВХ	3	30956-7^VACCINE TYPE^NIP003	Observation Identifier	CE	R	
OBX OBX	3 4	30956-7^VACCINE TYPE^NIP003 3	Observation Identifier Observation Sub-ID	CE ST	R R	
				_		
ОВХ	4	3	Observation Sub-ID	ST	R	
OBX OBX OBX	4 5	3 20^DTaP	Observation Sub-ID Observation Value	ST **varies**	R R	
OBX OBX OBX	4 5 11	3 20^DTaP F	Observation Sub-ID Observation Value Observation Result Status	ST **varies** ID	R R R	
OBX OBX OBX OBX 4	4 5 11	3 20^DTaP F	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX	ST **varies** ID	R R R	
OBX OBX OBX OBX OBX OBX OBX	4 5 11 1 2	3 20^DTaP F 4 DT	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type	ST **varies** ID SI ID	R R R	
OBX OBX OBX OBX 4 OBX OBX OBX	4 5 11 1 2 3	3 20^DTaP F 4 DT 29769-7^DATE VIS PRESENTED^NIP003	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier	ST **varies** ID SI ID CE	R R R R	
OBX OBX OBX OBX OBX OBX OBX	4 5 11 1 2 3 4	3 20^DTaP F 4 DT 29769-7^DATE VIS PRESENTED^NIP003 4	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier Observation Sub-ID	ST **varies** ID SI ID CE ST	R R R R	
OBX	4 5 11 1 2 3 4 5	3 20^DTaP F 4 DT 29769-7^DATE VIS PRESENTED^NIP003 4 201411211	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier Observation Sub-ID Observation Value	ST **varies** ID SI ID CE ST **varies**	R R R R R R	
OBX OBX OBX OBX OBX OBX OBX	4 5 11 1 2 3 4	3 20^DTaP F 4 DT 29769-7^DATE VIS PRESENTED^NIP003 4	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier Observation Sub-ID	ST **varies** ID SI ID CE ST	R R R R	
OBX OBX OBX OBX OBX OBX OBX OBX OBX	4 5 11 1 2 3 4 5	3 20^DTaP F 4 DT 29769-7^DATE VIS PRESENTED^NIP003 4 201411211	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier Observation Sub-ID Observation Value	ST **varies** ID SI ID CE ST **varies**	R R R R R R	
OBX	4 5 11 1 2 3 4 5	3 20^DTaP F 4 DT 29769-7^DATE VIS PRESENTED^NIP003 4 201411211 F	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier Observation Sub-ID Observation Value Observation Result Status	ST **varies** ID SI ID CE ST **varies** ID	R R R R R R R R	
OBX	4 5 11 1 2 3 4 5 11	3 20^DTaP F 4 DT 29769-7^DATE VIS PRESENTED^NIP003 4 201411211 F	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier Observation Sub-ID Observation Value Observation Result Status Set ID – OBX	ST **varies** ID SI ID CE ST **varies** ID	R R R R R R R R	
OBX	4 5 11 1 2 3 4 5 11	3 20^DTaP F 4 DT 29769-7^DATE VIS PRESENTED^NIP003 4 201411211 F 5 DT	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier Observation Value Observation Result Status Set ID – OBX Value Type	ST **varies** ID SI ID CE ST **varies** ID	R R R R R R R R R R R R R R	
OBX	4 5 11 1 2 3 4 5 11 1 2 3	3 20^DTaP F 4 DT 29769-7^DATE VIS PRESENTED^NIP003 4 201411211 F	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier	ST **varies** ID SI ID CE ST **varies** ID SI ID CE ST CE ST SI ID CE ST CE	R R R R R R R R R R R R R R	
OBX	4 5 11 1 2 3 4 5 11	3 20^DTaP F 4 DT 29769-7^DATE VIS PRESENTED^NIP003 4 201411211 F 5 DT	Observation Sub-ID Observation Value Observation Result Status Set ID – OBX Value Type Observation Identifier Observation Value Observation Result Status Set ID – OBX Value Type	ST **varies** ID SI ID CE ST **varies** ID	R R R R R R R R R R R R R R	

2.5.1 VXU Message

```
MSH|^~\&| HEALTHLAND^2.16.840.1.113883.3.4272.14.1^ISO|MAGNOLIA_PED_
CLINIC|IIS|3724|20160909130000||VXU^V04^VXU V04|123456|P|2.5.1|||AL|AL|||||Z22^CDCPHINVS|M
AGNOLIA PED CLINIC | 3724 | |
PID|1||A69532^^^MR||SMITH^MICK^D^^^^L|JONES|20140708|M|^MICKY|2106-3^White^HL70005|123
MAIN
STREET^^CHEYENNE^WY^82002^USA^BDL^^56021||^PRN^PH^^^406^5551234~^NET^INTERNET^LSMITH@
GMAIL.COM|^WPN^PH^^^406^6581255| EN^ENGLISH^HL70296||||||2186-5^not Hispanic or
Latino^HL70189 | CHILDRENS HOSPITAL | Y | 1 | | Y | | 20160912070000 | Y |
PD1|||MYSITE^^SIISCLIENT1724||||||02^Reminder/Recall - any
method^HL70215|N|20160825|||A|||||
NK1|1|SMITH^WALT|FTH^FATHER^HL70063|123 MAIN
STREET^^CHEYENNE^WY^82002^USA|^PRN^PH^^^307^5551289|^WPN^PH^^^307^5564582
ORC|RE|365412^^^|56789^^^|||||||SIISCLIENT1724^SMITH^MAGGIE||SIISCLIENT1724^WILSON^MATT||
|||3724|
RXA|0|1|201609080000||20^DTaP^CVX|0.5|mL^milliliters^UCUM||00^New immunization
record^NIP001|SIISCLIENT1724^MAGNOLIA^IRENE^B^^^^^^^^^^^MD|MYSITE^^^SIISCLIENT1724|
|||3923K|20171115|SKB^GlaxoSmithKline^HL70227|||CP|A||
RXR | IM^Intramuscular^HL70162 | RT^Right Thigh^HL70163
OBX|1|CE|64994-7^Vaccine funding program eligibility category^LN|0|V04^VFC eligible-American
Indian^HL70064|||||F|||20160406|||VXC40^Eligibility captured at the immunization level^CDCPHINVS
OBX|2|CE|30963-3^Vaccine purchased with^LN||VXC1^Federal funds^|||||F||||
OBX|3|CE|30956-7^vaccine type^LN|1|48^HIB^CVX||||||F
OBX|4|DT|29768-9^Date vaccine information statement published^LN|1|20070515||||||F
OBX|5|DT|29769-7^Date vaccine information statement presented^LN|1|201609068||||||F
RXA|0|1|201407080000||20^DTaP^CVX|999|||01^Historical immunization|^^^3724|||||||||C|A||
```

ACK Message

```
MSH|^~\&|IIS^^|3724^^|HEALTHLAND^2.16.840.1.113883.3.4272.14.1^ISO|MAGNOLIA_PED_
CLINIC^^|20160914052524||ACK^V04^ACK|3974462967.100000008|P|2.5.1||||||||Z22^CDCPHINVS^^|
MSA|AA|123456|
ERR|||0||||Patient A69532 "MICK SMITH" with 2 vaccinations accepted into vaccination staging table|
ERR||OBX^^|999^Application Error^HL70357|W||||vfceligibility and fundingsource are inconsistent|
ERR||OBX^^|999^Application Error^HL70357|W||||vfceligibility and fundingsource are inconsistent|
ERR||RXA^^15|103^Table value not found^HL70357|W||||vaccination lot is unrecognized|
```

