



Form	Entity Name	Entity ID	Definition	Data Type (code)	Data Type (description)	Validation Rule	Repeated Data	Code Table	Data requirement (Certified Level 1)	Example (Certified Level 1)
Clinical Note / Summary	Report start date	1003347	The start date of the period in which the clinical note/summary intended to cover. For example, this can be the admission date for inpatient episode.	TS	Time stamp				M	12/9/2010
Clinical Note / Summary	Report end date	1003348	The end date of the period in which the clinical note/summary intended to cover. For example, this can be the discharge date for inpatient episode.	TS	Time stamp	Not earlier than the [Report start date]			O	16/09/2010
Clinical Note / Summary	Type of clinical note / summary code	1003349	[eHR value] defined in "Type of clinical note / summary" code table. Type of clinical note/summary is the type of clinical service, e.g. inpatient, outpatient, under which the clinical note/summary is created.	CE	Coded element			Type of clinical note / summary	M	IP
Clinical Note / Summary	Type of clinical note / summary description	1003350	[eHR description] defined in "Type of clinical note / summary" code table, it should be the corresponding description of the selected [Type of clinical note / summary code]. Type of clinical note/summary is the type of clinical service, e.g. inpatient, outpatient, under which the clinical note/summary is created.	ST	String			Type of clinical note / summary	M	In-patient record
Clinical Note / Summary	Type of clinical note / summary local description	1003351	The local description of the type of clinical note/summary which is the type of clinical service, e.g. inpatient, outpatient, under which the clinical note/summary is created.	ST	String				M	Hospitalisation record
Clinical Note / Summary	Clinical note / summary report title	1003352	Report title of the clinical note / summary	ST	String				M	Discharge summary
Clinical Note / Summary	Clinical note / summary report date	1003353	The documentation date of the clinical note / summary report. If this documentation date is not available, use the report creation date	TS	Time stamp				O	2/1/2012
Clinical Note / Summary	Clinical note / summary report (PDF)	1003354	Clinical note / summary report in Portable Document Format (PDF)	ED	Encapsulated data				M if [Clinical note / summary report (Text)] is blank	
Clinical Note / Summary	Clinical note / summary report (Text)	1003355	Clinical note / summary report in text format	TX	Text				M if [Clinical note / summary report (PDF)] is blank	
Clinical Note / Summary	Clinical note / summary highlight	1003356	Summary of important information for the clinical note / summary, e.g. important findings	ST	String				O	Fever for Ix
Clinical Note / Summary	Clinical note / summary remark	1003357	The additional information about the clinical note / summary	TX	Text				O	abc

**Type of clinical note / summary**

Purpose : To indicate type of clinical note / summary

Source : HA ePR

Term ID	eHR Value	eHR Description	Definition
	AE	Accident and emergency record	Record generated during receiving care in Accident and Emergency Department
	OP	Outpatient record	Record generated during out-patient attendance
	IP	Inpatient record	Record generated during inpatient care
	OTH	Other record	Record generated with unidentified healthcare service type is received