

Syndromic Quick Guide

MSH

Field Separator	()	1
Encoding Characters	(^, &, ~, \)	2
Sending Facility Namespace ID	Organization (20 - length)	4.1
Sending Facility Universal ID	NPI Number (199 - digit)	4.2
Sending Facility Universal ID Type	"NPI" (6 - length)	4.3
Date/Time of Message	Date	7
Message Code	ADT	9.1
Trigger Event	A01, 03,04,08	9.2
Message Structure	ADT_A01...	9.3
Message Control ID	(ST)	10
Processing ID	(D, T, P)	11
Version ID	2.5.1	12
Accept ACK Type	AL, ER, NE, SU	15
APP ACK Type	AL, ER, NE, SU	16
MSG Profile ID	PH_SS-Ack^SS Sender^2.16...	21

EVN

Event Type	A01, A03, A04, A08	1
Recorded Date/Time	Date/Time	2
Event Facility Namespace ID	Name - Text (20 - Length)	7.1
Event Facility Universal ID	NPI #	7.2
Event Facility Universal ID Type	"NPI"	7.3

PID

Set ID-PID	(Usually "1")	1
Patient Identifier List	Patient ID	3.1
Assigning Authority		3.4
Identifier Type Code	"MR"	3.5
Assigning Facility		3.6
Family Name		5.1
Given Name		5.2
Second Given Name or Initials		5.3
Suffix		5.4
Prefix	Mr., Ms., ...	5.5
Name Type Code	L, S, U	5.7
Patient's Sex	M,F,U	8
Race Identifier	Phin-Vads Code	10.1
Race Text	Text	10.2
Race Name of Coding System	"Phin-Vads"	10.3

Zip or Postal Code	Number	11.5
County/Parish Code	Phin-Vads Code	11.9
Ethnic Group Identifier	Phin-Vads Code	22.1
Ethnic Group Text	Hispanic, ...	22.2
Ethnic Name of Coding System	"Phin-Vads"	22.3
Patient Death Date and Time	Date/Time	29
Patient Death Indicator	yes/no	30

PV1

Set ID - PV1	Usually "1"	1
Patient Class	D, E, I, V, B, O, P, or R	2
Prior Patient Location		6
Attending Doctor ID	NPI , OID, or State DI	7
Visit ID Number	Number	19.1
Visit ID Assigning Authority	Text	19.4
Visit ID Identifier Type Code	"VN"	19.5
Visit ID Assigning Facility		19.6
Discharge Disposition	Discharge Status	36
Admit Date/Time	Date/Time	44
Discharge Date/Time	Date/Time	45

PV2

Admit Reason Identifier	Code Number	3.1
Admit Reason Text	Text	3.2
Admit Reason Coding System	ICD-9, ...	3.3

OBX

Set ID- OBX (1,2,3...)	OBX Seq. Number	1
Value type	NM, CWE, ...	2
Observation Identifier	Code	3.1
Description	Text	3.2
Coding System	LN, PhinQuestion	3.3
Observation Value	Depends OBX2	5
When OBX 2 = TS, OBX 5 data:		
Time		5.1
When OBX 2 = TX		
Text Data		5.1
When OBX 2 = NM		
Numeric Value		5.1
When OBX 2 = CWE		

Identifier		5.1
Text Data		5.2
Name of Coding System		5.3
Alternate Identifier		5.4
Alternate Text		5.5
Name of Alternate Coding System		5.6
Coding System Version ID		5.7
Alternate Coding System Version ID		5.8
Original Text		5.9
When OBX 2 = XAD		
Street Address	IF OBX 3 = SS002	5.1
Dwelling Number		5.1.3
Other Designation		5.2
City		5.3
State or Province		5.4
Zip or Postal Code		5.5
Country		5.6
Address Type		5.7
Other Geographic Designation		5.8
County/Parish Code		5.9
Identifier	A, Temp	6.1
Text	Day^Month^Year^, Cel, [degF]	6.2
Name of Coding System	UCUM, NUCC....	6.3
Observation Result Status	F, W, D, N, S, P...	11

IN1 Is RE now was O

Set PR1	Sequence ID	1
Insurance Plan ID	Text	2
Insurance Company ID	ID Number	3

PR1

Set ID-PR1	Sequence ID	1
Identifier	ICD-9CM, Cpt-4...	3.1
Text	ST	3.2
Name of Coding System ID	C4, ICD9...	3.3
Procedure Date/Time	Date/Time	5

DG1

Set ID-DG1	Sequence ID	1
Diagnosis Code Identifier	Code	3.1
Diagnosis Code Text	Text	3.2
Diagnosis Name of Coding System	Text	3.3
Diagnosis Type	A, W or F	6

Cross Reference Table

R = Required

RE = Required but may be Empty
CE = Conditionally Required but may be Empty
C = Conditionally Required
X = Not supported/Not needed
O = Optional

R	
R	
R	
R	
R	
CE (A03, 04, 08) and X (A01)	
CE (A03, 04, 08) and X (A01)	

RE	
R	
O	
O	
R	
R	
R	
R	
R (A03), RE (A08) and X (A04, 01)	
R	
RE (A08), X (A01, 04) and R (A03)	

RE	
RE	
RE	

R	
R	
R	
R	
R	
RE	
RE	
RE	
RE	

R	
RE	
C	
RE	
RE	
C (R/X)	
O	
O	
RE	

C(R/O)	
O	
O	
RE	
RE	
RE	
RE	
O	
O	
RE	
C	
C	
C	
R	

R	
R	
R	

R	
RE	
O	
CE	
R	

R	
R	
RE	
R	
R	