VXU Message - With Contraindications

```
MSH|^~\&| HEALTHLAND^2.16.840.1.113883.3.4272.14.1^ISO|MAGNOLIA_PED_
CLINIC|IIS|3724|20160909130000||VXU^V04^VXU_V04|123456|P|2.5.1|||AL|AL|||||Z22^CDCPHINVS|MAGN
OLIA PED CLINIC | 3724 | |
PID|1||A69532^^^MR||SMITH^MICK^D^^^L|JONES|20140708|M|^MICKY|2106-3^White^HL70005|123
MAIN
STREET^^CHEYENNE^WY^82002^USA^BDL^^56021||^PRN^PH^^^406^5551234~^NET^INTERNET^LSMITH@GMA
IL.COM|^WPN^PH^^^406^6581255| EN^ENGLISH^HL70296||||987654321|||2186-5^not Hispanic or
Latino^HL70189|CHILDRENS HOSPITAL|Y|1||Y||20160912070000|Y|
PD1|||||||02^Reminder/Recall - any method^HL70215|Y|20160825|||A||||
NK1|1|SMITH^WALT|FTH^FATHER^HL70063|123 MAIN
STREET^^CHEYENNE^WY^82002^USA|^PRN^PH^^^307^5551289|^WPN^PH^^^307^5564582
NK1|2|SMITH^MARY|MTH^MOTHER^HL70063|123 MAIN
STREET^^CHEYENNE^WY^82002^USA|^PRN^PH^^^307^5551562|
IN1|1|PL02585|C8909|CIGNA||||||||5|||||||||||20160909130000|
ORC|RE|365412^^^|56789^^^|||||||SIISCLIENT3363^SMITH^MAGGIE||SIISCLIENT3396^WILSON^MATT|||||37
24|
RXA \ |\ 0\ |\ 1\ |\ 201609080000\ |\ |\ 20^D TaP^CVX\ |\ 0.5\ |\ mL^milliliters^UCUM\ |\ |\ 00^New\ immunization
record^NIP001|SIISCLIENT3361^MAGNOLIA^IRENE^B^^^^^^^^^^^^^^MD|^^^$IISCLIENT1724||||3923K|20
171115|SKB^G+laxoSmithKline^HL70227|||CP|A||
RXR | IM^Intramuscular^HL70162 | RT^Right Thigh^HL70163
OBX 1 CE 64994-7 Vaccine funding program eligibility category LN 0 V04 VFC eligible-American
Indian^HL70064|||||F|||20160406|||VXC40^Eligibility captured at the immunization level^CDCPHINVS
OBX|2|CE|30963-3^Vaccine purchased with^LN||VXC1^Federal funds^|||||F||||
OBX|3|CE|30956-7^vaccine type^LN|1|48^HIB^CVX|||||F
OBX|4|TS|29768-9^Date vaccine information statement published^LN|1|20070515||||||F
OBX|5|TS|29769-7^Date vaccine information statement presented^LN|1|201609068||||||F
NTE | | | NTE COMMENT |
RXA|0|1|201407080000||20^DTaP^CVX|999|||01^Historical immunization|^^^3724||||||||C|A||
ORC|RE|365413^^^|56790^^^|||||||SIISCLIENT3363^SMITH^MAGGIE||SIISCLIENT3396^WILSON^MATT|||||37
RXA|0|1|20140912|20140912|48^HIB PRP-T^CVX|0.5|mL^milliliters^UCUM||00^new immunization
record^NIP001|^Sticker^Nurse|^^^SIISCLIENT1724||||33k2a|20170815|PMC^sanofi^MVX|||CP|A||
RXR | IM^Intramuscular^HL70162 | RT^Right Thigh^HL70163
OBX|6|CE|64994-7^Vaccine funding program eligibility category^LN|0|V04^VFC eligible-American
Indian^HL70064|||||F|||20160406|||VXC40^Eligibility captured at the immunization level^CDCPHINVS
OBX|7|CE|30963-3^Vaccine purchased with^LN||VXC1^Federal funds^|||||F||||
OBX|8|CE|30956-7^vaccine type^LN|1|48^HIB^CVX||||||F
OBX|9|TS|29768-9^Date vaccine information statement published^LN|1|20070515||||||F
OBX|10|TS|29769-7^Date vaccine information statement presented^LN|1|201609068||||||F
OBX | 11 | CE | 31044-1^Vaccine Reaction^LN | 1 | 17^allergy to 2-
phenoxyethanol^CDCCPHINVS|||||F|||20140913|
RXA|0|1|20160415||998^No vaccine administered^CVX|999||||||NA|
OBX|12|CE|59784-9^Disease with presumed immunity^LN|38907003^History Varicella^SCT|||||F||20160415
RXA|0|1|20160722||998^No vaccine administered^CVX|999||||||NA|
OBX|13|CE|30945-0^Vaccination contraindication^LN|1|91930004^allergy to eggs^SCT||||||F|||20160522
```

Value Sets

Values		User-defined Table 0001 - Sex				
imMTrax	CDC	Description	Definitions			
F	F	Female	Person reports that she is female.			
M	M	Male	Person reports that he is male.			
U	U	Unknown/undifferentiated	No assertion Is made about the gender of the person.			
0		Othor				

Values		HL7-defined Table 0003 - Event Type	
imMTrax CDC		Description	Definitions
	>external table>		http://www.cdc.gov/vaccines/programs/iis/technical-guidance/downloads/hl7guide-1-5-2014-11.pdf

Values		User-defined Table 0004 - Patient Class		
imMTrax	CDC	Description	Definitions	
	R	Recurring Patient		
-				

V	alues	User-defined Table 0005 - Race	
imMTrax	CDC	Description	Definitions
1002-5	1002-5	American Indian or Alaska Native	
2028-9	2028-9	Asian	
2076-8	2076-8	Native Hawaiian or Other Pacific Islander	
2054-5	2054-5	Black or African-American	
2106-3	2106-3	White	
2131-1	2131-1	Other Race	
	<empty field=""></empty>	Unknown/undetermined	

Values		HL7-defined Table 0008 - Acknowledgement Code		
imMTrax	CDC	Description	Definitions	
	AA	Original mode: Application Accept		
AA	AA	Enhanced mode: Application acknowledgment: Accept	Message was accepted without error.	
AE	AE	Original mode: Application Error		
AE	AE	Enhanced mode: Application acknowledgment: Error	Message was processed and errors are being imported.	
AR	AR	Original mode: Application Reject	Message was rejected because one of the following occurred: Unsupported message type, Unsupported event code,	
AK	AK	Enhanced mode: Application acknowledgment: Reject	Unsupported processing ID, Unable to process for reasons unrelated for format or content	
Not supported	CA	Enhanced mode: Accept acknowledgment: Commit Accept		
Not supported	CE	Enhanced mode: Accept acknowledgment: Commit Error		
Not supported	CR	Enhanced mode: Accept acknowledgment: Commit Reject		

ſ	Values		User-defined Table 0010 - Physician ID	
	imMTrax	CDC	Description	Definitions
	NIP*	NIP*	*See National Provider Identifier Recommended	
	imMTrax ID		ID assigned to physician or vaccinator	

Values		HL7-defined Table 0061 - Check digit scheme	
imMTrax	CDC	Description	Definitions
Not supported	M10	Mod 10 algorithm	
Not supported	M11	Mod 11 algorithm	
Not supported	ISO	ISO 7064: 1983	
Not supported	NPI	Check digit algorithm in the US National Provider Identifier	

Values		User-defined Table 0063 - Relationship	
imMTrax	CDC	Description	Definitions
FTH	FTH	Father	**NOTE: Only FTH, GRD, MTH, or PAR will insert information into the IIS.
GRD	GRD	Guardian	Relationship codes of BRO, CGV, CHD, FCH, GRP, OTH, SCH, SEL, SIB, SIS, or SPO are valid codes but will not transfer
MTH	MTH	Mother	data into the IIS.
PAR	PAR	Parent	

Va	lues	User-defined Table 0064 - Financial Class	
imMTrax	CDC	Description	Definitions
V01	V01	Not VFC eligible	Client does not qualify for VFC because they do not have one of the statuses below. (V02-V05)
V02	V02	VFC eligible-Medicaid/Medicaid Managed Care	Client is currently on Medicaid and < 19 years old and the vaccine administered is eligible for VFC funding
V03	V03	VFC eligible- Uninsured	Client does not have private insurance coverage and < 19 years old and the vaccine administered is eligible for VFC funding
V04	V04	VFC eligible- American Indian/Alaskan Native	Client is a member of a federally recognized tribe and < 19 years old and the vaccine administered is eligible for VFC funding
V05	V05	VFC eligible-Federally Qualified Health Center Patient (under-insured)	Client has insurance, but insurance does not cover vaccines, limits the vaccines covered, or caps vaccine coverage at a certain amount and so client is eligible for VFC coverage at a Federally Qualified Health Center. The client must be receiving the immunications at the FQHC or a FQHC designated clinic and < 19 years old and the vaccine administered is eligible for VFC funding.
V23	V23	317 Funding	Client is eligible for vaccines under the state/program immunization policy and the vaccine administered is eligible for 317 funding.

Values		HL7-defined Table 0076 - Message Type	
imMTrax	CDC	Description	Definitions
ACK	ACK	General acknowledgment	
Not supported	ADT	ADT message	
QBP	QBP	Query by Parameter	
RSP	RSP	Response to Query by parameter	
VXU	VXU	Unsolicited vaccination record update	

Values		HL7-defined Table 0078 - Abnormal Flags	
imMTrax	CDC	Description	Definitions
<empty></empty>	<empty></empty>	Expected to be empty	

Values		HL7-definedTable 0085 - Observation result status codes interpretation	
imMTrax	CDC	Description	Definitions
F	F	Final	

Values		User-defined Table 0086 - Plan Type ID		
imMTrax	CDC	Description	Definitions	
5	5	Private Insurance		
2	2	Medicaid		
1	1	Medicare		
81	81	Self pay		

Values		HL7-defined Table 0091 - Query Priority	
imMTrax	CDC	Description	Definitions
1	1	Immediate Processing	

Values		HL7-defined Table 0102 - Delayed Acknowledgement Type	
imMTrax	CDC	Description	Definitions
	<empty></empty>	Expected to be empty	

Values		HL7-defined Table 0103 - Processing ID		
imMTrax	CDC	Description	Definitions	
Not supported	D	Debugging	Only "P" for Production is valid for imMTrax including while testing.	
P	P	Production		
Not supported	T	Training		

Va	lues	HL7-defined Table 0104 - Version ID	
imMTrax	CDC	Description	Definitions
2.5.1	2.5.1	Release 2.5.1 April 2007	

Values		HL7-defined Table 0119 - Order Control Codes		
imMTrax	CDC	Description	Definitions	
Not supported	OK	Order accepted & OK		
RE	RE	Observations to follow		

Values		HL7-defined Table 0126 - Quantity Limited Request	
imMTrax	CDC	Description	Definitions
RD	RD	Records	

Values		HL7-defined Table 0136 - Yes/No Indicator		
imMTrax	CDC	Description	Definitions	
Y	Y	Yes		
N	N	No		
[""]	[""]	Nullify the value	Nullify the value recorded in the receiving system data base.	
		Means do nothing to existing values	Make no changes to the record in the receiving data base. The sending system has no information on this field	
<emnty></emnty>	<emntv></emntv>	Means do nothing to existing values	Make no changes to the record in the receiving data base. The sending system has no information on this field	

Values		HL7-defined Table 0155 - Accept/Application Acknowledgement Conditions		
imMTrax	CDC	Description	Definitions	
AL	AL	Always	imMTrax recommendation	
NE	NE	Never		
ER	ER	Error/Reject conditions only		
SU	SU	Successful completion only		

Values		NCIT/HL7-defined Table 0162 - Route of Administration		
imMTrax	CDC	Description	Definitions	
C38238 or ID	C38238 or ID	Intradermal	within or introduced between the layers of the skin	
C28161 or IM	C28161 or IM	Intramuscular	within or into the substance of a muscle	
C38284 or NS	C38284 or NS	Nasal	Given by nose	
C38276 or IV	C38276 or IV	Intravenous	administered into a vein	
C38288 or PO	C38288 or PO	Oral	administered by mouth	
OTH	OTH	Other/Miscellaneous		
C38676	C38676	Percutaneous	made, done, or effectged through the skin	
C38299 or SC	C38299 or SC	Subcutaneous	Under the skin or between skin and muscles.	
C38305 or TD	C38305 or TD	Transdermal	describes something, especially a drug, that is introduced into the body through the skir	

Va	lues	HL7-defined Table 0163 - Administrative Site	
imMTrax	CDC	Description	Definitions
LT	LT	Left Thigh	
LA	LA	Left Arm	
LD	LD	Left Deltoid	
LG	LG	Left Gluteous Medius	
LVL	LVL	Left Vastus Lateralis	
LLFA	LLFA	Left Lower Forearm	
RA	RA	Right Arm	
RT	RT	Right Thigh	
RVL	RVL	Right Vastus Lateralis	
RG	RG	Right Gluteous Medius	
RD	RD	Right Deltoid	
RLFA	RLFA	Right Lower Forearm	

Va	lues	CDCREC Value Set (Replaced Table 0189 - Ethnic Group)		
imMTrax	CDC	Description	Definitions	
2135-2	2135-2	Hispanic or Latino		
2186-5	2186-5	not Hispanic or Latino		
	<empty></empty>	Unknown		

Val	lues	HL7-defined Table 0190 - Address Type		
imMTrax	CDC	Description	Definitions	
C	С	Current or Temporary		
P	P	Permanent		
M	M	Mailing		
В	В	Firm/Business		
0	0	Office		
Н	Н	Home		
N	N	Birth (nee)		
F	F	Country of Origin		
L	L	Legal Address		
BDL		Birth Delivery Locaton [use for birth country and state]		
BR	BR	Residence at Birth [use for residence at birth]		
RH	RH	Registry Home		
BA	BA	Bad Address		

Values		HL7-defined Table 0200 - Name Type		
imMTrax	CDC	Description	Definitions	
A	A	Alias name		
L	L	Legal name		
D	D	Display name		
M	M	Maiden name		
C	C	Adopted name		
В		Name at birth		
P	P	Name of partner/spouse		
U	U	Unspecified		
T		Tribal/Community Name		

Values		HL7-defined Table 0201 - Telecommunication use code		
imMTrax	CDC	Description	Definitions	
PRN	PRN	Primary residence number		
ORN	ORN	Other residence number		
WPN	WPN	Work number		
VHN	VHN	Vacation home number		
ASN	ASN	Answering service number		
EMR	EMR	Emergency number		
NET	NET	Network (email) address		
BPN	BPN	Beeper number		

Values		HL7-defined Table 0202 - Telecommunication equipment type	
		HL7-defined Table 0202 - Telecommunication equipment type	
imMTrax	CDC	Description	Definitions
PH	PH	Telephone	
FX	FX	Fax	
MD	MD	Modem	

CP	CP	Cellular Phone	
BP	BP	Beeper	
Internet	Internet	Internet address: Use only if telecommunication use code is NET	
X.400	X.400	X.400 email address: Use only if telecommunication use code is NET	
TDD	TDD	Telecommunications Device for the Deaf	
TTY	TTY	Teletypewriter	

Va	lues	HL7-defined Table 0203 - Identifier Type	
imMTrax	CDC	Description	Definitions
AN	AN	Account number	An identifier that is unique to an account.
Not supported	ANON	Anonymous identifier	An identifier for a living subject whose real identity is protected or suppressed justification: For public health reporting purposes, anonymous identifiers are occasionally used for protecting patient identity in reporting certain results. For instance, a state health department may choose to use a scheme for generating an anonymous identifier for reporting a patient that has had a positive human immunodeficiency virus antibody test. Anonymous identifiers can be used in PID 3 by replacing the medical record number or other non-anonymous identifier. The assigning authority for an anonymous identifier would be the state/local health department.
Not supported	ANC	Account number Creditor	Class: Financial A more precise definition of an account number: sometimes two distinct account numbers must be transmitted in the same message, one as the creditor, the other as the debtor.
Not supported	AND	Account number debitor	Class: Financial A more precise definition of an account number: sometimes two distinct account numbers must be transmitted in the same message, one as the creditor, the other as the debtor.
Not supported	ANT	Temporary Account Number	Class: Financial Temporary version of an Account Number. Use Case: An ancillary system that does not normally assign account numbers is the first time to register a patient. This ancillary system will generate a temporary account number that will only be used until an official account number is assigned.
Not supported Not supported	APRN BA	Advanced Practice Registered Nurse number Bank Account Number	An identifier that is unique to an advanced practice registered nurse within the jurisdiction of a certifying board Class: Financial
Not supported	BC	Bank Card Number	Class: Financial An identifier that is unique to a person's bank card. Replaces AM, DI, DS, MS, and VS beginning in v 2.5.
BR	BR	Birth registry number	Class: Financial
Not supported	CC	Cost Center number	Use Case: needed especially for transmitting information about invoices.
Not supported	CY	County number	
Not supported Not supported	DDS DEA	Dentist license number Drug Enforcement Administration registration number	An identifier of an individual or organization relative to controlled substance regulation and transactions. Use case: This is a registration number that identifies an individual or organization relative to controlled substance regulation and transactions. A DEA number has a very precise and widely accepted meaning within the United States. Surprisingly, the US Drug Enforcement Administration does not solely assign DEA numbers in the United States. Hospitals have the authority to issue DEA numbers to their medical residents. These DEA numbers are based upon the hospital's DEA number, but the authority rests with the hospital on the assignment to the residents. Thus, DEA as an Identifier Type is necessary in addition to DEA as an Assigning Authority.
Not supported	DFN	Drug Furnishing or prescriptive authority Number	An identifier issued to a health care provider authorizing the person to write drug orders Use Case: A nurse practitioner has authorization to furnish or prescribe pharmaceutical substances; this identifier is in component 1.
DL DN	DL DN	Driver's license number Doctor number	
Not supported	DPM	Podiatrist license number	An identifier that is unique to a podiatrist within the jurisdiction of the licensing board.
Not supported Not supported	DO DR	Osteopathic License number Donor Registration Number	An identifier that is unique to an osteopath within the jurisdiction of a licensing board.
El	El	Employee number	A number that uniquely identifies an employee to an employer.
EN FI	EN FI	Employer number Facility ID	
GI	GI	Guarantor internal identifier	Class: Financial
	GL	General ledger number	Class: Financial
GN Not supported	GN HC	Guarantor external identifier Health Card Number	Class: Financial
Not supported	JHN		Class: Insurance
Not supported		Jurisdictional health number (Canada)	2 uses: a) UK jurisdictional CHI number; b) Canadian provincial health card number:
Not supported Not supported	IND LI	Indigenous/Aboriginal Labor and industries number	A number assigned to a member of an indigenous or aboriginal group outside of Canada.
LN	LN	License number	
LR	LR	Local Registry ID	Change
MA Not supported	MA MB	Patient Medicaid number Member Number	Class: Insurance An identifier for the insured of an insurance policy (this insured always has a subscriber), usually assigned by the insurance carrier. Use Case: Person is covered by an insurance policy. This person may or may not be the subscriber of the policy.
MC	MC	Patient's Medicare number	Class: Insurance
Not supported	MCD	Practitioner Medicaid number	Class: Insurance
Not supported	MCN MCR	Microchip Number Practitioner Medicare number	Class: Insurance
Not supported Not supported	MD	Medical License number	An identifier that is unique to a medical doctor within the jurisdicction of a licensing board. Use Case: These license numbers are sometimes used as identifiers. In some states, the same authority issues all three identifiers, e.g., medical, osteopathic, and physician assistant licenses all issued by one state medical board. For this case, the CX data type requires distinct identifier types to accurately interpret component 1. Additionally, the distinction among these license types is critical in most health care settings (this is not to convey full licensing information, which requires a segment to support all related attributes).
Not supported	MI	Military ID number	A number assigned to an individual who has had military duty, but is not currently on active duty. The number is assigned by the DOD or Veterans' Affairs (VA).
MR	MR	Medical record number	An identifier that is unique to a patient within a set of medical records, not necessarily unique within an application. Preferred identifier to be sent.
Not supported	MRT	Temporary Medical Record Number	Temporary version of a Medical Record Number Use Case: An ancillary system that does not normally assign medical record numbers is the first time to register a patient. This ancillary system will generate a temporary medical record number that will only be used until an official medical record number is assigned.
NE	NE	National employer identifier	In the US, the Assigning Authority for this value is typically CMS, but it may be used by all providers and insurance companies in HIPAA related transactions.
NH	NH	National Health Plan Identifier	Class: Insurance Used for the UK NHS national identifier. In the US, the Assigning Authority for this value is typically CMS, but it may be used by all providers and insurance companies in HIPAA related transactions.
NI	NI	National unique individual identifier	Class: Insurance In the US, the Assigning Authority for this value is typically CMS, but it may be used by all providers and insurance companies in HIPAA related transactions.
Not supported	NII	National Insurance Organization Identifier	Class: Insurance In Germany a national identifier for an insurance company. It is printed on the insurance card (health card). It is not to be confused with the health card number itself.
Not supported	NIIP	National Insurance Payor Identifier (Payor)	Class: Insurance Use case: a subdivision issues the card with their identifier, but the main division is going to pay the invoices.
Not supported	NNxxx	National Person Identifier where the xxx is the ISO table 3166 3-character (alphabeti	c) country code
Not supported	NP	Nurse practitioner number	An identifier that is unique to a nurse practitioner within the jurisdiction of a certifying board. Class: Insurance
NPI Not supported	NPI OD	National provider identifier Optometrist license number	In the US, the Assigning Authority for this value is typically CMS, but it may be used by all providers and insurance companies in HIPAA related transactions. A number that is unique to an individual optometrist within the jurisdiction of the licensing board.
Not supported Not supported	PA PA	Physician Assistant number	An identifier that is unique to an individual optometrist within the jurisdiction of the licensing board. An identifier that is unique to a physician assistant within the jurisdiction of a licensing board.
Not supported	PCN	Penitentiary/correctional institution Number	A number assigned to individual who is incarcerated.
Not supported	PE PEN	Living Subject Enterprise Number Pension Number	An identifier that is unique to a living subject within an enterprise (as identified by the Assigning Authority).
Not supported PI	PEN PI	Pension Number Patient internal identifier	A number that is unique to a patient within an Assigning Authority.
PN	PN	Person number	A number that is unique to a living subject within an Assigning Authority.
Not supported	PNT	Temporary Living Subject Number	Temporary version of a Lining Subject Number.

Values		HL7-defined Table 0203 - Identifier Type	
imMTrax	CDC		
Not supported	PPN	Passport number	A unique number assigned to the document affirming that a person is a citizen of the country. In the US this number is issued only by the State Department.
Not supported	PRC	Permanent Resident Card Number	
PRN	PRN	Provider number	A number that is unique to an individual provider, a provider group or an organization within an Assigning Authority. Use case: This allows PRN to represent either an individual (a nurse) or a group/organization (orthopedic surgery team).
PT	PT	Patient external identifier	
Not supported	QA	QA number	
Not supported	RI	Resource identifier	A generalized resource identifier. Use Case: An identifier type is needed to accommodate what are commonly known as resources. The resources can include human (e.g., a respiratory therapist), non-human (e.g., a companion animal), inanimate object (e.g., an exam room), organization (e.g., diabetic education class) or any other physical or logical entity.
Not supported	RPH	Pharmacist license number	An identifier that is unique to a pharmacist within the jurisdiction of the licensing board
Not supported	RN	Registered Nurse Number	An identifier that is unique to a registered nurse within the jurisdiction of the licensing board
RR	RR	Railroad Retirement number	
RRI	RRI	Regional registry ID	
Not supported	SL	State license	
Not supported	SN	Subscriber Number	Class: Insurance An sidentifier for a subscriber of an insurance policy which is unique for, and usually assigned by, the insurance carrier. Use Case: A person is the subscriber of an insurance policy. The person's family may be plan members, but are not the subscriber.
SR	SR	State registry ID	
SS	SS	Social Security number	
Not supported	TAX	Tax ID number	
Ü	U	Unspecified identifier	
UPIN	UPIN	Medicare/CMS (formerly HCFA)'s Universal Physician Identification numbers	Class: Insurance
VN	VN	Visit number	
WC	WC	WIC identifier	
Not supported	WCN	Workers' Comp Number	
XX	XX	Organization identifier	

imMTrax	CDC	Description	Definitions
L	L	Legal name	
D	D	Display name	
A		Alias name	

Values		HL7-defined Table 0207 - Processing mode
<er< th=""><th>mpty></th><th>Expected to be empty</th></er<>	mpty>	Expected to be empty

Values		User-defined Table 0208 - Query Response Status		
imMTrax	CDC	Description	Definitions	
OK	OK	Data found, no errors (this is the default)	Simmilar to AA in table HL70008	
NF	NF	No data found, no errors		
AE	AE	Application error	Query had an error in content of format.	
AR	AR	Application reject	Message was rejected because of one of the following occurred: Unsupported message type, Unsupported event code, Unsupported Processing ID, Unable to process for reasons unrelated for format or content.	
TM	TM	Too many candidates found		

Values		User-defined Table 0215 - Publicity Code		
imMTrax	CDC	Description	Definitions	
01	01	No reminder/recall		
02	02	Reminder/recall - any method		
03	03	Reminder/recall - no calls		
04	04	Reminder only - any method		
05	05	Reminder only - no calls		
06	06	Recall only - any method		
07	07	Recall only - no calls		
08	08	Reminder/recall - to provider		
09	09	Reminder to provider		
10	10	Only reminder to provider, no recall		
11	11	Recall to provider		
12	12	Only recall to provider, no reminder		

Va	lues	User-defined Table 0220 - Living Arrangement	
imMTrax	CDC	Description	Definitions
	<empty></empty>	Expected to be empty	

Values		HL7-defined Table 0227 - Manufacturers of Vaccines (code=MVX)	
imMTrax	CDC	Description	Definitions
	<external table=""></external>		http://www2a.cdc.gov/vaccines/ijs/ijsstandards/vaccines.asp?rnt=mvx

Va	lues	Jser-defined Table 0288 - Census Tract		
imMTrax	CDC	Description	Definitions	
	<empty></empty>	Expected to be empty		

	Values		er-defined Table 0289 - County/Parish	
ı	imMTrax	CDC	Description	Definitions
		<external table=""></external>	Expected to be empty - County Code sent in PID-11.9	

	Values		HL7-defined Table 0292 - Codes for Vaccines administered (code=CVX)	
ſ	imMTrax	CDC	Description	Definitions
ſ		<external table=""></external>		http://www2a.cdc.gov/vaccines/iis/iisstandards/vaccines.asp?rpt=cvx

Va	lues	User-defined Table 0296 - Language	ole 0296 - Language	
imMTrax	CDC	Description	Definitions	
	<external table=""></external>		http://phinvads.cdc.gov/vads/ViewValueSet.action?id=43D34BBC-617F-DD11-B38D-00188B398520	

Values		HL7-definedTable 0301 - Universal ID Type	
imMTrax	CDC	Description	Definitions
OID	OID		

Values		HL7-defined Table 0322 - Completion Status		
imMTrax	CDC	Description	Definitions	
CP	CP	Complete		
RE	RE	Refused		
NA	NA	Not Administered		
PA	PA	Partially Administered		

Va	lues	HL7-defined Table 0323 - Action Code	
imMTrax	CDC	Description	Definitions
A	A	Add	

\	alues	HL7-defined Table 0323 - Action Code	Definitions
D	D	Delete	
U	U	Update	

Values		HL7-definedTable 0354 - Message Structure		
imMTrax	CDC	Description	Definitions	
ACK	ACK	ACK		
QBP_Q11	QBP_Q11	QBP		
RSP_K11	RSP_K11	RSP		
VXU_V04	VXU_V04	VXU		

Values		HL7-defined Table 0356 - Alternate character Ste Handling Scheme		
imMTrax	CDC	Description	Definitions	
	<emnty></emnty>	Expected to be empty		

Va	lues	HL7-defined Table 0357 - Message Error Status Codes	
imMTrax	CDC	Description	Definitions
0	0	Message accepted	Success. Optional, as the AA conveys this. Used for systems that must always return a status code.
		Error status codes	
100	100	Segment sequence error	The message segments were not in the proper order or required segments are missing
101	101	Required field missing	A required field is missing from the segment.
102	102	Data type error	The field contained data of the wrong data type, e.g., an NM field contained letters of the alphabet.
103	103	Table value not found	A field of data type ID or IS was compared against the corresponding table, and no match was found.
		Rejection status codes	
200	200	Unsupported message type	The Message type is not supported.
201	201	Unsupported event code	The Event Code is not supported.
202	202	Unsupported processing ID	The Processing ID is not supported.
203	203	Unsupported version ID	The Version ID is not supported.
204	204	Halianova havoidankiitaa	The ID of the patient, order, etc. was not found. Used for transactions other than additions, e.g., transfer of a non-existent
204	204	Unknown key identifier	patient.
205	205	Duplicate key identifier	The ID of the patient, order, etc. already exists. Used in response to addition transactions (Admit, New Order, etc.).
206	206	Application record locked	The transaction could not be performed at the application storage level, e.g., database locked.
207	207	Application internal error	A catchall for internal errors not explicitly covered by other codes.

V	alues	User-defined Table 0360 - Degree	
imMTrax	CDC	Description	Definitions
PN	PN	Advanced Practice Nurse	Scimillos
AA	AA	Associate of Arts	
AS	AS	Associate of Science	
BA	BA	Bachelor of Arts	
BN	BN	Bachelor of Nursing	
BS	BS	Bachelor of Science	
BSN	BSN	Bachelor of Science in Nursing	
CER	CER	Certificate	
CANP	CANP	Certified Adult Nurse Practitioner	
CMA	CMA	Certified Medical Assistant	
CNP	CNP	Certified Nurse Practitioner	
CNM	CNM	Certified Nurse Midwife	
CNA	CNA	Certified Nurse's Assistant	
CRN	CRN	Certified Registered Nurse	
CNS	CNS	Certified Nurse Specialist	
CPNP	CPNP	Certified Pediatric Nurse Practitioner	
DIP	DIP	Diploma	
PHD	PHD	Doctor of Philosophy	
MD	MD	Doctor of Medicine	
DO	DO	Doctor of Osteopathy	
EMT	EMT	Emergency Medical Technician	
EMT-P	EMT-P	Emergency Medical Technician – Paramedic	
FPNP	FPNP	Family Practice Nurse Practitioner	
HS	HS	High School Graduate	
JD	JD	Juris Doctor	
LPN	LPN	Licensed Practical Nurse	
MA	MA	Master of Arts	
MBA	MBA	Master of Business Administration	
MPH	MPH	Master of Public Health	
MS	MS	Master of Science	
MSN	MSN	Master of Science – Nursing	
MDA	MDA	Medical Assistant	
MT	MT	Medical Technician	
NG	NG	Non-Graduate	
NP	NP	Nurse Practitioner	
PharmD	PharmD	Doctor of Pharmacy	
PA PHN	PA PHN	Physician Assistant Public Health Nurse	
PHN RMA	PHN RMA		
RMA	RMA RN	Registered Medical Assistant Registered Nurse	
RPH	RPH	Registered Pharmacist	
SEC	SEC	Secretarial Certificate	
TS	TS	Trade School Graduate	
12	15	Trade School Graduate	

- 1	Values		User-defined Table 0361 - Application		
	imMTrax	CDC	Description	Definitions	
	imMTrax	<locally determinted=""></locally>	Name assigned to the local IIS		
			*		

Values		User-defined Table 0362 - Facility	
imMTrax	CDC	Description	Definitions
>locally determined>	>locally determined>	Facility ID assigned by the IIS	Example: SIISCLIENT9900

Values		User-defined Table 0363 - Assigning Authority			
imMTrax	CDC	Description	Definitions		
AK	AKA	ALASKA			
AL	ALA	ALABAMA			
AS	ASA	AMERICAN SAMOA			
AZ	AZA	ARIZONA			
AR	ARA	ARKANSAS			
Not supported	BAA	NEW YORK CITY			
CA	CAA	CALIFORNIA			
Not supported	CHA	CHICAGO			
CO	COA	COLORADO			
CT	CTA	CONNECTICUT			
DE	DEA	DELAWARE			
DC	DCA	DISTRICT OF COLUMBIA			
FL	FLA	FLORIDA			
FM	FMA	FED STATES MICRO			
GA	GAA	GEORGIA			
GU	GUA	GUAM			
HI	HIA	HAWAII			
ID	IDA	IDAHO			
IL	ILA	ILLINOIS			
IN	INA	INDIANA			
IA	IAA	IOWA			
KS	KSA	KANSAS			
KY	KYA	KENTUCKY			
LA	LAA	LOUISIANA			
ME	MEA	MAINE			

MH	MHA	REP MARS ISLANDS
MD	MDA	THE WARD MARYLAND
MA	MAA	MASSACHUSETTS
MI	MIA	MICHIGAN MICHIGAN
MN	MNA	MINNESOTA
MS	MSA	MISSISSIPPI DISPRIMENTATION OF THE PROPERTY OF
MO	MOA	INISSIOSIFI
MP	MPA	WISSOURI NO. MARIANA ISLAND
MT	MTA	NO. INCLUDING SERVE
NE NE	NEA	INCINITATIVA NEBRASKA
NE NV	NVA NVA	NEORASAA NEVADA
NH	NHA	NEW HAMPSHIRE
NH NJ	NHA NJA	NEW JASEY
NM	NMA	NEW JERSET
NW NY		NEW MEXICU NEW YORK STATE
	NYA NCA	
NC		NORTH CAROLINA
ND	NDA	NORTH DAKOTA
OH	OHA	OHIO
OK	OKA	OKLAHOMA
OR	ORA	OREGON
PW	RPA	REPUBLIC PALAU
PA	PAA	PENNSYLVANIA
Not supported	PHA	PHILADELPHIA
PR	PRA	PUERTO RICO
RI	RIA	RHODE ISLAND
SC	SCA	SOUTH CAROLINA
SD	SDA	SOUTH DAKOTA
Not supported	TBA	SAN ANTONIO
Not supported	THA	HOUSTON
TN	TNA	TENNESSEE
TX	TXA	TEXAS
UT	UTA	UTAH
VT	VTA	VERMONT
VA	VAA	VIRGINIA
VI	VIA	VIRGIN ISLANDS
WA	WAA	WASHINGTON
WV	WVA	WEST VIRGINIA
WI	WIA	WISCONSIN
WY	WYA	WYOMING

Values		User-defined Table 0396 - Coding System		
imMTrax	CDC	Description	Definitions	
Not supported	99zzz or L	Local general code (where z is an alphanumeric character)		
Not supported	ART	WHO Adverse Reaction Terms		
Not supported	C4	CPT-4		
Not supported	C5	CPT-5		
Not supported	CDCA	CDC Analyte Codes		
Not supported	CDCM	CDC Methods/Instruments Codes		
CDCPHINVS	CDCPHINVS	PHIN VS (CDC Local Coding System)		
Not supported	CDS	CDC Surveillance		
Not supported	CPTM	CPT Modifier Code		
Not supported	CST	COSTART		
CVX	CVX	CDC Vaccine Codes		
Not supported	E	EUCLIDES		
Not supported	E5	Euclides quantity codes		
Not supported	E6	Euclides Lab method codes		
Not supported	E7	Euclides Lab equipment codes		
Not supported	ENZC	Enzyme Codes		
Not supported	HB	HIBCC		
Not supported	HCPCS	HCFA Common Procedure Coding System		
Not supported	HHC	Home Health Care		
Not supported	HL7nnnn	HL7 Defined Codes where nnnn is the HL7 table number		
Not supported	HPC	HCFA Procedure Codes (HCPCS)		
Not supported	I10	ICD-10		
Not supported	I10P	ICD-10 Procedure Codes		
Not supported	19	ICD9		
Not supported	I9C	ICD-9CM		
Not supported	ISOnnnn	ISO Defined Codes where nnnn is the ISO table number		
Not supported	LB	Local billing code		
Not supported	LN	Logical Observation Identifier Names and Codes (LOINCE)		
Not supported	MCD	Medicaid		
Not supported	MCR	Medicare		
Not supported	MEDR	Medical Dictionary for Drug Regulatory Affairs (MEDDRA)		
MVX	MVX	CDC Vaccine Manufacturer Codes		
Not supported	NDC	National drug codes		
Not supported	NCIT	NCI Thesaurus		
NPI	NPI	National Provider Identifier		
Not supported	SNM	Systemized Nomenclature of Medicine (SNOMEDE)		
Not supported	SCT	SNOMED Clinical Terminology		
Not supported	SCT2	SNOMED Clinical Terms alphanumeric codes		
Not supported	SNM3	SNOMED International		
Not supported	SNT	SNOMED topology codes (anatomic sites)		
Not supported	UML	Unified Medical Language		
Not supported	UPC	Universal Product Code		
Not supported	UPIN	UPIN		
Not supported	W1	WHO record # drug codes (6 digit)		
Not supported	W2	WHO record # drug codes (8 digit)		
Not supported	W4	WHO record # code with ASTM extension		
Not supported	WC	WHO ATC		
oc supported	70.0	***************************************		

Values		User-defined Table 0441 - Immunization Registry Status			
imMTrax	CDC	Description	Definitions		
Α	A	Active			
ı	I	InactiveUnspecified			
L	L	Inactive-Lost to follow-up (cannot contact)			
M	M	Inactive-Moved or gone elsewhere (transferred)			
Р	Р	Inactive-Permanently inactive (do not re-activate or add new entries to this record)			
U	U	Unknown			
0		Other			

Values User-defined Table 0471 - Query Name			
imMTrax	CDC	Description	Definitions
Z33	Z34	Request Immunization History	
Z43	Z44	Request Evaluated History and Forecast	

Values		HL7-defined Table 0516 - Error Severity (use in ERR-4)		
imMTrax	CDC	Description	Definitions	
I	I	Information	Transaction successful, but includes returned information.	
W	W	Warning	Transaction successful, but there may be issues. These may include non-fatal errors with potential for loss of data.	
			Transaction was not successful. The application rejected data that is views as important. This could include required fields or	
E	E	Error	the entire message. The sender should be alerted to review and correcr the message	

Values		User-defined Table 0533 - Application Error Code		
imMTrax	CDC	Description	Definitions	
1	1	Illogical Date error	Date conflicts with another date in the message.	
2	2	Invalid Date	Date is not valid or lacks required precision.	
3	3	Illogical Value error	The value conflicts with other data in the message.	
4	4	Invalid value	The value is not valid. This applies for fields that are not associated with a table of values.	
5	5	Table value not found	The value is not found in the associated table.	
6	6	Required observation missing	A required observation, such as VFC eligibility status, is missing.	

Values		CDC-defined Table NIP001 - Immunization Information Source		
imMTrax	CDC	Description	Definitions	
00		New immunization record	The record of a newly administered dose of vaccine. The dose was administered by the organization that is reporting this	
00	00	New Immunization record	dose.	
01	01	Historical information - source unspecified	The record of a vaccine dose from a reliable historical source, such as an immunization card.	
02	02	Historical information - from other provider	The record of a vaccine dose from another health care provider's historical records.	
03	03	Historical information - from parent's written record	The record of a vaccine dose from parentally maintained written records.	
04	04	Historical information - from parent's recall	The record of a vaccine dose from a parents recall. The reliability of this record is considered low.	
05	05	Historical information - from other registry	The record of a vaccine dose from another Immunization Information System (IIS).	
06	06	Historical information - from birth certificate	The record of a vaccine dose from a birth record.	
07	07	Historical information - from school record	The record of a vaccine dose from a written school record.	
08	08	Historical information - from public agency	The record of a vaccine dose from a written public health agency record.	

Values		CDC-defined Table NIP002 - Substance Refusal Reason	
imMTrax	CDC	Description	Definitions
Not supported	00	Parental decision	
Not supported	01	Religious exemption	
Not supported	02	Other (must add text component of the CE field with description)	
Not supported	03	Patient decision	

Not supported	03	Patient decision				
Va	lues	MT County Codes				
	imMTrax		Description	https:	//phinvads.cdc.gov/vads/ViewValueSet.action?id=20D34	3BC-617F-DD11-B38D-00188B398520
	UNKWN	Unknown				
	NONMT	Non-MT resident				
	30001	BEAVERHEAD				
	30003	BIG HORN				
	30005	BLAINE				
	30007 30009	BROADWATER CARBON				
	30011	CARTER				
	30011	CASCADE				
	30015	CHOTEAU				
	30017	CUSTER				
	30017	DANIELS				
	30021	DAWSON				
	30023	DEER LODGE				
	30025	FALLON				
	30027	FERGUS				
	30029	FLATHEAD				
	30031	GALLATIN				
	30033	GARFIELD				
	30035	GLACIER				
	30037	GOLDEN VALLEY				
	30039	GRANITE				
	30041	HILL				
	30043	JEFFERSON				
	30045	JUDITH BASIN LAKE				
	30047 30049	LEWIS AND CLARK				
	30051	LIBERTY				
	30053	LINCOLN				
	30055	MADISON				
	30057	MCCONE				
	30059	MEAGHER				
	30061	MINERAL				
	30063	MISSOULA				
	30065	MUSSELSHELL				
	30067	PARK				
	30069	PETROLEUM				
	30071	PHILLIPS				
	30073	PONDERA				
	30075	POWDER RIVER				
	30077 30079	POWELL PRAIRIE				
	30079	RAVALLI				
	30083	RICHLAND				
	30085	ROOSEVELT				
	30087	ROSEBUD				
	30089	SANDERS				
	30091	SHERIDAN				
	30093	SILVER BOW				
	30095	STILLWATER				
	30097	SWEET GRASS				
	30099	TETON				
	30101	TOOLE				
	30103	TREASURE				
	30105	VALLEY				
	30107	WHEATLAND				
	30109 30111	WIBAUX YELLOWSTONE				
	20111	TELLOWSTONE				

Tables available from the:

CDC Implementation Guide for Immunization Messaging

HL7 2	2.5.1
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Use in OBX-3	·)		
OINC® Code	Description	Corresponding data type (indicate in OBX-2)	Corresponding observation value EXAMPLE O code table to use (value in OBX-5)
accine Funding	Program Eligibility Category - Use	- 1	BX-5 will contain the funding program eligibility
ategory for a giv	ven immunization.		
64994-7	Vaccine funding program	(CE)	HL70064
04994-7	eligibility category	(CE)	HL/0004
accine Funding	Source – Use in OBX-3 to indicate	that OBX-5 will contain the	funding source for a given immunization.
30963-3	Vaccine funding source	(CE)	Value Set OID - 2.16.840.1.114222.4.11.3287 Value Set Code:: PHVS_ImmunizationFundingSource_IIS
accine Type Ide			
30956-7	Vaccine Type (Vaccine group or family)	(CE)	HL70292 (CVX codes - use the codes described as "unspecified formulation" as needed.)
38890-0	Component Vaccine Type	(CE)	HL70292 (CVX codes - use the codes described as "unspecified formulation" as needed.)
ontraindication	ns, Precautions, Indications and In	nmunities	
	Vaccination		19970522
30946-8	contraindication/precaution	(DT)	
	effective date Vaccination temporary		40000533
30944-3	contraindication/precaution	(DT)	19990523
30344-3	expiration date	(D1)	
	expiration date		
20045.0	Vaccination	(CE)	Value Set OID - 2.16.840.1.114222.4.11.3288
30945-0	contraindication/precaution	(CE)	Value Set Code::
			PHVS_VaccinationContraindication_IIS
		(CE)	
31044-1	Reaction		Value Set OID - 2.16.840.1.114222.4.11.3289
			Value Set Code:: PHVS VaccinationReaction I
			value set code i i i v s_v decination i i caction_i
50704.0	Disease with presumed	(65)	
59784-9	immunity	(CE)	Value Set OID - 2.16.840.1.114222.4.11.3293
			Value Set Code:: PHVS_EvidenceOfImmunity_
			Value Set OID - 2.16.840.1.114222.4.11.3290
59785-6	Indications to immunize	(CE)	
			Value Set Code::
accine Informa	tion Statement (VIS) Dates		PHVS_VaccinationSpecialIndications_IIS
	Ten statement (vio) bates		
69764-9	Document type	(CE)	Value Set OID: 2.16.840.1.114222.4.11.6041
		, ,	Value Set Code: PHVS_VISBarcodes_IIS
29768-9	Date Vaccine Information	(DT)	19900605
29708-9	Statement Published	(01)	19900003
29769-7	Date Vaccine Information	(DT)	19930731
	Statement Presented		
orecasting and	Evaluating Immunizations 30973-2 Dose number in	T T	
		(NM)	2
30973-2	series		
	series Vaccines due next	(CE)	HL70292 (CVX)
30973-2 30979-9 30980-7	Vaccines due next 30980-7 – Date vaccine due	(CE) (DT)	HL70292 (CVX) 19980526

orecasting and	Evaluating Immunizations		
30982-3	30982-3 – Reason applied by forecast logic to project this vaccine	(CE) or (ST)	Codes for forecast logic reason locally defined
59779-9	Immunization Schedule used	(CE)	Value Set OID - 2.16.840.1.114222.4.11.3291 Value Set Code:: PHVS_ImmunizationScheduleIdentifier_IIS
59780-7	Immunization Series name	(CE)	Locally Defined
59782-3	Number of doses in primary series	(NM)	2
59781-5	Dose validity	(ID)	Y, N or empty
59783-1	Status in immunization series	(CE)	Locally defined value set
mallpox Take I	Read: These codes allow information Vaccination Take - Response	on about evaluation of a	smallpox vaccination, called the take response.
46249-9	Type	(ST)	Major Take, Equivocal, Not Available
46250-7	Vaccination Take - Response Date	(DT)	20091221
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Tables available from the:

CDC Implementation Guide for Immunization Messaging

HL7 2.5.1

	Value Set Name – Immunization Funding Source							
Concept Code	Concept Name	Definition	Used in OBX-5	HL7 Table 0396 Code	V 2.3.1 Value NIP008			
PHC70	Private Funds	Immunization was funded by private funds, including insurance.		CDCPHINVS	PVF			
VXC50	Pandemic	Public funding for pandem	ic vaccines.	CDCPHINVS				
VXC51	Public VFC	Vaccine stock used was publicly funded by the VFC program.		CDCPHINVS	PUB			
	EXAMPLES:	PHC70^Private funds^CDC	PHINVS					

	Value Set Name – Vaccination Contraindications					
Concept Code	Concept Name	Definition Used in OBX-5	HL7 Table 0396 Code	V 2.3.1 Value NIP004		
VX30	allergy (anaphylactic) to proteins of rodent or neural origin	allergy (anaphylactic) to proteins of rodent or neural origin	CDCPHINVS			
VXC17	allergy (anaphylactic) to 2- phenoxyethanol	allergy (anaphylactic) to 2-phenoxyethanol	CDCPHINVS			
VXC18	allergy to baker's yeast (anaphylactic)	allergy to baker's yeast (anaphylactic)	CDCPHINVS	03		
91930004	Allergy to eggs (disorder)	allergy to egg ingestion (anaphylactic)	SCT	04		
294847001	Gelatin allergy (disorder)	allergy to gelatin (anaphylactic)	SCT	05		
294468006	Neomycin allergy (disorder)	allergy to neomycin (anaphylactic)	SCT	06		
294466005	Streptomycin allergy (disorder)	allergy to streptomycin (anaphylactic)	SCT	07		
VXC19	allergy to thimerosal (anaphylactic)	allergy to thimerosal (anaphylactic)	CDCPHINVS	08		
VXC20	allergy to previous dose of this vaccine or to any of its unlisted vaccine components (anaphylactic)	allergy to previous dose of this vaccine or to any of its unlisted vaccine components (anaphylactic)	CDCPHINVS	09		
402306009	Allergy to aluminum (disorder)	allergy (anaphylactic) to alum	SCT			
300916003	Latex allergy (disorder)	allergy (anaphylactic) to latex	SCT			
294530006	Polymyxin B allergy (disorder)	allergy (anaphylactic) to polymycin B	SCT			
VXC21	Previous history of intussusception	Previous history of intussusception	CDCPHINVS			
VXC22	encephalopathy within 7 days of previous dose of DTP or DTaP	encephalopathy within 7 days of previous dose of DTP or DTaP	CDCPHINVS	15		
VXC23	current fever with moderate- to-severe illness	current fever with moderate-to-severe illness	CDCPHINVS	16		
VXC24	current acute illness, moderate to severe (with or without fever) (e.g., diarrhea, otitis media, vomiting)	current acute illness, moderate to severe (with or without fever) (e.g., diarrhea, otitis media, vomiting)	CDCPHINVS	21		

Concept Code	Concept Name	Definition Used in OBX-5	HL7 Table 0396 Code	V 2.3.1 Value NIP004
27624003	Chronic disease (disorder)	chronic illness (e.g., chronic gastrointestinal disease)	SCT	22
VXC25	History of Arthus hypersensitivity reaction to a tetanus-containing vaccine administered < 10 yrs previously	History of Arthus hypersensitivity reaction to a tetanus-containing vaccine administered < 10 yrs previously	CDCPHINVS	
VXC26	underlying unstable, evolving neurologic disorders, (including seizure disorders, cerebral palsy, and developmental delay)	underlying unstable, evolving neurologic disorders, (including seizure disorders, cerebral palsy, and developmental delay)	CDCPHINVS	37
VXC27	immunodeficiency due to any cause, including HIV (hematologic and solid tumors, congenital immunodeficiency, long-term immunosuppressive therapy, including steroids)	immunodeficiency due to any cause, including HIV (hematologic and solid tumors, congenital immunodeficiency, long-term immunosuppressive therapy, including steroids)	CDCPHINVS	36
77386006	Patient currently pregnant (finding)	pregnancy (in recipient)	SCT	39
302215000	Thrombocytopenic disorder (disorder)	thrombocytopenia	SCT	40
161461006	History of - purpura (situation)	thrombocytopenic purpura (history)	SCT	41

EXAMPLES: |VXC18^allergy to bakers yeast^CDCPHINVS| | |77386006^patient currently pregnant^SCT|

	Value Set Name – Vaccination Reactions - IIS						
Concept Code	Concept Name	Definition	efinition Used in OBX-5		V 2.3.1 Value NIP004		
39579001	Anaphylaxis (disorder)	Anaphylaxis		SCT			
81308009	Disorder of brain (disorder)	Encephalopathy		SCT			
VXC9	persistent, inconsolable crying lasting > 3 hours within 48 hours of dose	persistent, inconsolable co within 48 hours of dose	persistent, inconsolable crying lasting > 3 hours within 48 hours of dose				
VXC10	collapse or shock-like state within 48 hours of dose	collapse or shock-like stat dose	collapse or shock-like state within 48 hours of dose				
VXC11	convulsions (fits, seizures) within 72 hours of dose	convulsions (fits, seizures)	convulsions (fits, seizures) within 72 hours of dose				
VXC12	fever of >40.5C (105F) within 48 hours of dose	fever of >40.5C (105F) wit	fever of >40.5C (105F) within 48 hours of dose				
VXC13	Guillain-Barre syndrome (GBS) within 6 weeks of dose	Guillain-Barre syndrome (dose	GBS) within 6 weeks of	CDCPHINVS			
VXC14	Rash within 14 days of dose	Rash within 14 days of do	se	CDCPHINVS			
VXC15	Intussusception within 30 days of dose	Intussusception within 30	days of dose	CDCPHINVS			

EXAMPLES: |39579001^anaphylaxis^SCT| |VXC14^Rash within 14 days^CDCPHINVS|

	Value Set Name – Vaccination Special Indications - IIS						
Concept Code	Concept Name	Definition Used in OBX-5 HL7 Table 0396 Code V 2.3.1 Value					
1 1/X(-7	Rabies exposure within previous 10 days.	Rabies exposure within previous 10 days.		CDCPHINVS			
VXC8	Member of special group	Member of special group		CDCPHINVS			

EXAMPLES: |VXC7^Rabies exposure^CDCPHINVS|

Value Set Name – Immunization Profile Identifiers - IIS					
Concept Code	Concept Name	Definition	Used in MSH-21	HL7 Table 0396 Code	V 2.3.1 Value
Z31	Return Candidate Clients	Return Candidate Clients		CDCPHINVS	

Concept Code	Concept Name	Definition	Used in MSH-21	HL7 Table 0396 Code	V 2.3.1 Value
Z32	Return Immunization History	Return Immunization History		CDCPHINVS	
Z33	Return acknowledegment	Return adknowledgement (no match, too many match, error)		CDCPHINVS	
Z34	Request Immunization History	Request Immunization History		CDCPHINVS	
Z44	Request Evaluated History and Forecast	Request Evaluated History and Forecast		CDCPHINVS	
Z42	Return Evaluated History and Forecast	Return Evaluated History and	Forecast	CDCPHINVS	

EXAMPLES: |Z34^ CDCPHINVS|

Value Set Name – Immunization Schedule Identifiers - IIS						
Concept Code	Concept Name	Definition	Used in OBX-5	HL7 Table 0396 Code	V 2.3.1 Value	
VXC16 ACIP Schedule		This indicates that the current ACIP Schedule of recommendations were used to forecast next		CDCPHINVS		
		doses due.				

EXAMPLES: |VXC16^ACIP Schedule^CDCPHINVS|

Concept Code	Concept Name	Definition Used in OBX-5		HL7 Table 0396 Code	V 2.3.1 Value	
409498004	Anthrax (disorder)	History of anthrax infection		SCT		
397428000	Diphtheria (disorder)	History of diphteria infectio	n.	SCT	24	
76902006	Tetanus (disorder)	History of tetanus infection		SCT	32	
27836007	Pertussis (disorder)	History of pertussis infectio	n.	SCT	29	
40468003	Viral hepatitis, type A (disorder)	History of Hepatitis A infect	ion.	SCT		
66071002	Type B viral hepatitis (disorder)	History of Hepatitis B infect	ion.	SCT	26	
91428005	Haemophilus influenzae infection (disorder)	History of HIB infection.		SCT	25	
240532009	Human Papilloma virus infection (disorder)	History of HPV infection.		SCT		
6142004	Influenza (disorder)	History of influenza infectio	n.	SCT		
52947006	Japanese encephalitis virus disease (disorder)	History of Japanese encephalitis infection.		SCT		
14189004	Measles (disorder)	History of measles infection		SCT	27	
36989005	Mumps (disorder)	History of mumps infection.		SCT	28	
36653000	Rubella (disorder)	History of rubella infection.		SCT	31	
23511006	Meningococcal infectious disease (disorder)	History of meningococcal in	fection.	SCT		
16814004	Pneumococcal infectious disease (disorder)	History of pneumococcal in	fection.	SCT		
398102009	Acute poliomyelitis (disorder)	History of polio infection.		SCT	30	
14168008	Rabies (disorder)	History of rabies infection.		SCT		
18624000	Disease due to Rotavirus (disorder)	History of rotavirus infection.		SCT		
4834000	Typhoid fever (disorder)	History of typhoid infection.		SCT		
111852003	Vaccinia (disorder)	History of vaccinia infection		SCT		
38907003	Varicella (disorder)	History of Varicella infection	٦.	SCT		
16541001	Yellow fever (disorder)	History of yellow fever infec	ction.	SCT		

	Value Set Name – Funding Eligibility Observation Method (IIS)						
Concept Code	Concept Code Concept Name Definition Used in OBX-17 HL7 Table 0396 Code V 2.3.1 Value						
	Eligibility captured at the						
VXC40	immunization level			CDCPHINVS			
	Eligibility captured at the visit						
VXC41	level			CDCPHINVS			

IIS: HL7 Standard Code Sets

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